Contact Person for More Information: Stephen Llewellyn, Acting Executive Officer on (202) 663–4070.

Dated: March 23, 2005.

#### Stephen Llewellyn,

Acting Executive Officer, Executive Secretariat.

[FR Doc. 05-6093 Filed 3-23-05; 4:12 pm] BILLING CODE 6750-06-M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the Secretary's Advisory Committee on Human Research Protections

**AGENCY:** Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**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 Secretary's Advisory Committee on Human Research Protections (SACHRP) will hold its seventh meeting. The meeting will be open to the public.

**DATES:** The meeting will be held on Monday, April 18, 2005, from 8:30 a.m. to 5 p.m. and on Tuesday, April 19, 2005 from 8:30 a.m. until 4:30 p.m.

**ADDRESSES:** The Radisson Hotel Old Town Alexandria, 901 North Fairfax Street, Alexandria, Virginia 22314.

### FOR FURTHER INFORMATION CONTACT:

Bernard Schwetz, D.V.M., Ph.D., Director, Office for Human Research Protections (OHRP), or Catherine Slatinshek, Executive Director, Secretary's Advisory Committee on Human Research Protections; Department of Health and Human Services, 1101 Wootton Parkway, Suite 200; Rockville, MD 20852; (301) 496–7005; fax: (301) 496–0527; e-mail address: sachrp@osophs.dhhs.gov.

**SUPPLEMENTARY INFORMATION:** Under the authority of 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended, SACHRP was established to provide expert advice and recommendations to the Secretary of Health and Human Services (HHS) and the Assistant Secretary for Health on issues and topics pertaining to or associated with the protection of human research subjects.

On April 18, 2005, SACHRP will receive and discuss preliminary reports from its two subcommittees, the Subpart A Subcommittee, which is evaluating the application of HHS regulations for the protection of human subjects at subpart A of 45 CFR part 46 in the

current research environment, and the Subcommittee on Research involving Children, which is assessing the HHS regulations and policies for research involving children. The subcommittees were established by SACHRP at its October 4–5, 2004, meeting and at its inaugural meeting on July 22, 2003, respectively. In addition, the Committee will receive the final report from the Subpart C Subcommittee which addressed issues related to HHS regulations and policies for research involving prisoners.

On April 19, 2005, the Committee will receive presentations and participate in discussions on the following topics: investigator education; human research protection program accreditation standards for investigator education; the role of the institutional official in a human research protection program; and incentives and disincentives for IRB monitoring and audit programs.

Public attendance at the meeting is limited to space available. Individuals who plan to attend the meeting and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact persons. Members of the public will have the opportunity to provide comments on both days of the meeting. Public comment will be limited to five minutes per speaker. Any members of the public who wish to have printed material distributed to SACHRP members for this scheduled meeting should submit materials to the Executive Director, SACHRP, prior to the close of business on Wednesday, April 13, 2005. Information about SACHRP and the draft meeting agenda will be posted on the SACHRP Web site at http:// www.hhs.gov/ohrp/sachrp.

Dated: March 22, 2005.

### Bernard A. Schwetz,

Director, Office for Human Research Protections, Executive Secretary, Secretary's Advisory Committee on Human Research Protection.

[FR Doc. 05–6021 Filed 3–25–05; 8:45 am] BILLING CODE 4150–36–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

# Meeting of the Citizens' Health Care Working Group

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ).

**ACTION:** Notice of public meeting.

**SUMMARY:** In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces the first meeting of the Citizens' Health Care Working Group mandated by section 1014 of the Medicare Modernization Act.

**DATES:** The meeting will be held on Monday, April 11, 2005 from 8:30 a.m. to 5 p.m. and Tuesday, April 12, 2005 from 8:30 a.m. to 3:30 p.m.

**ADDRESSES:** The meeting will be held at the Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, Maryland 20850. The meeting is open to the public.

### FOR FURTHER INFORMATION CONTACT:

Larry T. Patton, AHRQ Liaison to the Citizens' Health Care Working Group, at (202) 260–7251 or 1patton@ahrq.gov.

If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Mr. Donald L. Inniss, Director, Office of Equal Employment Opportunity Program, Program Support Center, on (301) 443–1144 no later than April 1, 2005. Agenda, roster, and minutes are available from Larry T. Patton, AHRQ Liaison to the Citizens' Health Care Working group, at (202) 260–7251 or 1patton@ahrq.gov.

**SUPPLEMENTARY INFORMATION:** Section 1014 of Pub. L. 108-173, the Medicare Modernization Act (42 U.S.C. 299 note) directs the Secretary of the Department of Health and Human Services (DHHS), acting through the Agency for Healthcare Research and Quality, to establish a Citizens' Health Care Working Group (Working Group). The statute charges the Working Group to: (1) Identify options for changing our health care system so that every American has the ability to obtain quality, affordable health care coverage; (2) provide for a nationwide public debate about improving the health care system; and (3) submit their recommendations to the President and the Congress.

The Citizens' Health Care Working Group is composed of 15 members: the Secretary of DHHS is designated as a member by the statute and the Comptroller General of the U.S. Government Accountability Office (GAO) is directed to appoint the remaining 14 members. The Comptroller General announced the 14 appointments on February 28, 2005. A list of the Working group members is available on the GAO Web site (http://www.gao.gov.).

### Agenda

On April 11 and April 12, 2005, the meeting will begin at 8:30 a.m., with the call to order by the Working group

Chair. This first meeting of the Working group will address organizational issues; a review of its statutory charge, review of applicable Federal regulations governing its work, the development of additional policies to govern its operations, and the establishment of the format, location, and schedule for their initial meetings. The official agenda will be available on AHRA's Web site at <a href="http://www.ahrq.gov">http://www.ahrq.gov</a> no later than April 1, 2005.

Dated: March 24, 2005.

#### Carolyn M. Clancy,

Director.

[FR Doc. 05–6176 Filed 3–24–05; 1:58 pm]

BILLING CODE 4160-90-M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[60Day-05BS]

### 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 404–371–5983 or 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: Human Behavior in Fire Study—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description:
This project will characterize the
behaviors of individuals who were
involved in a residential fire, and
determine which behaviors are
associated with injuries sustained in the
fire incident. Behaviors related to fire
escape planning and practice, smoke
alarm installation and maintenance,
physical and visual access to escape
routes, etc., will be studied. In the
United States each year, there are
approximately 400,000 residential fires,
with 14,000 non-fatal and 3,000 fatal

civilian injuries. In line with Healthy People 2010 objectives, NCIPC works to reduce and eliminate non-fatal and fatal injuries from residential fires. In order to develop effective fire-related injury prevention programs, a better understanding of human behavior in fires is needed.

The design of this study will be a matched-pair, case-control study. Cases will be defined as individuals who were injured in a residential fire and controls will be individuals who were involved in a residential fire, but were not injured. Fire incidents involving a fatality will be excluded from this study. Local fire departments throughout the United States will submit fire incident reports to study personnel, who will select incidents based on geographical location. Further screening for eligibility will be done using a brief telephone interview. For those selected, interviewers will conduct in-depth, computer-assisted face-to-face interviews with participants. The sequence of events surrounding the fire and the behaviors of interviewees will be ascertained using the Behavioral Sequence Interview Technique. In addition, information on the nature of injuries sustained; characteristics of the fire and home structure; other occupants present; previous fire experiences; safety training; and demographics on the persons interviewed will be collected. The only cost to the respondents is the time involved to complete the screening and/or face-toface interviews.

Estimate of Annualized Burden Table:

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Adults—Screened	1,250 1,000	1 1	15/60 1	313 1,000
Total				1,313

Dated: March 21, 2005.

### Betsey Dunaway,

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

[FR Doc. 05–6031 Filed 3–25–05; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-05BQ]

# Proposed Data Collections Submitted for Public Comment and Recommendations

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Comments are invited on: (a) Whether the proposed collection of information