

system of records from the system manager at the above address.

RECORD REVIEW PROCEDURES:

Requests from individuals for access to their records should be addressed to the system manager.

PROCEDURE TO CONTEST A RECORD:

GSA rules for access to systems of records, contesting the contents of systems of records, and appealing initial determinations are published at 41 CFR Part 105-64.

RECORD SOURCES:

The sources are individuals, other employees, supervisors, other agencies, management officials, and non-Federal sources such as private firms.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

2005 White House Conference on Aging Policy Committee

AGENCY: Administration on Aging, HHS.
ACTION: Notice of meeting.

SUMMARY: Pursuant to Section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C. Appendix 2), notice is hereby given of the eighth Policy Committee meeting concerning planning for the 2005 White House Conference on Aging. The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should inform the contact person listed below in advance of the meeting. This notice is being published less than 15 days prior to the meeting due to scheduling problems.

DATES: The meeting will be held Tuesday, October 25, 2005, from 1 p.m. to 4 p.m.

ADDRESSES: The meeting will be held in the Atrium Ballroom at The Washington Court Hotel, 525 New Jersey Avenue, NW., Washington, DC 20001-1527.

FOR FURTHER INFORMATION CONTACT: Kim Butcher at (301) 443-2887, or e-mail at <http://www.Kim.Butcher@whcoa.gov>. Registration is not required. Seating is on a first come, first-served basis.

SUPPLEMENTARY INFORMATION: Pursuant to the Older Americans Act Amendments of 2000 (Pub. L. 106-501, November 2000), the Policy Committee will meet to finalize discussions and

planning, including a vote on the Annotated Agenda, for the 2005 WHCoA that will be held from December 11 through 14, 2005 at the Marriott Wardman Park Hotel in Washington, DC.

Dated: October 13, 2005.

Edwin L. Walker,

Deputy Assistant Secretary for Policy and Programs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 6772-76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 70 FR 58431-32, dated October 6, 2005) is amended to reflect the reorganization of the National Immunization Program.

Section C-B, Organization and Functions, is hereby amended as follows:

Revise the functional statement for the *Office of the Director (CJ1), National Immunization Program Office (CJ)* by inserting after item (12) the following: (13) creates and executes information science and technology strategic plans to provide the Program with related services (e.g., hardware/software consultation, database development and management, etc.) and ensures compliance with CDC IT infrastructure and requirements.

Delete in their entirety the following titles and functional statements of the *National Immunization Program Office (CJ)*:

Data Management Division (CJ2)
Systems Operation and Design Activity (CJ2-2)

Immunization Registry Support Branch (CJ22)

Assessment Branch (CJ23)
Statistical Analysis Branch (CJ24)

Following the title and functional statement for the *Health Services Research and Evaluation Branch (CJ46)*, *Immunization Services Division (CJ4)*, insert the following:

Immunization Registry Support Branch (CJ47). (1) Provides quality assurance for each program study,

survey, and surveillance system evaluation of immunization registries at the state and local level to build an infrastructure to raise and sustain immunization coverage in children; (2) facilitates information flow among Program, divisions, grantees, professional organizations, and private contractors regarding immunization registry systems development through regular conference calls, clearinghouse function, up-to-date Web sites, and an annual national conference; (3) establishes complex health and technical functional specifications and standards for immunization registry systems developed by state and local health department personnel and commercial software developers to be used throughout public and private health delivery systems; (4) acts as a catalyst to build the political and professional will and legal environment to facilitate the development and implementation of immunization registries; (5) fosters evidence-based enhancements of immunization registries through on-site standardized evaluations and promoting research that identifies factors associated with system success and failure; (6) promotes the secure, automated exchange of immunization records between immunization registries by fostering consensus on, and implementation of, the required protocols and standards; (7) advocates for immunization registries in the development and maintenance of public health data models and participates in the development of such data models; and (8) formulates long-range plans and proposals for future systems modification, and facilitates the use of standards and expert guidance to assure national and international health information systems are responsive to agency and constituent needs.

Assessment Branch (CJ48). (1) Performs coding and editing, and arranges for data input either in-house or through an outside vendor; (2) collaborates with the National Center for Health Statistics, and other Centers as necessary, in the conduct of household probability surveys, random digit dialing surveys, and other types of surveys to measure immunization coverage; (3) collects, tabulates and analyzes immunization assessment data, including sample survey data, census counts at school entrance, monthly and/or quarterly vaccine administration reports, and the biologic reports from manufacturers; (4) designs sample surveys for epidemiologic investigations of childhood and adult vaccine-preventable diseases; (5) develops and maintains liaison with external groups