

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Meeting of the Task Force on Community Preventive Services

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

**ACTION:** Notice of meeting.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC) announces the next meeting of the Task Force on Community Preventive Services (Task Force). The Task Force is an independent, nonfederal body of nationally known leaders in public health practice, policy, and research who are appointed by the CDC Director. The Task Force was convened in 1996 by the Department of Health and Human Services (HHS) to assess the effectiveness of community, environmental, population, and healthcare system interventions in public health and health promotion. During this meeting the Task Force will consider the findings of systematic reviews and issue recommendations and findings to help inform decision making about policy, practice, and research in a wide range of U.S. settings. The Task Force's recommendations, along with the systematic reviews of the scientific evidence on which they are based, are compiled in the *Guide to Community Preventive Services (Community Guide)*.

**DATES:** The meeting will be held on Wednesday, October 20, 2010 from 8:30 a.m. to 5:30 p.m., MDT and Thursday, October 21, 2010 from 8:30 a.m. to 1 p.m., MDT.

**ADDRESSES:** The meeting will be held at the Curtis Hotel, 1405 Curtis Street, Denver, Colorado 80202, phone (303) 571-0300.

**FOR FURTHER INFORMATION CONTACT:** Freda Parker, Division of Community Preventive Services, Epidemiology and Analysis Program Office, Office of Surveillance, Epidemiology, and Laboratory Services, Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, Georgia 30333, phone: (404) 498-1119, e-mail: [communityguide@cdc.gov](mailto:communityguide@cdc.gov).

**Purpose:** The Task Force is meeting to consider findings of reviews and issue recommendations and findings to help inform decision makers about policy, practice, and research in a wide range of U.S. settings.

**Matters To Be Discussed:** Effectiveness of: Health Communication Campaigns with Product Distribution to

Improve Health Behaviors; Responsible Beverage Service (RBS) Training to Decrease Underage Drinking and Excessive Alcohol Consumption; Health Care System-Based Interventions Implemented in Combination to Increase Vaccination Rates; Economic evaluation of Immunization Information Systems; Proposals regarding use of an Existing Review of Early Childhood Education; and Prioritization of Reviews of Tobacco Prevention. Agenda items are subject to change as priorities dictate.

**Meeting Accessibility:** This meeting is open to the public, limited only by space available.

Dated: October 12, 2010.

**Tanja Popovic,**

*Deputy Associate Director for Science, Centers for Disease Control and Prevention.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

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

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA) (60 FR 56605, as amended November 6, 1995; as last amended at 75 FR 61157-61160 dated October 4, 2010).

This notice reflects organizational changes in the Health Resources and Services Administration. This notice updates the functional statement for the Office of Special Health Affairs (RA1). Specifically, this notice establishes the Office of Emergency Preparedness and Continuity of Operations (RA15) within the Office of Special Health Affairs (RA1).

#### Chapter RA1—Office of Special Health Affairs

##### Section RA1-10, Organization

Delete in its entirety and replace with the following:

The Office is headed by the Director, Office of Special Health Affairs (RA1), who reports directly to the Administrator, Health Resources and Services Administration. Office of Special Health Affairs includes the following components:

- (1) Office of the Director (RA1);
- (2) Office of Health Equity (RA11);

(3) Office of Global Health Affairs (RA12);

(4) Office of Strategic Priorities (RA13);

(5) Office of Health Information Technology and Quality (RA14); and

(6) Office of Emergency Preparedness and Continuity of Operations (RA15).

##### Section RA1-20, Functions

(1) Delete the functional statement for the Office of the Director (RA1) and replace in its entirety; and (2) establish the Office of Emergency Preparedness and Continuity of Operations (RA15).

#### Office of the Director (RA1)

Provides overall leadership, direction, coordination, and planning in the support of the Agency's cross-cutting health programs. Specifically: (1) Plans and directs activities to advance health equity and improve minority health and eliminate health disparities; (2) develops strategies to maximize HRSA's participation in efforts to improve health care for vulnerable populations worldwide; (3) provides leadership and direction to improve the delivery and quality of oral and behavioral health care and other Agency strategic priority health concerns; (4) provides leadership and direction in the development of policies on health information technology and quality; (5) provides support for the Department's Medical Claims Review Panel; and (6) coordinates HRSA activities related to emergency preparedness planning, policy, and continuity of operations and Government.

#### Office of Health Equity (RA11)

Serves as the principal advisor and coordinator to the Agency for the special needs of minority and disadvantaged populations, including: (1) Provides leadership and direction to address HHS and HRSA Strategic Plan goals and objectives related to improving minority health and eliminating health disparities; (2) establishes and manages an Agency-wide data collection system for minority health activities and initiatives including the White House Initiatives for Historically Black Colleges and Universities, Educational Excellence for Hispanic Americans, Tribal Colleges and Universities, Asian Americans and Pacific Islanders, and departmental initiatives; (3) implements activities to increase the availability of data to monitor the impact of Agency programs in improving minority health and eliminating health disparities; (4) participates in the formulation of HRSA's goals, policies, legislative proposals, priorities, and strategies as