

Dated: August 4, 2010.

**Anna Snouffer,**

*Deputy Director, Office of Federal Advisory Committee Policy.*

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**BILLING CODE 4140-01-P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **National Institutes of Health**

#### **National Institute of Allergy and Infectious Diseases; Notice of Meeting**

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of a meeting of the AIDS Research Advisory Committee, NIAID.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

*Name of Committee:* AIDS Research Advisory Committee, NIAID, AIDS Vaccine Research Subcommittee.

*Date:* September 21–22, 2010.

*Time:* 8:30 a.m. to 5 p.m.

*Agenda:* To discuss updated Vaccine Enterprise strategic plan and NIAID planned activities in support of the plan, and plans for future vaccine clinical research trials and trial designs.

*Place:* Crowne Plaza Hotel Rockville, 3 Research Court, Rockville, MD 20850.

*Contact Person:* James A. Bradac, PhD, Program Official, Preclinical Research and Development Branch, Division of AIDS, Room 5116, National Institutes of Health/NIAID, 6700B Rockledge Drive, Bethesda, MD 20892-7628, 301-435-3754, [jbradac@mail.nih.gov](mailto:jbradac@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: August 10, 2010.

**Jennifer Spaeth,**

*Director, Office of Federal Advisory Committee Policy.*

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## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Substance Abuse and Mental Health Services Administration**

#### **Statement of Organization, Functions, and Delegations of Authority**

Part M of the Substance Abuse and Mental Health Services Administration

(SAMHSA) Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services (DHHS) at 73, Number 147, pages 44274–44275, July 30, 2008, is amended to reflect the new functional statement for the Office of the Administrator, the Office of Program Services, the Office of Applied Studies and the Office of Policy, Planning and Budget. In addition this notice establishes a new Office of Policy, Planning and Innovation. These changes are necessary to strengthen cross Agency collaboration in policy analysis and development and to streamline oversight of all financial management procedures. The changes are as follows:

*Section M.20, Functions* is amended as follows:

The functional statement for the Office of the Administrator is amended to remove the functions related to controlled correspondence. The Office of Program Services is renamed to the Office of Management, Technology and Operations. In addition the functions of grant review, grants management and contracts management are deleted. The Office of Applied Studies is renamed to the Center for Behavioral Health Statistics and Quality and the Office of the Director, is amended to remove the functions related to the Paperwork Reduction Act. The Office of Policy, Planning and Budget is renamed the Office of Financial Resources. In addition the functions of grant review, grants management and contracts management are added and the Division of Policy Coordination is deleted. The Office of Policy, Planning and Innovation is established to provide an integrated and structured approach for the identification and adoption of policies and innovative practices that improve behavioral health services outcomes. The functional statement for each office is changed to read as follows:

#### **Office of the Administrator (MA)**

The Administrator is responsible to the Secretary for managing and directing SAMHSA. The office functions are as follows: (1) Provides leadership in the development of agency policies and programs; (2) maintains liaison with the Office of the Secretary on matters related to program and other activities; (3) provides oversight for coordination between SAMHSA and the National Institutes of Health (NIH) on the conduct of research and the dissemination of research findings in the areas of alcohol, drug abuse, and mental health; (4) analyzes legislative issues, and maintains liaison with congressional committees; and (5)

coordinates Agency communications and conducts public affairs activities.

#### **Office of Management, Technology and Operations (MB)**

(1) Works in partnership with other SAMHSA and DHHS components in managing, providing leadership, and ensuring SAMHSA's needs are met in the following service areas: administrative services, human resources management, equal employment opportunity, organizational development and analysis, and information technology; (2) provides leadership in the development of policies for and the analysis, performance measurement, and improvement of SAMHSA administrative and management services; (3) provides leadership, guidance, and technical expertise for the Agency's information technology program; and (4) provides centralized administrative services for the Agency.

#### **Center for Behavioral Health Statistics and Quality (MC)**

(1) Collects information as required by statute on the incidence, prevalence, trends, correlates of substance abuse and mental health problems, and the economic, behavioral and medical consequences of substance abuse and mental health problems in the United States; (2) collects information as required by statute on the number, characteristics, conduct, and performance of facilities and organizations providing prevention and treatment services for substance abuse at the national, State and local level; (3) plans, directs, and conducts studies based on data collected by the Center and other organizations of issues associated with substance abuse and mental health problems; (4) designs and carries out special data collection and analytic projects to examine topical issues for SAMHSA and other Federal agencies; (5) conducts epidemiological, statistical, and policy studies of existing or emerging issues; (6) provides information for program evaluation activities of the Agency; and (7) prepares reports and disseminates findings through Agency publications, the press, scientific journals, and electronic systems.

#### **Office of Financial Resources (MG)**

(1) Carries out all Chief Financial Officer functions provided by the Chief Financial Officers Act of 1990; (2) represents the agency before the Office of Management and Budget (OMB) in matters of presentation of budgets, performance reporting and resolution of issues arising from the execution of final

appropriations; (3) provides guidance, manages and coordinates the Agency budget plans and formulates and presents SAMHSA's future budget and financial management activities; (4) provides leadership and direction in the Agency-wide review, analysis and appraisal of financial elements of program execution and the development and execution of policies related to efficient allocation, expenditure and control of funds; (5) develops and executes Agency-wide procedures relating to implementation and management of the Government Performance and Results Act (GPRA); (6) coordinates and manages General Accounting Office (GAO) and Office of Inspector General (OIG) reviews of the agency, analyzes results, and develops agency response; (7) develops extramural policy and guidance addressing peer and council review, interagency agreements, and jointly funded grant programs; (8) conducts all aspects of the SAMHSA contracts management process; (9) conducts all aspects of the SAMHSA grants management process; and (10) plans, administers, and coordinates the review of grant and cooperative agreement applications and contract proposals.

#### **Office of Policy, Planning and Innovation (MD)**

The Office of Policy, Planning and Innovation provides an integrated and structured approach for the identification and adoption of policies and innovative practices that improve behavioral health services outcomes. The Office represents the Agency at meetings both internal and external and raises SAMHSA's profile in health services research by collaborating with other Departments and Agencies, such as the National Institutes of Health, the Centers for Disease Control and Prevention, and the Center for Medicare and Medicaid Services, to facilitate the adoption of data-driven policies and practices by those working in the field to improve behavioral health outcomes. While SAMHSA's primary mission is to serve those with behavioral health needs and foster health improvements, many partners and allies exist within other fields which also play a crucial role in supporting and improving behavioral health. The Office will seek to influence these partners and allies to encourage inclusion of behavioral health within their policy initiatives.

#### **Delegation of Authority**

All delegations and re-delegations of authority to officers and employees of SAMHSA which were in effect immediately prior to the effective date

of this reorganization shall continue to be in effect pending further re-delegations, provided they are consistent with this reorganization.

This delegation of authority is effective immediately.

Dated: July 20, 2010 .

**Kathleen Sebelius,**  
Secretary.

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## **DEPARTMENT OF HOMELAND SECURITY**

### **Transportation Security Administration**

#### **New Agency Information Collection Activity Under OMB Review: Pipeline System Operator Security Information**

**AGENCY:** Transportation Security Administration, DHS.

**ACTION:** 30-day notice.

**SUMMARY:** The Transportation Security Administration (TSA) has forwarded the new Information Collection Request (ICR) abstracted below to the Office of Management and Budget (OMB) for review and approval under the Paperwork Reduction Act. The ICR describes the nature of the information collection and its expected burden. TSA published a **Federal Register** notice, with a 60-day comment period soliciting comments, of the following collection of information on July 29, 2009, 74 FR 37723. The collection involves the submission of contact information for the company's primary and alternate security manager and the telephone number of the security operations or control center, as well as data concerning pipeline security incidents.

In response to July 29, 2009 notice, TSA received four comments from industry stakeholders. Letters addressing their respective comments have been sent to each stakeholder. No comments were submitted regarding the submission of contact information for a pipeline company's primary and alternate security manager and the telephone number of the security operations or control center.

The primary focus of the comments received pertained to the reporting of security incidents and suspicious activity to the Transportation Security Operations Center (TSOC). Recommendations were made for TSA to clarify the intent of the incident reporting criteria and examples. As a result, TSA modified the Pipeline Security Guidelines to reflect TSA's desire to be notified of all incidents which are indicative of a deliberate

attempt to disrupt pipeline operations or activities that could be precursors to such an attempt. Such information is necessary for TSA to fulfill its responsibilities as the lead Federal agency for pipeline security.

Several comments discussed the potential for duplicative reporting of security incidents to both the TSOC and the National Response Center (NRC). 49 CFR parts 191 and 195 mandate that pipeline operators report incidents involving the release of natural gas or hazardous liquids to the NRC. There is no requirement under these regulations to report suspicious activity. Additionally, based on 33 CFR part 101 facilities operating under the Maritime Transportation Security Act (MTSA) are required to report incidents and suspicious activity to the NRC. TSOC has coordinated with the NRC to obtain pipeline incident/suspicious activity reports that may be of concern to TSA in the event that a pipeline operator submits a report only to the NRC. However, the vast majority of events that TSA requests operators report would not fall into these categories. This is supported by the actual pipeline operator incident/suspicious activity reporting that TSA has observed over the past five years. Consequently, TSA believes that duplicative reporting, if it occurs, would be minimal.

**DATES:** Send your comments by September 15, 2010. A comment to OMB is most effective if OMB receives it within 30 days of publication.

**ADDRESSES:** Interested persons are invited to submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to Desk Officer, Department of Homeland Security/TSA, and sent via electronic mail to [oir\\_submission@omb.eop.gov](mailto:oir_submission@omb.eop.gov) or faxed to (202) 395-6974.

**FOR FURTHER INFORMATION CONTACT:** Joanna Johnson, Office of Information Technology, TSA-11, Transportation Security Administration, 601 South 12th Street, Arlington, VA 20598-6011; telephone (571) 227-3651; e-mail [Joanna.Johnson@dhs.gov](mailto:Joanna.Johnson@dhs.gov).

#### **SUPPLEMENTARY INFORMATION:**

##### **Comments Invited**

In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The ICR documentation is available at <http://www.reginfo.gov>.