Dated: September 17, 1996.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 96-24402 Filed 9-23-96: 8:45 am] BILLING CODE 4163-18-P

[30DAY-20]

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 Office on (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.

The following requests have been submitted for review since the last publication date on September 18, 1996. **Proposed Projects**

1. Tuberculosis in Children—New— The Centers for Disease Control and Prevention, National Center for HIV,

STD, and TB Prevention, Division of Tuberculosis Elimination, Surveillance **Epidemiologic Investigations Branch** will be conducting a study for the purpose of performing research concerning the epidemiology of TB in children, including children co-infected with the human immunodeficiency virus (HIV). The study will involve the following modules: (1) the epidemiology, magnitude and risk factors for TB in children, including HIV-infected children; (2) studies of the diagnosis of TB in children, and (3) reducing the risk of nosocomial transmission of TB in pediatric settings. The total cost to respondents and government is estimated at \$138,000.

| Respondents | Number of re- spondents | Number of re- sponses/re- spondent | Avg. burden/ response (in hrs.) |
|---------------------------------------|----------------------------|--|---------------------------------------|
| Positive Tuberculin Skin Testing Form | 100 200 | 1 1 | 0.33 0.33 |

The total annual burden is 99. 2. A Brief Intervention for Alcohol

Problems in an Emergency Department-New-The contribution of alcohol to injuries due to motor vehicle crashes, violence, and other causes has been a public health concern for many years. Because the emergency department (ED) is the primary source of treatment for many individuals with alcohol-related injuries, the ED visit provides a unique opportunity for early

recognition and initial clinical management of a major injury risk factor, excessive alcohol consumption. The field of alcohol treatment is evolving rapidly and therapeutic attention is increasingly directed toward persons with mild or moderate drinking problems who do not require specialized treatment. Controlled studies in outpatient primary care settings have demonstrated that interventions consisting of as little as a

single brief interview and feedback session can decrease alcohol consumption in 40% to 47% of excessive drinkers at 6 months followup. The purpose of this study is to design, implement, and evaluate the effectiveness of an ED-based prevention program for injured patients with alcohol probems that incorporates promising new screening methods and a brief intervention.

| Respondents | Number of re- spondents | Number of re- sponses/re- spondent | Avg. burden/ response (in hrs.) |
|-----------------------------|----------------------------|--|---------------------------------------|
| Recruitment/Pre-screen | 1,700 | 1 | 0.05 |
| Screen | 1,105 | 1 | 0.083 |
| Co-morbidity Information | 354 | 1 | 0.067 |
| Readiness to Change | 354 | 1 | 0.050 |
| Short Inventory of Problems | 354 | 1 | 0.067 |
| Baseline Drinking Behavior | 354 | 1 | 0.10 |
| Baseline Drug Behavior | 354 | 1 | 0.050 |
| Followup Information | 354 | 1 | 0.083 |
| Intervention* | 301 | 1 | 0.167 |
| Followup | 196 | 1 | 0.333. |

The total annual burden is 440.1.

Dated: September 17, 1996.

Wilma G. Johnson,

Acting Associate Director for Policy Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

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BILLING CODE 4163-18-P

Administration for Children and **Families**

Administration on Children, Youth and Families; Statement of Organization, Functions, and Delegations of **Authority**

This notice amends Part K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as follows: Chapter KB, The Administration on Children, Youth and Families (ACYF) (60 FR 56959), as last amended, November 6, 1995. This Notice reflects the new organizational structure for the Family and Youth Services Bureau established within the ACYF.

Amend Chapter KB as follows:

a. KB.10 Organization. Delete in its entirety and replace with the following:

KB.10 Organization. The Administration on Children, Youth and Families is headed by a Commissioner, who reports directly to the Assistant

Secretary for Children and Families, and consists of:

Office of the Commissioner (KBA) Division of Program Evaluation (KBB) Head Start Bureau (KBC) Program Operations Division (KBC1) Program Support Division (KBC2) Children's Bureau (KBD) Policy Division (KBD1) Program Operations Division (KBD3) Family and Youth Services Bureau (KBE)

National Center on Child Abuse and Neglect (KBF)

Program Policy and Planning Division (KBF1)

Clearinghouse Division (KBF2) Child Care Bureau (KBG) Program Operations Division (KBG1) Policy Division (KBG2)

b. Delete paragraph E in its entirety and replace with the following:

E. The Family and Youth Services Bureau recommends policy direction and programs to address youth and family issues to the Commissioner. It assesses policies, legislation and programs which affect youth and families; recommends budgetary and legislative proposals and subject areas for research and demonstration activities; coordinates efforts with and provides expert advice to departmental and other federal agencies on youth issues and programs and develops program initiatives to address the needs of youth and families. The Bureau represents HHS on various councils, workgroups and committees and provides leadership and coordination to other HHS programs and agencies.

The Bureau promotes a youth development approach to program services so that Bureau programs and activities are planned and designed with an emphasis on meeting the developmental needs of young people and their families, including runaway and homeless youth, youth at risk of involvement with gangs, violence and drugs and other youth in at-risk situations. Administration of these programs currently includes development and implementation of policy, guidelines and regulations concerning the funding and management of service projects for youth under the Runaway and Homeless Youth Act of 1974, the Anti-Drug Abuse Act of 1988 and the Crime Control Act of 1994.

The Bureau oversees the receipt, review and award of applications for grants that ultimately provide services to youth and families and monitors the management of these grants, either directly or in liaison with ACF Regional Offices. In addition, the Bureau designs, develops, funds and monitors support activities related to these programs including, but not limited to, the provision of technical assistance, a monitoring system, a data collection system, a family and youth clearinghouse and a national communications system/hotline.

The Bureau determines the conceptual and policy framework to address issues facing families and adolescents. It identifies problems, defines critical issues for investigation and makes recommendations regarding subject areas for research, demonstration and evaluation activities. Based on the outcomes of these activities, the Bureau disseminates information through conferences, forums and written materials; provides assistance to service providers and state and local governments in planning, developing, implementing and evaluating programs affecting family and youth; and recommends plans and programs to increase public awareness and understanding about activities affecting vulnerable families and youth.

Dated: September 17, 1996. Mary Jo Bane.

Assistant Secretary for Children and Families. [FR Doc. 96-24387 Filed 9-23-96; 8:45 am] BILLING CODE 4184-01-P

Regional Offices; Statement of Organization, Functions, and **Delegations of Authority**

This Notice amends Part K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as follows: Chapter KD, The Regional Offices of the Administration for Children and Families (61 FR 18147), as last amended, April 24, 1996. This reorganization realigns the functions in Region 1 to support their streamlining plan.

I. Amend Notice 60 FR 27315, dated May 23, 1995: The first sentence of the first paragraph should read as follows: "This Notice amends Part K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as follows: Chapter KD, The Regional Offices of the Administration for Children and Families (58 FR 44343), as last amended, May 1, 1996.'

II. Chapter KD is amended as follows: a. Delete KD.10 Organization in its entirety and replace with the following:

Office of the Regional Administrator (KD3A, KD8A, KDXA)

Office of the Regional Hub Director (KD4A and KD9A)

Office of Financial Operations (KD3B, KD4B, KD8B, KD9B and KDXB) Office of Family Security (KD3C, KD4C, KD8C, KD9C and KDXC)

Office of Family Supportive Services (KD3D, KD4D, KD8D, KD9D and KDXD) b. Delete KD.20 Functions, Paragraph

A in its entirety and replace with the following:

KD.20 Functions (For Regions 3, 8 and X) A. The Office of the Regional Administrator is headed by a Regional Administrator who reports to the Assistant Secretary for Children and Families. In addition, the Office of the Regional Administrator has a Deputy Regional Administrator who reports to the Regional Administrator. The Office provides executive leadership and direction to state, county, city, territorial and tribal governments, as well as public and private local grantees to ensure effective and 2 efficient program and financial management. It ensures that these entities conform to federal laws, regulations, policies and procedures governing the programs, and exercises all delegated authorities and responsibilities for oversight of the programs. The Office takes action to approve state plans and submits recommendations to the Assistant Secretary for Children and Families concerning state plan disapproval. The Office contributes to the development of national policy based on regional perspectives on all ACF programs. It oversees ACF operations, the management of ACF regional staff; coordinates activities across regional programs; and assures that goals and objectives are met and departmental and agency initiatives are carried out. The Office alerts the Assistant Secretary for Children and Families to problems and issues that may have significant regional or national impact. It represents ACF at the regional level in executive communications within ACF, with the HHS Regional Director, other HHS operating divisions, other federal agencies, and public or private local organizations representing children and families.

Within the Office of the Regional Administrator, an administrative staff assists the Regional Administrator and Deputy Regional Administrator in providing day-to-day support for regional administrative functions, including budget, internal systems, employee relations, and human resource development activities. The Staff develops and implements the regional planning process. It tracks, monitors