

the CDC MARCH reinforcement strategy at the district level.

“Applications responsive to this program announcement will be funded in the categories listed above. CDC expects to fund at least one, but no more than the maximum number identified. Additional organizations may be funded based on evaluation criteria and the availability of funds.”

Dated: July 31, 2002.

Sandra R. Manning,

*Director, Procurement and Grants Office,
Centers for Disease Control and Prevention.*

[FR Doc. 02-19766 Filed 8-5-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Workplace Violence Prevention Research, Announcement Number: OH-02-011

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Workplace Violence Prevention Research, RFA OH-02-011.

Times and Dates:

8:30 a.m.–9 a.m., August 21, 2002 (Open),

9:10 a.m.–5:30 p.m., August 21, 2002

(Closed),

8:30 a.m.–5:30 p.m., August 22, 2002

(Closed).

Place: Harbor Court Hotel, 550 Light Street, Baltimore, MD 21202 phone (1-800-824-0076 or 410-347-9700).

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Deputy Director for Program Management, CDC, pursuant to Public Law 92-463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to RFA OH-02-011.

Contact Person for More Information: Gwendolyn Cattledege, Ph.D., Scientific Review Administrator, National Institute for Occupational Safety and Health, CDC, 1600 Clifton Road NE MS E-74, Atlanta, GA 30330, telephone (404) 498-2508.

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: August 1, 2002.

John Burkhardt,

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

[FR Doc. 02-19898 Filed 8-2-02; 10:57 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Proposed Collection; Public Comment Request: Indian Health Service Medical Staff Credentials and Privileges Files

AGENCY: Indian Health Service.

ACTION: Request for Public Comment: 60-day Proposed Information Collection: Indian Health Service Medical Staff Credentials and Privileges Files.

SUMMARY: The Department of Health and Human Services, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995 (PRA95) (44 U.S.C. 3506(c)(2)(A)). This program helps to ensure that requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements on respondents can be properly assessed. Currently, the Indian Health Service (IHS) is providing a 60-day advance opportunity for public comment on a proposed extension of current information collection activity to be submitted to the Office of Management and Budget for review.

Proposed Collection: Title: 09-17-0009, “Indian Health Service Medical Staff Credentials and Privileges Files”.

Type of Information Collection Request: Extension, without revision, of currently approved information collection, 09-17-0009, “Indian Health Service Medical Staff Credentials and Privileges Files.” *Form Number:* Instructions and information collection formats are contained in IHS Circular No. 93-2, “Credentials and Privileges Review Process for the Medical Staff.” *Need and Use of Information Collection:* The IHS operates health care facilities that provide health care services to American Indians and Alaska Natives.

To provide these services, the IHS employs (directly and under contract) several categories of health care providers including: physicians (M.D. and D.O.), dentists, psychologists, optometrists, podiatrists, audiologists; and in some states, physician assistants, certified registered nurse anesthetists, nurse practitioners, and certified nurse midwives. IHS policy specifically requires physicians and dentists to be members of the health care facility medical staff where they practice. Health care providers become medical staff members, depending on the local health care facility’s capabilities and medical staff bylaws. There are three types of IHS medical staff applicants: (1) Health care providers applying for direct employment with IHS; (2) contract health care providers who will not seek to become IHS employees; and (3) employed IHS health care providers who seek to transfer between IHS health care facilities. National health care standards developed by the Centers for Medicare and Medicaid Services, formerly the Health Care Financing Administration and by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) require health care facilities to review, evaluate and verify the credentials, training and experience of medical staff applicants prior to granting medical staff privileges. To meet these standards, IHS health care facilities require each medical staff applicant to provide information concerning their education, training, licensure, and work experience and any adverse disciplinary actions taken against them. This information is then verified with references supplied by the applicant and may include: former employers, educational institutions, licensure and certification boards, the American Medical Association, the Federation of State Medical Boards, the National Practitioner Data Bank, and the applicants themselves.

In addition to the initial granting of medical staff membership and clinical privileges, JCAHO standards require that a review of the medical staff be conducted not less than every two years. This review evaluates the current competence of the medical staff and verifies whether they are maintaining their licensure and the certification requirements of their specialty. The medical staff credentials and privileges records are maintained at the health care facility where the health care provider is a medical staff member. The establishment of these records at IHS health care facilities is not optional; such records must be established and

maintained at all health care facilities in the United States that are accredited by JCAHO. This information collection activity is used to evaluate individual health care providers applying for medical staff privileges at IHS health care facilities. *Affected Public:*

individuals, businesses or other for-profit, not-for-profit institutions and Staff, local or Tribal Government. *Type of Respondents:* health care providers requesting medical staff privileges at IHS health facilities. The table below provides: types of data collection

instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.

Data collection instruction	Estimated No. of respondents	Responses per respondent	Annual No. of responses	Average burden hour per response*	Total annual burden hours
Application to Medical Staff	600	1	600	0.75 (45 mins)	450.0
Reference letter	1,800	1	1,800	0.33 (0 mins)	600.0
Reappointment request	644	1	644	1.00 (60 mins)	644.0
Medical Privileges	387	1	387	1.00 (60 mins)	387.0
Ob-Gyn Privileges	25	1	25	1.00 (60 mins)	25.0
Surgical Privileges	23	1	23	1.00 (60 mins)	23.0
Psychiatric Privileges	18	1	18	1.00 (60 mins)	18.0
Anesthesia Privileges	16	1	16	1.00 (60 mins)	16.0
Dental Privileges	128	1	128	0.33 (0 mins)	42.2
Optometric Privileges	21	1	21	0.33 (0 mins)	6.9
Psychology Privileges	23	1	23	0.17 (0 mins)	3.9
Audiologic Privileges	6	1	6	0.08 (0 mins)	0.5
Podiatric Privileges	6	1	6	0.08 (0 mins)	0.5
Radiology Privileges	9	1	9	0.33 (0 mins)	3.0
Pathology Privileges	3	1	3	0.33 (mins)	1.0
Total	3,709	2,221.0

* For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

Request for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Send Comments and Requests For Further Information: Send your written comments and requests for more information on the proposed collection or requests to obtain a copy of the data collection instrument(s) and instructions to: Mr. Lance Hadahkwen, Sr., M.P.H., IHS Reports Clearance Officer, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852-1601, call non-toll free (301) 443-5938; send via facsimile to (301) 443-2316, or send your e-mail requests, comments, and

return address to:
lhodahkw@hqe.ihs.gov.

Comment Due Date: Your comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: July 31, 2002.

Duane L. Jeanotte,

Acting Deputy Director, Indian Health Service.

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DEPARTMENT OF THE INTERIOR

Office of the Secretary

Exxon Valdez Oil Spill Trustee Council; Invitation for Proposals

AGENCY: Office of the Secretary, Department of the Interior.

ACTION: Notice.

SUMMARY: The Exxon Valdez Oil Spill Trustee Council is asking the public, private organizations, and government agencies to submit proposals for implementation of the Gulf Ecosystem Monitoring and Research Program. The Invitation to Submit Restoration Proposals for Federal Fiscal Year 2003: Phase II is available on the Trustee Council Internet site.

DATES: Proposals are due September 4, 2002.

ADDRESSES: Exxon Valdez Oil Spill Trustee Council, 441 West 5th Avenue, Suite 500, Anchorage, Alaska 99501.

FOR FURTHER INFORMATION CONTACT: The Trustee Council Office, 907-278-8012 or toll free at 800-478-7745 (in Alaska) or 800-283-7745 (outside Alaska) or via Internet at www.oilspill.state.ak.us.

SUPPLEMENTARY INFORMATION: Following the Exxon Valdez oil spill in March 1989, a Trustee Council of three state and three federal trustees, including the Secretary of the Interior, was formed. The Trustee Council prepared a restoration plan for the injured resources and services within the oil spill area. The restoration plan called for annual work plans identifying projects to accomplish restoration. An extension of the Restoration Plan, the Gulf Ecosystem Monitoring and Research Program, also requires implementation through annual work plans. Each year proposals for restoration, monitoring, and research projects are solicited from a variety of organizations, including the public.

Dated: July 26, 2002.

Willie R. Taylor,

Director, Office of Environmental Policy and Compliance.

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