However, it has also been suggested that academic societies could be more active in filling this role. To this end, ORI plans to provide a single source cooperative agreement with the AAMC. The purpose of this cooperative agreement is to provide financial resources to the AAMC so that they will award grants to the targeted academic societies to undertake activities aimed at promoting the responsible conduct of research.

The total award to AAMC will amount to approximately \$275,000, of which \$25,000 will be used for administrative expenses. The remaining \$250,000 will be for proposed grants awards, subdivided into two categories. The first category will fund approximately 10 small grants of \$5,000 each to support single events or limited activities such as a special meeting, a national conference, or a publication. The second category will fund approximately eight larger grants of \$25,000 each. These grants will be used for major program initiatives aimed at promoting the responsible conduct of research.

As part of the May 2000 reorganization of the Office of Research Integrity, the Division of Education and Integrity, ORI, was directed to "develop and implement, in consultation with the Public Health Service agencies, activities and programs for PHS intramural and extramural research to teach the responsible conduct of research, promote research integrity, [and] prevent research misconduct.' The House Appropriation Committee Report for FY 2002 further urged that ORI form "a strong partnership [with] the extramural research community in both the development and implementation of ORI's policies and procedures." AAMC is ideally and uniquely suited to assist ORI in forming partnerships with the extramural community that will foster the responsible conduct of research, promote research integrity, and thereby prevent research misconduct.

Founded in 1876, AAMC is a leading association organized for the purpose of improving the nation's health through the advancement of medical schools, teaching hospitals, and academic societies. It is comprised of 125 accredited U.S. medical schools, 400 major teaching hospitals and health systems, and 98 academic and professional societies representing over 100,000 members, including the nation's medical students and residents. AAMC has been instrumental in providing a continuing forum for the discussion and exchange of information not only within its membership but also

among academic researchers more broadly, from the clinical sciences to basic research. No other academic organization has such a diverse membership and at the same time is so directly associated with the research programs sponsored by DHHS.

AAMC is uniquely qualified to assist ORI in reaching out to academic societies. The AAMC has demonstrated over the years that it can work successfully with the scientific community, which includes academic societies, by (1) providing information through educational conferences, seminars, and publications and (2) advocating with key congressional members and government agencies. Over the years, AAMC has also shown its ability to partner with other organizations, including government entities, such as Centers for Disease Control and Prevention. AAMC is comprised of five components. One of its components is the Council of Academic Societies (CAS). Therefore, it is because of this organizational relationship that the AAMC has a unique capacity to work directly with key academic societies that intersect with the PHS constituent community in a number of distinct ways, e.g., education, research, administration, health care delivery, and policy functions. Contact with key constituent communities will be organized through AAMC's Council of Academic Societies (CAS), one of five constituent components. ORI is confident, based on these important and unique characteristics, that AAMC is the only organization that can effectively bridge the gap between the relevant academic societies and the need to promote research integrity in fields that are directly relevant to the work of PHS.

The ORI will assume substantial programmatic involvement in this project. It will work cooperatively with AAMC in establishing specific goals for this program and participate in the peer review of the grants. It will also assist in announcing of the project and the grant results.

(OMB Catalog of Federal Domestic Assistance: The Catalog of Federal Domestic Assistance number for this Cooperative Agreement is CFDA #93.004)

Dated: June 6, 2002.

### Chris B. Pascal,

Director, Office of Research Integrity.
[FR Doc. 02–14739 Filed 6–11–02; 8:45 am]
BILLING CODE 4150–31–M

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# President's Council on Physical Fitness and Sports

**AGENCY:** Office of the Secretary, Office of Public Health and Science. **ACTION:** Notice of meeting.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (DHHS) is hereby giving notice that the President's Council on Physical Fitness and Sports will hold a meeting. This meeting is open to the public. A description of the Council's functions is included also with this notice.

**DATE AND TIME:** June 21, 2002, from 8 a.m. to 12:45 p.m.

ADDRESSES: Department of Health and Human Services, Hubert H. Humphrey Building, Room 800, 200 Independence Avenue, SW., Washington, DC 20201.

FOR FURTHER INFORMATION, CONTACT: Lisa Oliphant, Executive Director, President's Council on Physical Fitness and Sports, Hubert H. Humphrey Building, Room 738H, 200 Independence Avenue, SW., Washington, DC 20201, (202) 690–5187.

SUPPLEMENTARY INFORMATION: The President's Council on Physical Fitness and Sports (PCPFS) was established in 1956 by President Eisenhower after published reports indicated that American boys and girls were unfit compared to the children of Western Europe. The Council has undergone two name changes and several reorganizations before arriving at its present status as a program office within the Office of Public Health and Science in the United States Department of Health and Human Services. It currently operates under directives issued in Executive Order 13265, as amended. PCPFS serves to promote physical activity and sports participation among all Americans. The primary functions of the Council include (1) to advise the President and Secretary concerning progress made in carrying out the provisions of the Executive Order and recommend to the President and Secretary, as necessary, actions to accelerate progress; (2) to advise the Secretary on ways and means of enhancing opportunities for participation in physical fitness and sports, and, where possible, to promote and assist in the facilitation and/or implementation of such measures; (3) to advise the Secretary regarding opportunities to extend and improve physical activity/fitness and sports programs and services at the national,

state and local levels; and (4) advise the Secretary regarding the enhancement of objectives, programs and educational and promotional materials sponsored, overseen, and/or disseminated by the Council.

This meeting of the Council is being held to (1) introduce newly appointed members; (2) provide Council members with the status of ongoing Council programs and activities; and (3) plan for future projects and programs.

The 15-day notice exception found at 41 CFR 101–61015(b)(2) is invoked due to the President signing this Executive Order on June 6, limiting the amount of time available for public notice of the Council meeting, and the necessity of a meeting within 15 days of that date.

Dated: June 5, 2002.

#### Lisa E. Oliphant,

Executive Director.

[FR Doc. 02-14740 Filed 6-11-02; 8:45 am]

BILLING CODE 4150-28-P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS).

Time and Date: June 26, 2002—9 a.m.–6 p.m.; June 27, 2002—10 a.m.–2 p.m.

Place: The Wyndham City Center Hotel, 1143 New Hampshire Avenue, NW., Washington, DC 20037.

Status: Open.

Purpose: At this meeting the Committee will hear presentations and hold discussions on several health data policy topics. On the first day the full Committee will be briefed by HHS staff on a number of topics including an update on activities of the HHS Data Council: Departmental responses to recent reports and recommendations from the Committee; and the status of implementation of the administrative simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) including the status of privacy and data standards regulations. The Committee will hear a presentation on the Consolidated Health Informatics E-government Initiative and from a panel on recent activities in the healthcare quality area. The Committee will also vote on approval for its 5th annual report to Congress on the implementation of HIPAA administrative simplification provisions, the adoption of a plan for Heath Statistics in the 21st Century, and draft recommendations for code sets. There will be Subcommittee breakout sessions late in the afternoon of the first day and prior to the full Committee meeting on the second day.

Agendas for these breakout sessions may be found on the NCVHS Web site (URL below).

On the second day the full Committee will hear from the General Accounting Office on a study on linking records and privacy. Later in the day members will hear reports from the Subcommittees and Workgroups on their activities. Finally, the agendas for future NCVHS meetings will be discussed.

For Further Information Contact:
Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, Room 1100, Presidential Building, 6525
Belcrest Road, Hyattsville, Maryland 20782, telephone (301) 458–4245. Information also is available on the NCVHS home page of the HHS Web site http://www.ncvhs.hhs.gov/, where further information including an agenda will be posted when available.

Dated: May 4, 2002.

#### James Scanlon,

Director, Division of Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 02–14702 Filed 6–11–02; 8:45 am] BILLING CODE 4151–05–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Administration on Aging

[Program Announcement No. AoA-02-09]

### Fiscal Year 2002 Program Announcement; Availability of Funds and Notice Regarding Applications

**AGENCY:** Administration on Aging, HHS. **ACTION:** Announcement of availability of funds and request for applications.

**SUMMARY:** The Administration on Aging announces that under the Performance Outcome Measures Project it will hold two competitions to fund grant awards for cooperative agreements to support:

(1) State-wide surveys of program performance with State Agencies on Aging, and (2) the continued development of performance outcome measures survey instruments. Under the first competition, for State-wide surveys, AoA expects to enter into cooperative agreements at a federal share of approximately \$50,000 for one year with up to fifteen (15) State agencies on aging. Under the second competition, for the development of performance outcome measures survey instruments, AoA expects to enter into cooperative agreements at a federal share of approximately \$30,000 for one year with up to ten (10) State Agencies on Aging.

Purpose of grant awards: It is the purpose of the first part of this

competition to provide states with the opportunity to conduct performance outcome measures surveys at the state level. AoA is conducting national performance outcome surveys which the States can use as performance benchmarks for comparison with the State-wide surveys they elect to conduct. Under the second part of this competition for the performance outcome measures project states must work collaboratively to continue to refine the current survey measures and develop new measures in additional areas.

Eligibility for grant awards and other requirements: For both competitions under this Announcement eligibility is limited to State Agencies on Aging. Grantees are required to provide a 25% non-federal match.

**DATES:** The deadline date for the submission of applications is July 29, 2002.

ADDRESSES: Application kits are available by writing to the U.S. Department of Health and Human Services, Administration on Aging, Office of Evaluation, 330 Independence Ave., SW, Washington, DC 20201, Attn: David Bunoski, or by calling 202/260–0669. Applications must be mailed or hand-delivered to the Office of Grants Management at the same address. Instructions for electronic mailing of grant applications are available at <a href="http://www.aoa.gov/egrants">http://www.aoa.gov/egrants</a>.

Dated: May 24, 2002.

#### Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. 02-14701 Filed 6-11-02; 8:45 am]

BILLING CODE 4154-01-P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Program Announcement 02165]

Population-based Research in Attention-Deficit Hyperactivity Disorder; Notice of Availability of Funds

#### A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2002 funds for cooperative agreements for population-based research projects on Attention-Deficit Hyperactivity Disorder (ADHD) that describe prevalence, treated prevalence, select comorbid conditions, secondary conditions, and health risk behaviors.