

SUMMARY: Pursuant to Section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C. Appendix 2), notice is hereby given that the Policy Committee of the 2005 White House Conference on Aging will consider the recommendations from the Reports Subcommittee related to the Preliminary Report to the Governors and may discuss other items related to the final report of the Conference during a conference call. The conference call will be open to the public to listen, with call-ins limited to the number of telephone lines available. Individuals who plan to call in and need special assistance, such as TTY, should inform the contact person listed below in advance of the conference call.

DATES: The conference call will be held on Tuesday, March 14, 2006, at 5 p.m., Eastern Standard Time.

ADDRESSES: The conference call may be accessed by dialing, U.S. toll-free, 1-888-390-3401, passcode: 4824846, call leader: Nora Andrews, on the date and time indicated above.

FOR FURTHER INFORMATION CONTACT: Emily Morrison, (301) 443-3457, or e-mail at Emily.Morrison@hhs.gov. Registration is not required. Call in is on a first come, first-served basis.

Dated: February 23, 2006.

Edwin L. Walker,

Deputy Assistant Secretary for Policy and Programs.

[FR Doc. E6-2842 Filed 2-28-06; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-06-06AV]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Developing a Baseline of Occupational Safety and Health Communication Provided by Trade Associations and Labor Unions to Their Members in Eight Industrial Sectors-New-National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

As mandated in the Occupational Safety and Health Act of 1970 (PL 91-596), the mission of NIOSH is to conduct research and investigations on work-related disease and injury and to disseminate information for preventing identified workplace hazards (Sections 20(a) (1) and (d)). Through the development, organization, and dissemination of information, NIOSH promotes awareness about occupational hazards and their control, and improves the quality of American working life.

Previous research has shown that trade associations and labor unions are primary sources of occupational safety and health (OSH) information. These organizations know the industries they represent and how to relate to the various groups within their respective industries. If NIOSH could learn more about the OSH-related activities of these organizations, it would be a first step in routinely partnering with them to communicate information which impacts worker safety and health. For example, through these organizations NIOSH could learn about unmet occupational safety and health information needs in industry and develop information and communication products to address these needs. Furthermore, with more focused information on the safety and health issues, NIOSH would be in a better position to develop impact communication products to serve this community.

NIOSH proposes to obtain OSH information from trade associations and labor unions that represent each of the eight NIOSH National Occupational Research Agenda (NORA) industry sectors. These sectors are Agriculture, Forestry, and Fishing; Mining; Construction; Manufacturing; Wholesale and Retail Trade; Transportation and Utilities; Public and Private Services; and Healthcare and Social Assistance Industries. The goals of this project are to determine (1) sources of occupational safety and health (OSH) information currently used by the different sector trade associations and labor unions, (2) OSH information presently being disseminated by these different trade associations and labor unions to their members, (3) channels of communication within the different sector associations and unions used to disseminate OSH information, (4) needs for specific types of OSH information, especially those needs not presently being serviced, (5) OSH concerns of industry trade associations and labor unions, (6) awareness and perception of NIOSH as a source of OSH information, (7) use of NIOSH information services (Website, printed materials, 800 number, etc.), (8) usefulness of NIOSH information to address their OSH concerns and (9) credibility of NIOSH as a trusted source of occupational safety and health information. The ultimate desired outcome of this project is to reduce illness and injury for workers on jobs and tasks which pose high risks. Occupational Safety and Health information will be collected from a sample of trade associations and labor unions for each of the NORA industry sectors using a telephone survey. The data collection will be conducted over three years.

To facilitate the survey, NIOSH will interact with trade association and labor organization staff within the industry sectors to ensure that (1) the survey questions developed appropriately capture the needed information, (2) the survey is well received and (3) that the data obtained is representative of the full range of occupations within the targeted industry sectors. These interactions will be structured to foster professional relationships that will improve NIOSH's future communication and information dissemination efforts to these important partners. The process of interacting and surveying the trade associations and labor unions will allow NIOSH to develop a benchmark against which future efforts in partnership and communication can be measured. Working cooperatively on new solutions and distribution of future

communication products will promote cooperation and trust between NIOSH

and trade and labor groups for the future. There is no cost to respondents

for participation in the survey except other than their time.

ESTIMATED ANNUALIZED BURDEN

Sectors	Number of respondents	Number of responses/ respondent	Average burden/hours	Total burden hours
Construction	120	1	20/60	40
Mining	49	1	20/60	16.3
Healthcare and Social Assistance	102	1	20/60	34
Transportation and Utilities	110	1	20/60	37
Agriculture, Forestry and Fishing	129	1	20/60	43
Public and Private Services	143	1	20/60	48
Wholesale and Retail Trade	137	1	20/60	46
Manufacturing	145	1	20/60	48
Total	935	20/60	312

Dated: February 14, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6-2838 Filed 2-28-06; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panels (SEP): Occupational Safety and Health Education, PAR-05-107, and Research Center and Occupational Safety and Health Training Projects Grants, PAR-05-126

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): Occupational Safety and Health Education, PAR-05-107, and Research Center and Occupational Safety and Health Training Projects Grants, PAR-05-126.

Times and Dates: 8:30 a.m.-5 p.m., March 23, 2005 (Closed). 8:30 a.m.-5 p.m., March 24, 2005 (Closed).

Place: Embassy Suites Hotel, 1900 Diagonal Road, Alexandria, VA 22314, Telephone Number 703.684.5900.

Status: 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 Director, Management Analysis and Services Office, 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: Occupational Safety and Health Education, PAR-05-107, and Research Center and Occupational Safety and Health Training Projects Grants, PAR-05-126.

For Further Information Contact: Charles N. Rafferty, Ph.D., Designated Federal Official, National Institute for Occupational Safety and Health, CDC, 1600 Clifton Road, NE., Mailstop E-74, Atlanta, GA 30333, Telephone Number 404.498.2582.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: February 23, 2006.

Alvin Hall,

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

[FR Doc. E6-2839 Filed 2-28-06; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics (NCHS), Classifications and Public Health Data Standards Staff, Announces the Following Meeting

Name: ICD-9-CM Coordination and Maintenance Committee meeting.

Time and Date: 9 a.m.-4:30 p.m., March 23-24, 2006.

Place: Centers for Medicare and Medicaid Services (CMS) Auditorium, 7500 Security Boulevard, Baltimore, Maryland 21244.

Status: Open to the public, limited only by the space available.

Purpose: The C&M meeting is a public forum for the presentation of proposed modifications to the International Classification of Diseases, Ninth-Revision, Clinical Modification.

Matters To Be Discussed: Human herpesvirus 6 (HHV-6) encephalitis; Hypoadosteronism; Long term use of other drugs; Wound botulism; Steven-Johnson syndrome; Normal pressure hydrocephalus; Endosseous dental implant failure; VIN I and

VIN II; Multiple endocrine neoplasia (MEN type I, type II, type III); Secondary diabetes; Addenda (diagnosis); NeuroThera™ Stroke Therapy; C Port Mechanical Anastomosis; Systemic/Therapeutic Temperature Management; Thermal Ablation of Liver, Lung, and Renal Lesions or Tissues; Transmyocardial Revascularization; Bronchial Airflow Redirection Valve; Hip Resurfacing; Hip Replacement Bearing Surfaces; Intracranial Pressure Monitoring and Oxygen Monitoring; Repair of Ventricular Septal Defect with Prosthesis—Closed Technique; Surgical Decompression with Insertion Of Interspinous Dynamic Stabilization Device; Infusion of Cintredekin Besudotox; placement of intracerebral catheters; implantable miniature telescope; Addenda (procedures); ICD-10 Procedure Classification System (PCS) Update.

Contact Person for Additional Information: Amy Blum, Medical Systems Specialist, Classifications and Public Health Data Standards Staff, NCHS, 3311 Toledo Road, Room 2402, Hyattsville, Maryland 20782, e-mail alb8@cdc.gov, telephone 301-458-4106 (diagnosis); Mady Hue, Health Insurance Specialist, Division of Acute Care, CMS, 7500 Security Blvd., Baltimore, Maryland, 21244, e-mail Marilu.Hue@cms.hhs.gov, telephone 410-786-4510 (procedures).

Notice: Because of increased security requirements, CMS has instituted stringent procedures for entrance into the building by non-government employees. Persons without a government ID will need to show an official form of picture ID, such as a drivers license, and sign-in at the security desk upon entering the building. Those who wish to attend a specific ICD-9-CM C&M meeting in the CMS auditorium must submit their name and organization for addition to the meeting visitor list. Those wishing to attend the meeting must submit their name and organization by March 17, 2006, for inclusion on the visitor list. This visitor list will be maintained at the front desk of the CMS building and used by the guards to admit visitors to the meeting. Those who attended previous ICD-9-CM C&M meetings will no longer be automatically added to the visitor list. You must request inclusion of your name prior to each meeting you attend. Register to attend the meeting on-line at: <http://cms.hhs.gov/events>.