

departments of health, and other agencies; and provides otherwise unavailable anti-parasitic drugs to healthcare providers and ensures compliance with FDA's regulations; (4) supports the agency's overall emergency response mandate; (5) conducts field and laboratory investigations and research on the etiology, epidemiology, chemotherapy and other aspects of parasitic diseases to develop new tools for identifying and controlling parasitic diseases; (6) carries out and evaluates operational research to evaluate current strategies and develops new strategies to support programmatic activities for the control and elimination of parasitic diseases, and provides technical assistance to ministries of health, WHO, and other agencies and organizations for these programs; (7) provides training to EIS officers, Preventive Medicine Residents, public health prevention specialists, and other fellows and students; and (8) prepares and disseminates health communication materials on the prevention and treatment of parasitic diseases.

Entomology Branch (CRKD). (1) conducts global surveillance, field investigations, and laboratory studies on the vectors of parasitic diseases of humans, with a focus on malaria, Chagas' disease, lymphatic filariasis, onchocerciasis, and leishmaniasis, with a particular emphasis on the anopheline vectors of malaria; (2) serves as WHO Collaborating Centers for pesticides resistance, anopheline vector identification, antimalarial drug evaluation, and vector control; (3) develops methods supporting the global use of pesticides for control of vector-borne diseases, the management of insecticide resistance, and the monitoring of anti-parasitic drugs; (4) serves as an international reference reagent and anopheline vector repository, providing materials, training, and information related to malaria vectors; and (5) provides entomological consultation, epidemic aid, and training to local, state, Federal and foreign agencies and international health organizations on surveillance and control of malaria and parasitic vector-borne diseases.

Laboratory Science and Diagnostics Branch (CRKE). (1) provides reference and laboratory diagnostic services to physicians and laboratories; (2) transfers technologies and expertise in laboratory diagnosis of parasitic infections to public health laboratories; (3) supports the agency's overall emergency response mandate; (4) conducts field and laboratory investigations and research on the biology, ecology, pathogenesis, immunology, genetics, host-parasite

relationships, and other aspects of parasitic diseases to develop new tools for identifying and controlling parasitic diseases; (5) develops and tests new laboratory methods and tools for improved diagnosis, control, and prevention of parasitic diseases, and conducts laboratory training courses for public health laboratories; (6) conducts laboratory, and field-based research projects, including laboratory and field studies on parasitic diseases to define biology, ecology, parasite species differences, host-parasite relationships, diagnostics, host immune responses; (7) conducts laboratory studies of malaria parasites utilizing animal models and in vitro systems for parasitic relationships, chemotherapy, and vaccine evaluation studies; efficacy and safety of antimalarial drugs for chemoprophylaxis and chemotherapy; and training to malaria-endemic countries; conducts assessments of malaria monitoring and evaluation methods; and (8) provides training to Emerging Infectious Disease fellows, American Society of Microbiology/ Postdoctoral Fellows, and other fellows and students.

V. Under Part C, Section C–B, Organization and Functions, the following organizational unit is deleted in its entirety:

- Food Safety Office (CVLB13)
- Quarantine and Border Health Services Branch (CVLCB)
- Immigrant, Refugee, and Migrant Health Branch (CVLCC)
- Geographic Medicine and Health Promotion Branch (CVLCD)
- International Infection Control Activity (CVLD14)
- One Health Office (CVLE13)
- Scientific Programs and Development Branch (CVLGC)
- Emergency Preparedness and Response Branch (CVLGD)
- Laboratory Preparedness and Response Branch (CVLGG)
- Biotechnology Core Facility Branch (CVLHD)
- Reagent and Diagnostic Services Branch (CVLHG)

Delegations of Authority

All delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegation, provided they are consistent with this reorganization.

(Authority: 44 U.S.C. 3101)

Robin D. Bailey, Jr.,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–14704 Filed 7–11–23; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Reorganization of the Office of Communications

AGENCY: Centers for Disease Control and Prevention (CDC), the Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: CDC has modified its structure. This notice announces the reorganization of the Office of Communications (OC). OC has established the Office of Emergency Risk Communications by realigning the Emergency Risk Communications Branch formerly of the Center for Preparedness and Response, Division of Emergency Operations. Additionally, OC retitled and updated mission and functional statements updates to some organizational entities.

DATES: This reorganization was approved by the Director of CDC on June 28, 2023.

FOR FURTHER INFORMATION CONTACT: D'Artonya Graham, Office of the Chief Operating Officer, Office of the Director, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS TW–2, Atlanta, GA 30329; Telephone 770–488–4401; Email: reorgs@cdc.gov.

SUPPLEMENTARY INFORMATION: Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772–76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 88 FR 9290–9291, dated February 13, 2023) is amended to reflect the reorganization of the Office of Communications, Immediate Office of the Director, Centers for Disease Control and Prevention. Specifically, the changes are as follows:

I. Under Part C, Section C–B, Organization and Functions, insert the following:

Office of Emergency Risk Communications (CAU17). (1) prepares for and coordinates CDC's communication response to public Incident Management System (IMS)

health threats and emergencies, serving as the agency's primary communication liaison with Federal (including through Emergency Support Function #15, External Affairs), state, tribal, local, and territorial, and international partners; (2) identifies, develops, coordinates, and monitors strategies for translation and delivery of CDC's emergency risk communication messages and information to specific audiences for maximum health impact; (3) coordinates and integrates emergency and risk communication activities within CDC to respond to public health emergencies; (4) co-leads the Joint Information Center (JIC) within an IMS during CDC emergency responses; (5) develops emergency risk communication recommended practices and curriculum, and supports emergency risk communication capacity building through technical assistance and training; (6) ensures that CDC's emergency risk communication messages are available, timely, accessible, understandable, culturally appropriate, and actionable; (7) develops and manages channels and partner engagement mechanisms to distribute emergency risk communication messages before, during, and after public health emergencies; (8) creates and manages systems, procedures, processes, and platforms (including CDC's Emergency Preparedness and Response internet site) for CDC's emergency communication activities; (9) manages and implements protocols to clear public health emergency information; (10) conducts research, monitoring, and evaluation to assess awareness, knowledge, attitudes, reactions, and behaviors related to urgent health threats and refine preparedness, readiness, and emergency risk communication strategies and tactics; and (11) supports the development, maintenance, and implementation of policies related to public health emergency risk communication activities.

II. Under Part C, Section C–B, Organization and Functions, retitle the following organizational units:

- Office of External Engagement (CAU15) to the Office the CDC Museum (CAU15)

III. Under Part C, Section C–B, Organization and Functions, delete the mission or functional statements for and replace with the following:

Office of Communications (CAU). The mission of the Office of the Communications (OC) is to enhance CDC's communication impact, manage the high visibility of the agency and its

senior leaders, and guide public health messaging through support to programs. The office: (1) provides leadership, direction, support, and assistance to CDC's Centers, Institute and Offices (CIOs) to implement communication strategies; (2) promotes clear, accessible, and inclusive communication; (3) conducts and promotes health communication science practices to address agency priorities; (4) oversees and manages CDC interactions with news media; (5) develops strategy and oversees communication response for crisis and agency priorities; (6) strategically protects and advances CDC's reputation, credibility and interests; (7) coordinates CDC partnerships to advance communication-related relationships; (8) develops, guides, and implements internal and external public affairs strategies and activities; (9) provides leadership on all aspects of digital communications; (10) provides leadership for emergency and risk communications and CDC's communication response to public IMS health threats and emergencies; and (11) supports or provides communication services, including but not limited to broadcast, multimedia, public information, graphics and design elements, translation, printing, and photography.

Office of the Director (CAU1). (1) manages, directs, and evaluates activities of the OC; (2) makes sure CDC communication activities comply with HHS-established policies; (3) communicates the value and benefits of CDC programs; (4) leads strategic communication activities addressing agency-wide priorities; (5) provides strategic communication support for CDC's emergency responses and JIC; (6) provides reputation-management expertise and counsel; (7) provides leadership and guidance to communicate decisions made by CDC's leadership in an efficient and clear manner; (8) coordinates with CIOs on communication activities; (9) serves as the central point of contact for Office of the Director executive communication, including enterprise communication, speaking engagements, announcements, and speeches; (10) provides communication leadership on equity, healthy equity, diversity, inclusion, and accessibility initiatives; (11) provides leadership and guidance to manage and operate OC's programs, including the areas of fiscal management, human capital, travel, and other administrative services; (12) develops and tracks annual budget and spend plan to fulfill CDC's communication priorities; (13)

serves as OC's primary point of contact with CDC's Office of Financial Resources on contracts and budget matters; (14) ensures communication products authored by CDC staff members or published by CDC are released for public use in a timely manner, are of the highest quality, and are scientifically sound, inclusive, and understandable; (15) provides leadership and strategic direction for emergency and risk communication activities; and (16) prepares for and coordinates CDC's communication response to IMS health threats and emergencies, serving as the agency's primary communication liaison with Federal state, tribal, local, and territorial, and international partners.

Office of the CDC Museum (CAU15). (1) manages CDC's scientific museum and learning center, the David J. Sencer CDC Museum; and (2) implements strategies to educate visitors about the value of public health through museum exhibitions, CDC's historical collection, student programs, tours, and other engagement strategies.

Division of Communication Sciences and Services (CAUE). (1) promotes the scientific practice of health communication and disseminates evidence-based knowledge to practitioners of health communication, marketing, and media; (2) provides agency-wide support for communication services including photography, translation, printing, conference materials, and communication consultation/analysis leadership and support; (3) guides CIOs on applying measures of effectiveness for public health communication efforts; and (4) leads CDC's health literacy improvement work and Plain Writing Act implementation.

Communication Support and Services Branch (CAUEC). (1) provides communication consultation and support services (*e.g.*, photography, multi-lingual translation, writing, and editing); (2) manages multi-year, multi-vendor CDC-wide communication contracts for CIOs; (3) oversees agency-wide print management program; and (4) coordinates the materials for use at public health conferences.

IV. Under Part C, Section C–B, Organization and Functions, the following organizational unit is deleted in its entirety:

- Emergency and Risk Communications Branch (CBCDB) within the Division of Emergency Operations (CBCD), Center for Preparedness and Response (CBC)

Delegations of Authority

All delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegation, provided they are consistent with this reorganization.

(Authority: 44 U.S.C. 3101)

Robin D. Bailey, Jr.,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–14700 Filed 7–11–23; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention****Reorganization of the Office of Public Health Data, Surveillance, and Technology**

AGENCY: Centers for Disease Control and Prevention (CDC), the Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: CDC has modified its structure. This notice announces the reorganization of the Office of Public Health Data, Surveillance, and Technology (OPHDST).

DATES: This reorganization was approved by the Director of CDC on June 28, 2023.

FOR FURTHER INFORMATION CONTACT: D'Artonya Graham, Office of the Chief Operating Officer, Office of the Director, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS TW–2, Atlanta, GA 30329; Telephone 770–488–4401; Email: reorgs@cdc.gov.

SUPPLEMENTARY INFORMATION: Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772–76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 88 FR 9290–9291, dated February 13, 2023) is amended to reflect the reorganization of the Office of Public Health Data, Surveillance, and Technology, Centers for Disease Control and Prevention. Specifically, the changes are as follows:

I. Under Part C, Section C–B, Organization and Functions, insert the following:

- Office of Public Health Data, Surveillance, and Technology (CAK)
- Office of the Director (CAK1)

- Office of the Deputy Director for Technology and Products (CAK12)
- Technology Strategy Office (CAK122)
- Technology Implementation Office (CAK123)
- Office of the Deputy Director of Management and Operations (CAK13)
- Office of Communications (CAK132)
- Management and Operations Office (CAK133)
- Customer Success and Engagement Unit (CAK14)
- Policy, Legislative Affairs, and Partnerships Unit (CAK15)
- Detect and Monitor Division (CAKB)
- Office of the Director (CAKB1)
- Public Health Data Transmission Branch (CAKBB)
- Integrated Monitoring Branch (CAKBC)
- Investigate and Respond Division (CAKC)
- Office of the Director (CAKC1)
- Public Health Investigation Tools Branch (CAKCB)
- Analytics and Operations Tools Branch (CAKCC)
- Inform and Disseminate Division (CAKD)
- Office of the Director (CAKD1)
- Actionable Data Branch (CAKDB)
- Dissemination Technology and Services Branch (CAKDC)
- Data Policy and Standards Division (CAKE)
- Office of the Director (CAKE1)
- Data Standards Branch (CAKEB)
- Data Policy Branch (CAKEC)
- Platforms Division (CAKG)
- Office of the Director (CAKG1)
- Shared Technology Platform Branch (CAKGB)
- Shared Data Platform Branch (CAKGC)

II. Under Part C, Section C–B, Organization and Functions, add the following functional statements:

Office of Public Health Data, Surveillance, and Technology (CAK). The mission of the Office of Public Health Data, Surveillance, and Technology (OPHDST) is to optimize timely access, exchange, and integration of public health data while driving efficiency and consolidation of data and technology systems supported by CDC across all levels of public health and advancing open data and dissemination to inform decision making and action. In summary, the Office ensures the right data, at the right time, is in the right hands so people can make informed decisions. To carry out this mission, OPHDST: (1) serves as the principal advisor to the CDC Director and Immediate Office of the Director (IOD) on public health data, surveillance, and technology; (2) advises the CDC Director

and IOD in formulating and communicating data, surveillance, and technology strategic initiatives and policies, including the formulation of the Agency's Public Health Data Strategy; (3) informs and represents the CDC Director and IOD on key public health data, surveillance, and technology issues; (4) provides overall strategic leadership and direction for the Public Health Data Strategy, public health data assets, products, platforms, governance, and policy, as well as statistics, surveillance, advanced analytics, informatics and epidemiology; (5) identifies, facilitates, promotes, leads, and drives cross-center and interagency collaboration, innovation, and new initiatives related to public health data assets, products, platforms, governance, statistics, advanced analytics, surveillance, informatics and epidemiology; (6) coordinates with CDC leaders and public health partners to develop and implement public health data, surveillance, and technology goals and objectives to meet public health core mission needs; (7) identifies public health data, surveillance, advanced analytics, and technology issues of importance and executes strategic initiatives to address them, including developing shared goals and monitoring progress and accomplishments; (8) leads policy, communications, partner engagement, management, and operations for the office; (9) leads the establishment, evaluation, monitoring, and reporting of accountability and measurable outcomes for the Office, including implementation of the Public Health Data Strategy; (10) provides leadership and support to OPHDST components on information resources policy, information security, and shared, collaborative services; (11) integrates security, local governance, and project management across each of OPHDST's investment's life cycle; (12) coordinates technical assistance, support, communication, guidance, and engagement for public health data, surveillance, and technology to ensure alignment with the Public Health Data Strategy with CDC programs; state, tribal, local, and territorial (STLT) agencies, and other external partners or organizations; (13) leads Information Technology and Data Governance coordination to ensure data assets and investments are aligned with the Public Health Data Strategy and priorities, the Data Modernization Initiative (DMI) and Federal requirements; and (14) provides supervision and oversight to the National Center for Health Statistics.