

at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles. In addition, under an MOU signed in December 1990 with DOE and replaced by an MOU signed in 2000, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose

This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, pertaining to CDC's and ATSDR's public health activities and research at this DOE site. Activities shall focus on providing the public with a vehicle to express concerns and provide advice and recommendations to CDC and ATSDR. The purpose of this meeting is to receive updates from ATSDR and CDC, and to address other issues and topics, as necessary.

Matters to be Discussed: The agenda includes a discussion of the public health assessment, updates from the Public Health Assessment, Health Needs Assessment, Agenda, Communications and Outreach, and the Ad Hoc Mission Workgroup. Agenda items are subject to change as priorities dictate.

CONTACT PERSON FOR MORE INFORMATION: La Freta Dalton, Designated Federal Official, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE, M/S E-54, Atlanta, Georgia 30333, telephone 1-888-42-ATSDR(28737), fax 404/498-1744.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: December 17, 2001.

John Burckhardt,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Agency Information Collection Activities: Proposed Submission to the Office of Management and Budget (OMB) for Clearance; Comment Request; Revision and Reinstatement of Information Collection

AGENCY: Administration on Aging, HHS.

The Administration on Aging (AoA), Department of Health and Human Services, provides an opportunity for comment on the following proposal for the collection of information in compliance with the Paperwork Reduction Act (PRA; Pub. L. 96-511):

Title of Information Collection: State Program Report (SPR): Reporting Requirements for Titles III and VII of the Older Americans Act (OAA).

Type of Request: Reinstatement with modifications.

Use: The SPR is the source of program data for State programs on behalf of elderly individuals across the nation, administered under the OAA. The data are used by AoA to fulfill reporting requirements mandated under the OAA, the Government Performance and Results Act, and other Federal management statutes. AoA uses the data for program planning, management, assessment, accountability and development. Data for all States are published each year on the AoA website for use by the States, area agencies, providers and research entities for program analysis and other statistical purposes.

Frequency: Annual.

Respondents: State agencies on aging, including comparable agencies in U.S. territories and the District of Columbia, which administer OAA programs.

Estimated Number of Responses: 56.

Total Estimated Burden Hours: 140,000.

Additional Information or Comments: The Administration on Aging (AoA) has initiated a cooperative effort with State agencies on aging, area agencies on aging, and aging service providers to modify the SPR. Multiple factors influence AoA's plans to modify this fundamental information collection requirement at this time, particularly the following: (1) Need to incorporate

into the SPR information requirements for the National Family Caregiver Support Program authorized by the 2000 Amendments to the OAA; (2) need to revise information requirements to comply with Office of Management and Budget (OMB) standards for gathering information on race and ethnicity; (3) the need to streamline and reduce the current information requirements of the SPR; and (4) the expiration of OMB approval of the SPR under the Paperwork Reduction Act in August 2002. Written comments and recommendations for the modification of this proposed information collection should be sent within 60 days of the publication of this Notice directly to the following address: Office of Planning and Evaluation, Administration on Aging, Attention: Frank Burns, 330 Independence Avenue, SW., Rm. 4741, Washington, DC 20201.

Dated: December 17, 2001.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. 01-31501 Filed 12-20-01; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Agency Information Collection Activities: Proposed Submission to the Office of Management and Budget (OMB) for Clearance; Comment Request; Approval of an Information Collection Survey

AGENCY: Administration on Aging, HHS.

The Administration on Aging (AoA), Department of Health and Human Services, provides an opportunity for comment on the following proposal for the collection of information in compliance with the Paperwork Reduction Act (PRA; Pub. L. 96-511):

Title of Information Collection: National Family Caregiver Support Program Survey: Grandparents and Other Relatives Raising Children.

Type of Request: This request is for approval of a one-time survey to identify agencies currently providing services to grandparents and other relatives caring for grandchildren.

Use: Data will be collected by Generations United, a National Family Caregiver Support Program discretionary grantee, on organizations providing services to grandparents and other relatives caring for children, nature of services provided, number of grandparents and other relative caregivers served annually; number of children assisted annually, and training

needs of these organizations to adequately evaluate the implementation, progress and process of the National Family Caregiver Support Program, Title III-E of the Older Americans Act (42 U.S.C. 3001 *et seq.*), as amended by the Older Americans Act Amendments of 2000 (Pub.L. 106-501). AoA and Generations United will use this data to plan technical assistance to these organizations in the forthcoming year. The data will also be used by the AoA to evaluate and describe all projects funded by this initiative and address the program's evaluation and Government Performance and Results Act (GPRA) requirements. Findings will be used to manage the program and better target future activities.

Frequency: One-time survey administered by Generations United.

Respondents: State Units on Aging, Area Agencies on Aging, Tribal and Native Organizations, Primary Health Care Centers.

Estimated Number of Responses: 1600.

Total Estimated Burden Hours: 10 minutes/organization × 1600 organizations = 267 hours.

Additional Information or Comments: The Administration on Aging plans to submit to the Office of Management and Budget for approval a one-time survey to identify organizations providing services to grandparents and other relative caregivers of children to design technical assistance to those organizations. Written comments and recommendations for the proposed information collection should be sent within 60 days of the publication of this Notice directly to the following address: Office of Program Development, Administration on Aging, Attention: Rick Greene, 330 Independence Avenue, SW., Rm 4748, Washington, DC 20201.

Dated: December 17, 2001.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. 01-31502 Filed 12-20-01; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-03-02]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and

Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-7090. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

Hanford Birth Cohort Study—New—The Agency for Toxic Substances and Disease Registry (ATSDR) is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and its 1986 Amendments, the Superfund Amendments and Reauthorization Act (SARA), to prevent or mitigate adverse human health effects and diminished quality of life resulting from the exposure to hazardous substances into the environment. This legislation was, in part, in response to the lack of scientific information about potential adverse health effects resulting from exposure of a general population to hazardous substances. Although environmental exposures have been documented at many hazardous waste sites in the United States, most existing data are for occupational exposures. However, environmental exposure of a general population is more likely to include exposure of vulnerable subpopulations (e.g., pregnant women, children, elderly, and the infirm). ATSDR plans activities to address these issues which include conducting health studies at sites on the Environmental Protection Agency's (EPA) National Priorities List (NPL) to determine whether and to what degree exposure to hazardous substances at these sites are harmful to human health.

The Hanford Nuclear Reservation, in south central Washington State, is on EPA's National Priorities List. Between 1944 when it opened until its closing in 1972, radioactive Iodine was released to the air from chemical separation facilities funded to produce plutonium for atomic weapons. The Hanford Environmental Dose Reconstruction Project (HEDR) estimates that the majority of releases of Iodine-131 occurred between 1944 and 1951. Broad-based scientific studies indicate that exposure to radioactive materials (including Iodine-131), may be associated with an increased risk of developing autoimmune or cardiovascular diseases. Children up to five years of age may be at higher risk than the general population of

developing these diseases after exposure.

The objective of the Hanford Birth Cohort Study is to compare information on the rates of autoimmune and cardiovascular disease among a population exposed to radioactive contaminants during 1945-1951 and the rates of a less-exposed comparison population. This study may have applicability to other sites where exposure to radioactive contaminants has occurred.

ATSDR currently has underway an information collection at the Hanford Nuclear Reservation to develop educational materials and interventions related to thyroid disease for individuals exposed to I-131 as young children—the Hanford Community Health Project (OMB No. 0923-0031). This Hanford Birth Cohort Study is a separate project which will collect information on rates of autoimmune and cardiovascular disease among the selected population. Integral to designing this project, ATSDR reviewed the work of the National Cancer Institute's (NCI) Committee on Exposure of the American People to I-131 from the Nevada Atomic Bomb Tests as well as the NCI's report titled "Exposure of the American People to IODINE-131 from Nevada Nuclear-Bomb Tests."

In another ATSDR project (OMB No. 0923-0006), approximately 6,000 people were located who were born between 1940 and 1951 in three high-exposed counties nearest the Hanford site (Benton, Franklin, and Adams). For the currently proposed study, ATSDR will randomly select and interview up to 1,000 individuals from this entire birth cohort of 15,001 (including the 6,000 people who were previously located). The comparison population will include a random selection of 1,000 persons born in three low-exposed counties located farther away from the Hanford site (San Juan, Whatcom, and Mason).

To reduce the amount of time required by the respondents, Computer Assisted Telephone Interviews (CATI) will be conducted. Following completion of all respondent interviews, the data will be tabulated and analyzed (the high exposed group will be compared with the low exposed group). The information collected in this proposed study will provide reliable baseline information on the incidence of autoimmune and cardiovascular diseases as related to exposure to releases from the Hanford facility and will also provide the information needed to generate appropriate and valid hypotheses for future activities, such as other epidemiologic studies.