

Congress to Lester M. Crawford, Acting Commissioner, Food and Drug Administration, dated May 24, 2005.

2. Letter from Margaret Reagan (Premiere, Inc.), Rick Pollack (American Hospital Association), Larry Gage (National Association of Public Hospitals and Health Systems), Charles Kahn (Federation of American Hospitals), Edward Goodman (Veterans Health Administration), Michael Rodgers (Catholic Health Association of the United States), Robert Dickler (Association of American Medical Colleges) to Lester Crawford, Acting Commissioner, Food and Drug Administration, dated May 9, 2005.

3. The Food and Drug Law Institute/CDRH Report on Meeting to Discuss Unique Device Identification, (<http://www.fda.gov/cdrh/ocd/uidevices061405.html>), April 14 and 15, 2005.

4. ECRI/FDA White Paper: Automatic Identification of Medical Devices, (<http://www.fda.gov/cdrh/ocd/ecritask4.html>), August 17, 2005.

5. The Food and Drug Law Institute/CDRH, "Report on Meeting to Discuss Unique Device Identification," (<http://www.fda.gov/cdrh/ocd/uidevices011606.html>), October 27, 2005.

6. "ERG Final Report: Unique Identification for Medical Devices," (<http://www.fda.gov/cdrh/ocd/udi/erg-report.html>), March 22, 2006.

7. "Ensuring the Safety of Marketed Medical Devices: CDRH's Medical Device Safety Program," (<http://www.fda.gov/cdrh/postmarket/mdpi-report.pdf>), January 18, 2006.

V. Comments

Interested persons may submit to the Division of Dockets Management (see ADDRESSES) written or electronic comments regarding this document. Submit a single copy of electronic copies or two paper copies of any mailed comments are to be submitted, except that individuals may submit one paper copy. Comments are to be

identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

Dated: July 27, 2006.

Jeffrey Shuren,
Assistant Commissioner for Policy.
[FR Doc. 06-6870 Filed 8-9-06; 8:45 am]

BILLING CODE 4160-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301) 443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Assessment of the Engagement of Historically Black Colleges and Universities in Campus and Community-Based Activities to Eliminate Health Disparities (NEW)

The Health Resources and Services Administration (HRSA) plans to conduct a survey of 525 university

administrators at Historically Black Colleges and Universities (HBCUs) to collect information not otherwise available about the extent to which HBCUs have engaged in health promoting activities on campus and in their surrounding communities that are designed to eliminate health disparities among African Americans. The results of this survey will be used by HRSA's Office of Minority Health and Health Disparities (OMHHD) to obtain information regarding the engagement of HBCUs in health disparities activities. The results of the survey will also permit OMHHD (1) to describe the origins, structure, content, and intensity of such activities, (2) to document the level of support for campus and community activities among administrative leaders at HBCUs, (3) to document the factors that facilitate or hinder the ability of HBCUs to engage in campus and community activities to eliminate health disparities, and (4) to determine whether there is a need among HBCUs for additional assistance that will allow them to expand their role and improve their effectiveness in addressing health disparities.

The survey process will include a web-based survey to be completed by targeted respondents. Follow-up telephone calls will be conducted with respondents who do not complete the online survey. Approximately 5 administrators will be surveyed at each of the 105 recognized HBCUs. The types of administrators to be surveyed include Presidents, Deans of Faculty, Deans of Students, and staff and/or faculty that are leaders for programs that are associated with eliminating health disparities.

The burden estimate for this project is as follows:

Form	No. of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Survey	525	1	525	.75	394

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: John Kraemer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: August 8, 2006.

Cheryl R. Dammons,
Director, Division of Policy Review and Coordination.
[FR Doc. E6-13217 Filed 8-10-06; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Council on Graduate Medical Education; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: Council on Graduate Medical Education (COGME).

Dates and Times: September 6, 2006, 8:30 a.m.–5 p.m.; and September 7, 2006, 8:30 a.m.–4 p.m.

Place: Hilton Washington DC North/Gaithersburg, 620 Perry Parkway, Gaithersburg, Maryland 20877.

Status: The meeting will be open to the public.

Agenda: The agenda for September 6 in the morning will include: Welcome and opening comments from the Acting Chair and Acting Executive Secretary of COGME and senior management staff of the Health Resources and Services Administration. Following will be an election of the Chair of COGME.

There will be an orientation for new council members. Later that morning there will be a presentation of resource papers on the issue of National Service for Physicians, followed by discussion. In the afternoon there will be a presentation of resource papers on the need for graduate medical education financing flexibility; a discussion of the papers will follow. There will be a discussion of next day's activities needed for the preparation of two COGME reports covering the two issues presented in the resource papers. Writing group members within COGME will be identified for each of the two reports.

In the morning of September 7, COGME members will receive ethics training as appropriate. There will be a presentation and discussion of a sixth resource paper on the need for GME flexibility. Following these discussions, the Council members will break out into two writing groups. After about four hours of writing group discussions, COGME members will reconvene in plenary session. A report will be given by the two writing group chairs of draft recommendations, proposed outline and list of members to draft each section of the two reports. There will be a discussion of the process and time-frame for producing the two report drafts.

Agenda items are subject to change as priorities dictate.

FOR FURTHER INFORMATION CONTACT:

Jerald M. Katzoff, Acting Executive Secretary, COGME, Division of Medicine and Dentistry, Bureau of Health Professions, Parklawn Building, Room 9A–27, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443–6785.

Dated: August 7, 2006.

Cheryl R. Dammons,

Director, Division of Policy Review and Coordination.

[FR Doc. E6–13214 Filed 8–10–06; 8:45 am]

BILLING CODE 4165–15–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) (60 FR 56605, as amended November 6, 1995; amended at 67 FR 46519, July 15, 2002; 68 FR 787–793, January 7, 2003, 68 FR 64357–64358, November 13, 2003; at 69 FR 56433–56434, September 21, 2004 and; last amended at 70 FR 61293–61294, October 21, 2005.)

This notice reflects changes to the organization and functions of the Office of the Administrator (AO) and the HIV/AIDS Bureau (RV).

Chapter RA—Office of the Administrator

Section RA–10, Organization

- (1) Immediate Office of the Administrator (RA);
- (2) Office of Equal Opportunity and Civil Rights (RA2);
- (3) Office of Planning and Evaluation (RA5);
- (4) Office of Communications (RA6);
- (5) Office of Minority Health and Health Disparities (RA9);
- (6) Office of Legislation (RAE);
- (7) Office of Information Technology (RAG); and
- (8) Office of International Health Affairs (RAH).

Section RA–20, Function

Delete the functional statement in its entirety and replace with the following:

Immediate Office of the Administrator (RA)

(1) 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 verbal and written communications with health organizations in the public and private sectors to support the mission of HRSA; (5) directs the Center for Quality; and (6) manages the legislative and communications programs for the agency.

Chapter RV—HIV/AIDS Bureau

Section RV–10, Organization

Section RV–20, Functions

Delete the functional statement for the Office of the Associate Administrator in its entirety and replace with the following:

Provides leadership and direction for the HIV/AIDS programs and activities of the Bureau and oversees its relationship with other national health programs. Specifically: (1) Coordinates the formulation of an overall strategy and policy for HRSA AIDS programs; (2) coordinates the internal functions of the Bureau and its relationships with other national health programs; (3) establishes AIDS program objectives, alternatives, and policy positions consistent with broad Administration guidelines; (4) provides direction and leadership for the Agency's AIDS grants and contracts programs; (5) reviews AIDS related program activities to determine their consistency with established policies; (6) represents the Agency and the Department at AIDS related meetings, conferences and task forces; (7) serves as principal contact and advisor to the Department and other parties concerned with matters relating to planning and development of health delivery systems related to HIV/AIDS; (8) develops and administers operating policies and procedures for the Bureau; (9) directs and coordinates Bureau Executive Secretariat activities; (10) serves in developing and coordinating Telehealth programs and in facilitating electronic dissemination of best practices in health care to health care professionals; (11) provides grantees/States with accurate and timely interpretations of the Bureau's program expectations, requirements, guidance, and Federal legislation; and (12) arranges and provides technical assistance to assure that the grantees meet program expectations.

Section RA–30, Delegation of Authority

All delegations 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 re-delegation. I hereby ratify and affirm all actions taken by any HRSA official which involves the exercise of these authorities prior to the effective date of this delegation.

This reorganization is effective upon the date of signature.