

meeting. When FDA sets a new date for the meeting, we will publish a notice announcing the date, time, and location in the **Federal Register**.

Dated: April 19, 2002.

Margaret M. Dotzel,

Associate Commissioner for Policy.

[FR Doc. 02-10225 Filed 4-22-02; 4:55 pm]

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, 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: Needs Assessment of the Black Lung Clinics Program: New

The Bureau of Primary Health Care (BPHC), Health Resources and Services Administration (HRSA), is planning to conduct a needs assessment of the Black Lung Clinics Program. The purpose of this study is to obtain data about the Black Lung Clinic Program grantees/sites and the services they provide to active and retired coal miners. The study consists of two sections: (1) a written and telephone survey of the site Program Coordinators about the patients and the services they provide, as well as services that patients would like to receive, but which are not available; and, (2) a measurement of the costs associated with delivering requisite

services to this population for whom data will be obtained from secondary sources. The data collected will provide policymakers with a better understanding of the resources needed to continue to support and expand the program. The assessment will provide new information about the organization, financing, and delivery of services to active and retired coal miners in Black Lung Clinic Programs.

Data from the survey and costing will provide quantitative information about the programs, specifically: (a) The characteristics of the patients they serve, (b) the organization components of the program, (c) the scope of services provided, (d) the costs and resources necessary to implement the program, (e) outreach services available, and (f) key unmet needs. This assessment will provide data useful to the program and will enable HRSA to provide data required by Congress under the Government Performance and Results Act of 1993.

The estimated burden is as follows:

Form name	Number of respondents	Responses per respondent	Hours per response	Total burden hours
Survey	52	1	8.5	442

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

Dated: April 19, 2002.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 02-10233 Filed 4-24-02; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Recruitment of Sites for Assignment of Commissioned Officers

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: General notice.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that applications will be accepted from organized primary health

care sites that provide services to underserved populations in the neediest Health Professional Shortage Areas (HPSAs) throughout the Nation that are interested in receiving an assignment of one of forty (40) PHS commissioned officers. The National Health Service Corps (NHSC) will pay the salaries, moving expenses and benefits for 40 commissioned officers who will be part of a mobile cadre of health care professionals. These commissioned officers will provide services to patients at their assigned practice sites and may be called upon to respond to regional and/or national health emergencies. The NHSC will assist the officers in acquiring, maintaining and enhancing emergency response skills. The initial assignments will be no longer than three years in duration. Thirty-six of these commissioned officers will be family practice physicians and four will be dentists.

Eligible Applicants

To be eligible to receive the assignment of one of the forty commissioned officers, public and nonprofit private entities must: (1) meet the standard requirements to be approved as an NHSC site (*see* sections 333 and 333A of the Public Health

Service Act) and (2) submit a completed Proposal for Use of a Commissioned Officer 2002 form.

All entities that receive the assignment of NHSC personnel must enter into an agreement with the State agency that administers Medicaid, accept assignment of Medicare, see all patients regardless of their ability to pay and use and post a discounted fee plan. In addition, entities must understand that if they receive the assignment of one of these forty commissioned officers, that officer will be away from the practice site for up to 4 weeks per year for training and may be away from the site for an additional period of time to respond to a regional or national health emergency.

Evaluation and Selection Process

For those entities which meet the standard requirements to be approved as an NHSC site, the NHSC will evaluate and score their Proposals for Use of a Commissioned Officer, looking at the health care needs of the HPSA to be served, the entity's proposed utilization of the commissioned officer to meet those needs, the entity's plan for evaluating that officer's progress toward meeting those needs, and the budget resources available to meet those needs.

The NHSC will determine which entities qualify for the assignment of one of the forty commissioned officers based on:

(1) The Proposal's score;
 (2) The health care needs of the HPSA served as evidenced by the HPSA score (HPSAs are scored on a scale of 1 to 25 for primary care HPSAs and 1 to 26 for dental HPSAs using criteria such as ratio of available health providers to population, rate of poverty and access to primary health services taking into account the distance to such services. Higher HPSA scores correlate to greater need.); and

(3) The need to equitably distribute the commissioned officers throughout the Nation.

More than forty entities may be approved to qualify for the assignment of one of these commissioned officers. Therefore, it is possible that an entity deemed qualified may not receive a commissioned officer.

Application Requests, Dates and Address

All interested entities will be required to submit a Proposal for Use of a Commissioned Officer 2002 form. Entities that are not on the NHSC Opportunities List (*see <http://bhpr.hrsa.gov/nhsc/opportunities—list>*) will also be required to submit a Recruitment and Retention Assistance Application to enable the NHSC to determine if they meet the standard requirements to be approved as an NHSC site. (Entities that are on the NHSC Opportunities List have already submitted Recruitment and Retention Applications and have been approved as NHSC sites.)

Completed proposals/applications should be addressed to: National Health Service Corps, 4350 East-West Highway, 8th Floor, Bethesda, MD, 20814. These proposals/applications must be postmarked on or before the deadline date of June 3, 2002. Proposals/applications postmarked after June 3, 2002, or sent to any address other than the one specified above, will be returned to the applicant and not be considered. Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.

Additional Information

Entities interested in receiving proposal/application materials may do so by calling the National Health Service Corps call center at 1-800-221-9393. They may also get information

and download the Proposal for Use of Commissioned Officer 2002 form and the Recruitment and Retention Assistance Application by visiting the NHSC Web site at: <http://bhpr.hrsa.gov/nhsc/>.

Dated: April 19, 2002.

Elizabeth M. Duke,
Administrator.

[FR Doc. 02-10226 Filed 4-24-02; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Poison Control Program; Cooperative Agreement for the Development of Patient Management Guidelines for Poisonings

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that up to \$300,000 in fiscal year (FY) 2002 funds is available to fund one cooperative agreement for the development of guidelines for patient management following exposure to toxic substances. The award will be made under the authority of the Poison Control Center Enhancement and Awareness Act (Public Law 106-174). The purpose of this cooperative agreement is to develop evidence-based guidelines to assure greater consistency in the treatment of poisoning episodes both within and among different Poison Control Centers throughout the country. HRSA's Maternal and Child Health Bureau (MCHB) will administer the cooperative agreement (CFDA #93.253). Funding for the cooperative agreement in FY 2002 was appropriated under Public Law 107-116.

DATES: The deadline for receipt of applications is July 1, 2002. Applications will be considered on time if they are: (1) received on or before the deadline date or (2) postmarked by on or before the deadline date. The project award date is September 1, 2002.

ADDRESSES: To receive a complete application kit, applicants may telephone the HRSA Grants Application Center at 1-877-477-2123 beginning May 1, 2002, or register on-line at: <http://www.hrsa.dhhs.gov/>, or by accessing http://www.hrsa.gov/g_order3.htm directly. This program uses the standard Form PHS 5161-1 (rev. 7/00) for applications (approved under OMB No. 0920-0428). Applicants must use

Catalog of Federal Domestic Assistance (CFDA) number 93.253 when requesting application materials. The CFDA is a Government wide compendium of enumerated Federal programs, projects, services, and activities that provide assistance. All applications should be mailed or delivered to: Grants Management Officer, MCHB; HRSA Grants Application Center, 901 Russell Avenue, Suite 450, Gaithersburg, MD 20879; telephone: 1-877-477-2123; e-mail: hrsagac@hrsa.gov.

This application guidance and the required forms for the cooperative agreement for the patient management guidelines may be downloaded in either WordPerfect 6.1 or Adobe Acrobat format (.pdf) from the MCHB home page at <http://www.mchb.hrsa.gov/>. Please contact Joni Johns, at 301/443-2088, or jjohns@hrsa.gov if you need technical assistance in accessing the MCHB home page via the Internet.

This announcement will appear in the **Federal Register** and on the HRSA home page at: <http://www.hrsa.dhhs.gov/>. **Federal Register** notices are found by following instructions at: http://www.access.gpo.gov/su_docs/aces/aces140.html.

FOR FURTHER INFORMATION CONTACT:

Carol A. Delany, 301/443-0926, e-mail: cdelany@hrsa.gov (for questions specific to project activities of the program, program objectives); Theda Duvall, 301/443-1440, e-mail tduvall@hrsa.gov (for grants policy, budgetary, and business questions).

SUPPLEMENTARY INFORMATION: Patient Management Guidelines Cooperative Agreement Background and Objectives:

The Poison Control Center Enhancement and Awareness Act (Pub. L. 106-174) (the Act) was enacted in February 2000 to provide funding to stabilize and enhance Poison Control Centers. The Act also provided funding the establishment of a nationwide toll free number for greater access to Poison Control Centers in the United States, and for the development of standard patient management protocols for commonly encountered toxic exposures.

Each year, more than 2,000,000 poison exposures are reported to poison control centers (PCCs). More than 90 percent of these exposures occur in the home and more than half of the victims are children younger than 6 years of age. Persons seeking help with a poisoning exposure have access to PCCs staffed by toxicology professionals who, via a telephone hotline, give immediate information and treatment advice about suspected toxic exposures. About 70 percent of the exposure cases reported