Dated: September 29, 2006. Joan F. Karr, Acting Reports Clearance Officer, Centers for Disease Control and Prevention. [FR Doc. E6–16455 Filed 10–4–06; 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 Panel: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92– 463) of October 6, 1972, that the Disease, Disability, and Injury Prevention and Control Special Emphasis Panel, Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through September 18, 2008.

For information contact Elaine L. Baker, Designated Federal Officer, Disease, Disability, and Injury Prevention and Control Special Emphasis Panel, Centers for Disease Control and Prevention, Management Analysis and Services Office, 1600 Clifton Road, NE., Mailstop E72, Atlanta, Georgia 30333, telephone 404– 498–0090 or fax 404–498–0011.

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: September 25, 2006.

# Alvin Hall,

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

[FR Doc. E6–16464 Filed 10–4–06; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

# Discontinued Publication of Funding Opportunity Announcements

**AGENCY:** The Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS). **ACTION:** Notice of New Procedure.

Important notice regarding: (1) Discontinued publication of Funding **Opportunity Announcements (FOAs) in** the Federal Register; and (2) FOA announcement and application submission via Grants.gov. CDC announces plans to publish all FOAs on http://www.grants.gov and accept electronic applications through this site. All application packages will be posted on Grants.gov, as well, utilizing the PHS5161-1 forms for non-research applications and the new form SF 424 Research and Related (R&R) application for research. Grants.gov will feed the form 424 (R&R) packages directly into the Health and Human Services electronic Research Administration Commons for on-line receipt of research applications.

As of October 1, 2005, CDC ceased publication of all FOAs in The Federal **Register**. CDC currently announces these FOAs, also known as Requests for Application (RFAs) and Program Announcements (PAs), via the Grants.gov on-line submission system. Applicants are able to find a synopsis and attachments of the complete text of all CDC grants and cooperative agreements, as well as apply electronically for opportunities, via http://www.Grants.gov. All FOAs will continue to be posted on the CDC Web site (http://www.cdc.gov/od/pgo/ funding/FOAs.htm) and on the NIH Guide (http://grants1.nih.gov/grants/ guide/index.html), for research.

The provisions of the Federal Financial Assistance Management Improvement Act of 1999 (Public Law 106-107) and the President's Management Agenda have led Federal Agencies to simplify Federal financial assistance application requirements and create a single Web site to apply for Federal assistance. Accordingly, Grants.gov (http://www.grants.gov/) has been designated by the Office of Management and Budget (OMB) as the single access point for all grant programs offered by 26 Federal grantmaking agencies. It provides a single interface for agencies to announce their grant opportunities, and for all grant applicants to find and apply for these opportunities.

<sup>1</sup>The PHS–5161–1 application package will be posted in Grants.gov for CDC non-research application submissions. A transition from the PHS Form 398 package to the SF 424 (R&R) forms will allow electronic submission of research applications through Grants.gov.

# Getting Started—Grants.gov and HHS eRA Commons Registration

To provide a secure environment, the submission of electronic applications to

HHS and CDC will require organizations to register with Grants.gov (http:// www.grants.gov/applicants/ applicants.jsp), and, in addition, for Research Grants, the applicant will also have to register with HHS eRA Commons (https:// commons.era.nih.gov/commons/). Grants.gov registration provides the ability to submit applications electronically to at least 26 Federal grant-making agencies. HHS eRA Commons registration allows tracking of research application status for the potential grantee organization and Principal Investigator.

# **Additional Information**

Questions regarding this notice should be directed to the Technical Information Management Section (TIMS), Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Atlanta, GA 30341, Telephone 770–488– 2700, or e-mail address: pgotim@cdc.gov.

Dated: September 26, 2006.

# James D. Seligman,

Chief Information Officer, Centers for Disease Control and Prevention. [FR Doc. E6–16322 Filed 10–4–06; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Food and Drug Administration

# Request for Nominations for Nonvoting Members Representing Industry Interests on Public Advisory Panels or Committees

**AGENCY:** Food and Drug Administration, HHS.

# **ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is requesting nominations for nonvoting industry representatives to serve on the National Mammography Quality Assurance Advisory Committee (NMQAAC) and certain device panels of the Medical Devices Advisory Committee in the Center for Devices and Radiological Health.

**DATES:** Industry organizations interested in participating in the selection of a nonvoting member to represent industry for the vacancies listed in this document must send a letter to FDA by November 6, 2006, stating their interest in the NMQAAC or one or more panels. Concurrently, nomination materials for prospective candidates should be sent to FDA by November 6, 2006. A nominee may either be self-nominated or nominated by an organization to serve as a nonvoting industry representative. **ADDRESSES:** All letters of interest and nominations should be sent to Kathleen L. Walker (see **FOR FURTHER INFORMATION CONTACT**).

### FOR FURTHER INFORMATION CONTACT:

Kathleen L. Walker, Center for Devices and Radiological Health (HFZ–17), Food and Drug Administration, 7520 Standish Pl. (MPN1), Rockville, MD 20855, 301– 827–7293, e-mail:

kathleen.walker@fda.hhs.gov.

# SUPPLEMENTARY INFORMATION:

# I. Background

# A. NMQAAC

The Mammography Quality Standards Reauthorization Act of 2004 (Public Law 108–365) requires the addition of at least two industry representatives with expertise in mammography equipment to the NMQAAC.

B. Medical Devices Advisory Committee

Section 520(f)(3) of the Federal Food, Drug and Cosmetic Act (the act) (21

TABLE 1.

U.S.C. 360j(f)(3)), as amended by the Medical Device Amendments of 1976, provides that each medical device panel include one nonvoting member to represent the interests of the medical device manufacturing industry.

FDA is requesting nominations for nonvoting members representing industry interests for the following vacancies listed in table 1 of this document:

# Committee/PanelApproximate Date<br/>Representatives NeededNMQAACFebruary 1, 2007Certain Panels of the Medical Devices Advisory CommitteeImmediateGeneral and Plastic Surgery Devices PanelImmediateHematology and Pathology Devices PanelImmediate

# **II. Functions**

# A. NMQAAC

The functions of the NMQAAC are to advise FDA on the following topics: (1) Developing appropriate quality standards and regulations for mammography facilities, (2) developing appropriate standards and regulations for bodies accrediting mammography facilities under this program, (3) developing regulations with respect to sanctions, (4) developing procedures for monitoring compliance with standards, (5) establishing a mechanism to investigate consumer complaints, (6) reporting new developments concerning breast imaging which should be considered in the oversight of mammography facilities, (7) determining whether there exists a shortage of mammography facilities in rural and health professional shortage areas and determining the effects of personnel on access to the services of such facilities in such areas, (8) determining whether there will exist a sufficient number of medical physicists after October 1, 1999, and (9) determining the costs and benefits of compliance with these requirements.

# B. Medical Devices Advisory Committee

The medical device panels perform the following functions: (1) Review and evaluate data on the safety and effectiveness of marketed and investigational devices and make recommendations for their regulation, (2) advise the Commissioner of Food and Drugs (the Commissioner) regarding

recommended classification or reclassification of these devices into one of three regulatory categories, (3) advise on any possible risks to health associated with the use of devices, (4) advise on formulation of product development protocols, (5) review premarket approval applications for medical devices, (6) review guidelines and guidance documents, (7) recommend exemption to certain devices from the application of portions of the act, (8) advise on the necessity to ban a device, (9) respond to requests from the agency to review and make recommendations on specific issues or problems concerning the safety and effectiveness of devices, and (10) make recommendations on the quality in the design of clinical studies regarding the safety and effectiveness of marketed and investigational devices.

# **II. Selection Procedure**

Any organization representing the mammography device industry or the medical device manufacturing industry wishing to participate in the selection of a nonvoting member to represent industry should send a letter stating that interest to the contact person (see FOR FURTHER INFORMATION CONTACT) within 30 days of publication of this notice. Persons who nominate themselves as industry representatives will not participate in the selection process. It is, therefore, recommended that nominations be made by someone within an organization, trade association, or firm who is willing to

participate in the selection process. Within the subsequent 30 days, FDA will send a letter to each organization and a list of all nominees along with their resumes. The letter will state that the interested organizations are responsible for conferring with one another to select a candidate, within 60 days after receiving the letter, to serve as the nonvoting industry representative on a particular committee or device panel. If no individual is selected within that 60 days, the Commissioner may select the nonvoting member to represent industry interests.

## **IV. Qualifications**

# A. NMQAAC

Persons nominated for membership as an industry representative on the NMQAAC must meet the following criteria: (1) Demonstrate expertise in mammography equipment and (2) be able to discuss equipment specifications and quality control procedures affecting mammography equipment. The industry representative must be able to represent the industry perspective on issues and actions before the advisory committee, serve as liaison between the committee and interested industry parties, and facilitate dialogue with the advisory committee on mammography equipment issues.

# B. Medical Devices Advisory Committee

Persons nominated for the device panels should be full time employees of firms that manufacture products that would come before the panel, or consulting firms that represent manufacturers, or have similar appropriate ties to industry.

# V. Application Procedure

Individuals may nominate themselves, or an organization representing the mammography device industry or medical device industry may nominate one or more individuals to serve as a nonvoting industry representative. A current curriculum vitae (which includes the nominee's business address, telephone number, and e-mail address) and the name of the committee or panel of interest should be sent to the contact person (see FOR FURTHER INFORMATION CONTACT). FDA will forward all nominations to the organizations that have expressed interest in participating in the selection process for that committee or panel.

<sup>7</sup> FDA has a special interest in ensuring that women, minority groups, individuals with disabilities, and small businesses are adequately represented on its advisory committees. Therefore, the agency encourages nominations for appropriately qualified candidates from these groups.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. app. 2) and 21 CFR part 14, relating to advisory committees.

Dated: September 28, 2006.

# Randall W. Lutter,

Associate Commissioner for Policy and Planning.

[FR Doc. E6–16438 Filed 10–4–06; 8:45 am] BILLING CODE 4160–01–S

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Substance Abuse and Mental Health Services Administration

# Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

# Proposed Project: Protection and Advocacy for Individuals With Mental Illness (PAIMI) Final Rule, 42 CFR Part 51 (OMB No. 0930–0172)—Extension

These regulations meet the directive under 42 U.S.C. 10826(b) requiring the Secretary to promulgate final regulations to carry out the PAIMI Act. The regulations contain information collection requirements. The Act authorized funds to support activities on behalf of individuals with significant (severe) mental illness (adults) or emotional impairment (children/youth) [42 U.S.C. at 10802(4)]. However, only entities designated by the governor of each State and six (6) territories (the American Indian Consortium, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands), and the Mayor of the District of Columbia to protect and advocate the rights of persons with developmental disabilities under Title I, Subtitle C-Protection and Advocacy of Individual Rights, of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 [42 U.S.C. 150041 et seq.] are eligible to receive PAIMI grants [42 U.S.C. at 10802(2)]. PAIMI grants are based on a formula prescribed by the Secretary [42 U.S.C. at 10822(a)(1)(A)].

On January 1, each eligible State protection and advocacy (P&A) system is required to prepare and transmit to the Secretary and head of the State Mental Health Agency, in which the system is located, a report describing its activities, accomplishments, and expenditures during the most recently completed fiscal year. Section 10824(a) of the Act requires that the State P&A system's annual reports to the Secretary, shall describe its activities, accomplishments, and expenditures to protect the rights of individuals with mental illness supported with payments from PAIMI Program allotments. These include:

• The number of (PAIMI-eligible) individuals with mental illness served;

• A description of the types of activities undertaken;

• A description of the types of facilities providing care or treatment to which such activities are undertaken;

• A description of the manner in which the activities are initiated;

• A description of the accomplishments resulting from such activities;

• A description of systems to protect and advocate the rights of individuals with mental illness supported with payments from PAIMI Program allotments;

• A description of activities conducted by States to protect and advocate such rights;

• A description of mechanisms established by residential facilities for individuals with mental illness to protect such rights; and,

• A description of the coordination among such systems, activities and mechanisms;

• Specification of the number systems that are public and nonprofit systems established with PAIMI Program allotments;

 Recommendations for activities and services to improve the protection and advocacy of the rights of individuals with mental illness and a description of the needs for such activities and services which have not been met by the State P&A systems established under the PAIMI Act \* \* \* [The PAIMI Rules 42 CFR Part 51 at section 51.32(b) states that P&A systems may place restrictions on case or client acceptance criteria developed as part of its annual PAIMI priorities. However, prospective clients must be informed of any such restrictions at the time they request service].

This summary report must include a separate section, prepared by the PAIMI Advisory Council, that describes the council's activities and its assessment of the operations of the State P&A system. [42 U.S.C. 10805(7)].

The burden estimate for the annual State P&A system reporting requirements for these regulations is as follows.

42 CFR citation	Number of respondents	Responses per respond- ent	Burden per response (hrs.)	Total annual burden
51.(8)(a)(2) Program Performance Report	57	1	26.0	<sup>1</sup> 1,482
51.8(8)(a)(8) Advisory Council Report	57	1	10.0	<sup>1</sup> 570
51.10 Remedial Actions.				
Corrective Action Plan	7	1	8.0	56
Implementation Status Report	7	3	2.0	42
51.23(c) Reports, materials and fiscal data provided to advisory Council	57	1	1.0	57
51.25(b)(2) Grievance Procedure	57	1	.5	29