

System (TIMS) is used for RVCT data entry and electronic transmission of TB case reports to CDC. TIMS provides reports, query functions, and export functions to assist in analysis of the data. CDC publishes an annual report summarizing national TB statistics and also periodically conducts special analyses for publication in peer-

reviewed scientific journals to further describe and interpret national TB data. These data assist public health officials and policy makers in program planning, evaluation, and resource allocation. Reporting Areas also review and analyze their RVCT data to monitor local TB trends, evaluate program success, and

assist in focusing resources to eliminate TB.

No other federal agency collects this type of national TB data. In addition to providing technical assistance for use of the RVCT, CDC also provides Reporting Areas with technical support for the TIMS software. There is no cost to respondents.

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total response burden (in hours)
Local/State/Territorial Health Department .....	60	278	30/60	8340
Total .....	.....	.....	.....	8340

Dated: April 2, 2002.

**Nancy E. Cheal,**

*Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.*

[FR Doc. 02-8594 Filed 4-9-02; 8:45 am]

**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

#### Drug Information Association and Food and Drug Administration on the Fourth Project Management Workshop: Effective Agency/Industry Interactions to Expedite Drug Development; Public Workshop

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice of public workshop.

**SUMMARY:** The Food and Drug Administration (FDA) in cosponsorship with the Drug Information Association (DIA) is announcing a public workshop entitled "The Fourth Project Management Workshop: Effective Agency/Industry Interactions to Expedite Drug Development." The workshop will focus on facilitating drug development and drug review processes.

**Date and Time:** The workshop will be held on April 30, 2002, from 8:30 a.m. to 5 p.m., May 1, 2002, from 8:30 a.m. to 5 p.m., and May 2, 2002, from 8:30 a.m. to 12:30 p.m.

**Location:** The workshop will be at the Hyatt Regency Bethesda, 1 Bethesda Metro Center, Bethesda, MD.

**Contacts:** For information about this notice: Michael D. Anderson, Center for Biologics Evaluation and Research (CBER) (HFM-17), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852, 301-827-6210,

FAX 301-594-1944, e-mail:

Andersonm@cber.fda.gov.

**For information about the workshop:** David Roeder, Center for Drug Evaluation and Research (CDER) (HFD-104), Food and Drug Administration, 9201 Corporate Blvd. Rockville, MD 20850, 301-827-2488, FAX 301-827-2520, e-mail: Roederd@cder.fda.gov, or Gail Sherman, Center for Biologics Evaluation and Research (HFM-42), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852, 301-827-2000, FAX 301-827-3079, e-mail: Sherman@cber.fda.gov, or Camela Pastorius, Drug Information Association (DIA), 501 Office Center Dr., suite 450, Fort Washington, PA 19034, 215-591-3303, FAX 215-641-1229, e-mail: Camela.Pastorius@diahome.org. If you need special accommodations due to a disability, please contact Camela Pastorius (address above) by April 23, 2002.

**Registration:** Mail or fax your registration information and registration fee to DIA, P.O. Box 7777-W8405, Philadelphia, PA 19175. You may obtain registration forms from DIA (see contact information) or from FDA at <http://www.fda.gov/cber/meetings.htm>. Additional information regarding registration fees and online registration can be found at <http://www.diahome.org/docs/Events/Events-search-detail.cfm?EventID=0201>.

**SUPPLEMENTARY INFORMATION:** FDA (CBER and CDER) and DIA are cosponsoring a workshop as part of a continuing effort to develop higher levels of teamwork, communication, and procedural knowledge to facilitate drug development and review in the United States. The workshop's target audience is FDA regulatory project managers and pharmaceutical industry project management and regulatory teams who have mid-level experience

and are involved in daily agency-industry interactions.

The workshop will present three major themes:

- Planning and Teamwork—attendees will participate in activities designed to highlight the value of teamwork, and to exchange ideas about team organization and management;

- Understanding the Process of Regulatory Project Management—the workshop will explore parallel objectives and activities within industry and FDA and identify opportunities for effective interaction. Attendees will also share ideas for optimizing working relationships between project management and regulatory professionals and between industry representatives and FDA regulatory project managers;

- Key Factors for Success—the workshop will present a set of experience-based factors for successful FDA/industry interaction.

Dated: April 4, 2002.

**Margaret M. Dotzel,**

*Associate Commissioner for Policy.*

[FR Doc. 02-8612 Filed 4-9-02; 8:45 am]

**BILLING CODE 4160-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Advisory Committee on Training in Primary Care Medicine and Dentistry; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92-463), announcement is made of the following National Advisory body scheduled to meet during the month of May 2002.

*Name:* Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD).

*Date and Time:* May 13, 2002; 8:30 a.m.—5 p.m., May 14, 2002; 8:30 a.m.—5 p.m.,

*Place:* The Radisson Barcelo Hotel, 2121 P Street, NW., Washington, DC 20037.

The meeting is open to the public.

*Purpose:* The Advisory Committee will address policy recommendations and needs for program development to improve the public health by enhancing the interface between primary care practitioners and the public health infrastructure in the United States. The contents of this meeting will provide the basis for the second report of the Advisory Committee, which will be submitted to Congress and the Secretary of the Department of Health and Human Services in November 2002.

*Agenda:* The meeting on Monday, May 13 will begin with welcoming and opening comments from the Chair and Executive Secretary. A plenary session will follow, in which two speakers will characterize critical issues relating to needs for improving the incorporation of public health into primary care education and training to create practitioners who will function in close collaboration with the public health infrastructure. Three speakers will then provide introductions to workgroup sessions which will follow. The Advisory Committee will then divide into three workgroups which will focus on developing recommendations for changes in education and training that will strengthen the primary care-public health interface, specifically in relation to access to care, interdisciplinary teamwork, and acute and chronic public health issues.

On May 14, workgroups will reconvene in the morning to finalize recommendations. A plenary session will follow, with reports by workgroup chairs, general discussion, and decisions by the Advisory Committee on their official recommendations. The Advisory Committee will also discuss plans for future work, and will close following an opportunity for public comments.

Anyone interested in obtaining a roster of members or other relevant information should write or contact Stan Bastacky, D.M.D., M.H.S.A., Deputy Executive Secretary, Advisory Committee on Training in Primary Care Medicine and Dentistry, Parklawn Building, Room 9A-21, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-6326. The web address for information on the Advisory Committee is <http://www.bhpr.hrsa.gov/dm/actpcmd.htm>.

Dated: April 4, 2002.

**Jane M. Harrison,**

*Director, Division of Policy Review and Coordination.*

[FR Doc. 02-8613 Filed 4-9-02; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Office of Refugee Resettlement Grant to the New York Office of Temporary and Disability Assistance, Bureau of Refugee and Immigrant Affairs

**AGENCY:** Office of Refugee Resettlement, HHS.

**ACTION:** Grant award announcement.

**SUMMARY:** Notice is hereby given that an award is being made to the New York Office of Temporary and Disability Assistance, Bureau of Refugee and Immigrant Affairs, Albany, New York in the amount of \$3,000,000 to provide funds to refugees in the New York City area in need of employment assistance due to the economic impact of the September 11, 2001 attack on the World Trade Center. The events of September 11th have caused disruptions in refugee employment as a result of the economic downturn in New York City. Many of the New York City businesses that traditionally provide employment to refugees are located in lower Manhattan. A number of hotels and restaurants that employ refugees were damaged or destroyed. Many refugees have experienced lay-offs in the hotel and service industry. These unemployed refugees are now unable to find new jobs because newly unemployed skilled workers have begun to compete for entry level jobs.

Many of these refugees arrived in the United States some time ago and are no longer eligible for refugee cash assistance (RCA) and refugee medical assistance (RMA). The New York Bureau of Refugee and Immigrant Affairs will provide funds to New York City refugee service providers for mental health services, employment training and assistance for displaced workers, community and employer outreach and education, transportation assistance, and direct assistance.

After the appropriate reviews, it has been determined that the need for additional services is compelling. The period of this funding will extend through July 31, 2003.

#### FOR FURTHER INFORMATION CONTACT:

Gayle Smith, Office of Refugee Resettlement, Administration for Children and Families, 370 L'Enfant Promenade, SW., Washington, DC 20447, telephone (202) 205-3590.

Dated: March 26, 2002.

**Nguyen Van Hanh,**

*Director, Office of Refugee Resettlement.*

[FR Doc. 02-8616 Filed 4-9-02; 8:45 am]

**BILLING CODE 4184-01-M**

## DEPARTMENT OF THE INTERIOR

### Notice of Availability of the Finding of No Significant Impact (FONSI) on the Final Environmental Assessment for the Diamond Fork System 2002 Proposed Action Modifications

**AGENCY:** Office of the Assistant Secretary—Water and Science, Department of the Interior.

**ACTION:** Notice of availability of the Finding of No Significant Impact (FONSI) on the Final Environmental Assessment for the Diamond Fork System 2002 Proposed Action Modifications.

**SUMMARY:** On March 29, 2002, Ronald Johnston, Program Director, Central Utah Project Completion Act Office, Department of the Interior (Interior), signed the Finding of No Significant Impact (FONSI) which documents the selection of the Proposed Action Modifications as presented in the Final Environmental Assessment for the Diamond Fork System 2002 Proposed Action Modifications (2002 Modifications EA). Interior has determined that implementing the modifications to the Proposed Action Alternative described in the 2002 Modifications EA will not have a significant impact on the quality of the human environment and that an environmental impact statement is not required.

The following features will be constructed as part of the modifications to the Proposed Action: (1) Sixth Water Connection; (2) Tanner Ridge Tunnel; (3) Upper Diamond Fork Pipeline; (4) Upper Diamond Fork Flow Control Structure; (5) Upper Diamond Fork Shafts; (6) Aeration Chamber and Connection to Upper Diamond Fork Tunnel; (7) Upper Diamond Fork Tunnel; and (8) Diamond Fork Flow Control Facility.

The Proposed Action Modifications will be operated on an interim basis the same as described in the July 1999 Diamond Fork System Final Supplement to the Final Environmental Impact Statement, including the quantity and timing of minimum streamflows and the flexibility to other operational scenarios, except for the discharge location of the minimum streamflows into Diamond Fork Creek. The potential for generating