

C. Under Section AC.20 Functions, add paragraph "L. Office for Human Research Protections (ACN)," to read as follows:

L. Office for Human Research Protections (ACN)—The Office for Human Research Protections (OHRP) fulfills responsibilities set forth in the Public Health Service Act. These include: (1) Developing and monitoring as well as exercising compliance oversight relative to HHS Regulations for the protection of human subjects in research conducted or supported by any component of the Department of Health and Human Services; (2) coordinating appropriate HHS regulations, policies, and procedures both within HHS and in coordination with other Departments and Agencies in the Federal Government; (3) establishing criteria for and negotiation of Assurances of Compliance with institutions engaged in HHS-conducted or—supported research involving human subjects; (4) conducting programs of clarification and guidance for both the Federal and non-Federal sectors with respect to the involvement of humans in research; and directing the development and implementation of educational and instructional programs and generating educational resource materials; (5) evaluating the effectiveness of HHS policies and programs for the protection of human subjects; (6) serving as liaison to Presidential, Departmental, Congressional, interagency, and non-governmental commissions and boards established to examine ethical issues in medicine and research and exercises leadership in identifying and addressing such ethical issues; and (7) promoting the development of approaches to enhance and improve methods to avoid unwarranted risks to humans participating as subjects in research covered by applicable statutes and regulations.

1. Office of the Director (ACN1)—The Office of the Director reports to the Assistant Secretary for Health, supervises and manages the development and promulgation of policies, procedures, and plans for meeting the responsibilities set forth above. Additionally, staff of this office advise the Secretary, Assistant Secretary for Health and other HHS officials on ethical issues pertaining to medicine and biomedical and behavioral research, including all issues relative to the implementation of HHS Regulations for the Protection of Human Subjects. Directs the development, implementation, and compliance oversight activities for HHS Regulations and for the Protection of Human Subjects; exercises oversight and

negotiates Assurances of Compliance in all areas of human subject research; maintains liaison and coordinates policy implementation with components throughout HHS that conduct or support research involving human subjects; and directs the development and implement of educational and instructional programs and generates resource materials relating to the responsibilities of the research community for the protection of human subjects.

2. Division of Policy and Assurance (ACN 2)—(1) Negotiates Assurances of Compliance with research entities; (2) provides liaison, guidance, and regulatory interpretation to research entities, investigators, Federal officials, and the public; (3) maintains existing assurance mechanisms; and (4) develops and implements new procedures to ensure that HHS human subjects protection regulations are appropriately and effectively applied to the changing needs of the research community.

3. Division of Compliance Oversight (ACN 3)—(1) Conducts inquiries and investigations into alleged noncompliance with HHS Regulations for Protection of Human Subjects; (2) prepares inquiry and investigative reports; (3) recommends remedial or corrective action as necessary to agency or Department officials as appropriate; and (4) conducts a program of oversight of awardee institution implementation of HHS Regulations for the Protection of Human Subjects.

4. Division of Education and Development (ACN 4)—(1) Produces and coordinates conferences and workshops focusing on issues in human subjects protection; (2) promotes cooperative education and development efforts among external groups and consortia to improve human subjects protections and related processes; (3) promptly responds to requests for clarification and guidance regarding ethical issues in biomedical and behavioral research involving human subjects; (4) provides technical assistance to institutions engaged in HHS-conducted or -sponsored research involving human subjects; and, (5) maintains, promulgates, and updates educational and institutional review guidance materials.

D. Continuation of Policy: Except as inconsistent with this reorganization, all statements of policy and interpretations with respect to the National Institutes of Health and the Office of the Secretary heretofore issued and in effect prior to this reorganization are continued in full force and effect.

E. Delegation of Authority: All delegations and redelegations of

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

F. Funds, Personnel, and Equipment: Transfer or organizations and functions affected by this reorganization shall be accompanied by direct and support funds, positions, personnel, records, equipment, supplies and other resources.

G. Effective Date: The effective date of this reorganization is June 18, 2000.

Donna E. Shalala,

Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry

[Program Announcement 00075]

Announcement of a Cooperative Agreement With the Association of American Medical Colleges (AAMC) To Strengthen the Collaboration Between the Disciplines of Medicine and Public Health; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) announce the availability of fiscal year (FY) 2000 funds for a cooperative agreement with the Association of American Medical Colleges (AAMC). CDC and ATSDR (hereinafter referred to as CDC) are committed to achieving the health promotion and disease prevention objectives of "Healthy People 2010", a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to all "Healthy People 2010" focus areas.

The purpose of the program is to help strengthen the collaborations between the disciplines of medicine and public health. Medicine and public health are two interdependent disciplines that diverged in practice and training during the last century; however, new efforts have been initiated to increase and to improve their collaborative activities in the new century. In light of the changing health care system and the evolving challenges to public health, future physicians need a better understanding of public health. This program will

strive to train the medical community on the needs of public health issues.

B. Eligible Applicant

Assistance will be provided only to the Association of American Medical Colleges (AAMC). No other applications are solicited. AAMC is uniquely qualified to be the recipient organization for the following reasons:

1. The AAMC's mission is to improve the health of the public by enhancing the effectiveness of academic medicine through educating the physician and medical scientist workforce, discovering new medical knowledge, developing innovative technologies for prevention, diagnosis and treatment of disease, and providing health care services in an academic setting. AAMC's principal purpose is to promote and improve the education and training of professional medical practitioners. AAMC has the requisite institutional knowledge of the needs of the schools of medicine.

AAMC conducts periodic assessments of the status and needs of their member organizations, including medical schools and academic medical centers.

2. AAMC, a non-profit association, represents all the 125 schools of allopathic medicine in the United States that are accredited by the Liaison Committee on Medical Education. These schools represent the primary educational system that provides the Nation's physicians with their undergraduate medical education.

3. With the active participation of the deans of the medical schools, the AAMC is the only organization that can comprehensively affect the development and implementation of improved disease prevention and health promotion curricula in all accredited schools of medicine, and provide opportunities for students, faculty, and researchers to incorporate the perspectives of public health, and disease prevention and health promotion.

4. AAMC provides leadership both nationally and internationally in an effort to achieve excellence in undergraduate medical education. Through its Divisions of Biomedical and Health Sciences Research, Community and Minority programs, and Medical Education, as well as its participation in the Liaison Committee on Graduate Medical Education, AAMC is well positioned to address and resolve issues that promote and support implementation of training strategies.

5. AAMC has attained a prominent position among national health professional associations. AAMC currently sponsors national meetings designed specifically for the faculty of

medical schools and academic medical centers, to address contemporary issues in medical education and research.

6. AAMC member organizations also include academic medical centers (that house the majority of the medical residency programs—graduate medical education), academic and professional societies (representing 75,000 faculty members), medical student representatives, and resident representatives.

7. AAMC provides unique opportunities for medical and public health academicians, practitioners, and researchers to share their experience and expertise; to facilitate incorporation of the theoretical and practical perspectives of public health into curricula for teaching prevention, health promotion, and preventive medicine; and to stimulate participation by medical institutions in prevention research.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form of financial assistance.

C. Availability of Funds

Approximately \$300,000 is available in FY 2000 to fund this award. It is anticipated that the award will begin on or before September 30, 2000, and will be made for a 12-month budget period within a project period of up to five years. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

D. Where To Obtain Additional Information

For business management assistance, contact: Juanita D. Crowder, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, Georgia 30341-4146, Telephone: (770) 488-2734, E-mail address: jdd2@cdc.gov.

For you assistance with forms, please refer to the following Internet site: The CDC Internet home page is <http://www.cdc.gov>.

For a program technical assistance, contact: Rika Maeshiro, Senior Preventive Medicine Advisor, Public Health Practice Program Office (PHPPPO), Centers for Disease Control and Prevention, 4770 Buford Hwy. (K-

38), Atlanta, Georgia 30341-3724, Telephone: (770) 488-2508, E-mail address: rmaeshiro@cdc.gov.

Henry S. Cassell, III,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 00079]

Association of State and Territorial Directors of Health Promotion and Public Health Education (ASTDHPHE); Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2000 funds for a cooperative agreement with the Association of State and Territorial Directors of Health Promotion and Public Health Education (ASTDHPHE), an affiliate of the Association of State and Territorial Health Officials (ASTHO).

CDC is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2010" a national activity to reduce morbidity and mortality and improve the quality of life. For the conference copy of "Healthy People 2010," reset the internet site: <[HTTP://www.health.gov/healthy people](http://www.health.gov/healthy people)>.

This announcement is related to the focus areas of Physical Activity and Fitness, Nutrition, Tobacco Use, Education and Community-Based Programs, Oral Health, Arthritis, Cancer, Diabetes, Disability Conditions, and Heart Disease and Stroke.

The purpose of this cooperative agreement is to address the training, research, and program implementation needs required to build health promotion and public health education capacity at the State and territorial level.

This will include strategic planning for the Association to strengthen the infrastructure for assessment of constituent needs to build health education capacity at the state and territorial level; coordinating the annual National Conference on Health Education and Health Promotion; strengthening collaborations with national and international level partners; developing practice to research