delivery. The Patient Safety and Quality Improvement Final Rule (Patient Safety Rule), 42 CFR Part 3, authorizes AHRQ, on behalf of the Secretary of HHS, to list as a PSO an entity that attests that it meets the statutory and regulatory requirements for listing. A PSO can be "delisted" by the Secretary if it is found to no longer meet the requirements of the Patient Safety Act and Patient Safety Rule, including when a PSO chooses to voluntarily relinquish its status as a PSO for any reason.

DATES: The directories for both listed and delisted PSOs are ongoing and reviewed weekly by AHRQ. The delisting was effective at 12 Midnight ET (2400) on April 1, 2010.

ADDRESSES: Both directories can be accessed electronically at the following HHS Web site: *http://www.pso.AHRQ.gov/index.html.*

FOR FURTHER INFORMATION CONTACT: Diane Cousins, RPh., Center for Quality Improvement and Patient Safety, AHRQ, 540 Gaither Road, Rockville, MD 20850; Telephone (toll free): (866) 403–3697; Telephone (local): (301) 427–1111; TTY (toll free): (866) 438–7231; TTY (local): (301) 427–1130; E-mail: *pso@AHRQ.hhs.gov.*

SUPPLEMENTARY INFORMATION:

Background

The Patient Safety Act authorizes the listing of PSOs, which are entities or component organizations whose mission and primary activity is to conduct activities to improve patient safety and the quality of health care delivery.

HHS issued the Patient Safety Rule to implement the Patient Safety Act. AHRQ administers the provisions of the Patient Safety Act and Patient Safety Rule (PDF file, 450 KB. PDF Help) relating to the listing and operation of PSOs. Section 3108(d) of the Patient Safety Rule requires AHRQ to provide public notice when it removes a PSO from listing. AHRQ has accepted a notification from the Florida Patient Safety Corporation, PSO number P0001, to voluntarily relinquish its status as a PSO. Accordingly, the Florida Patient Safety Corporation was delisted effective at 12 Midnight ET (2400) on April 1, 2010.

More information on PSOs can be obtained through AHRQ's PSO Web site at *http://www.pso.AHRQ.gov/index.html.*

Dated: September 3, 2010.

Carolyn M. Clancy,

Director.

[FR Doc. 2010–23078 Filed 9–17–10; 8:45 am]

BILLING CODE 4160–90–M

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 51088–51091 dated August 18, 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) and the functional statement for the Office of Planning, Analysis and Evaluation (RA5). Specifically, this notice moves the Office of Health Information Technology and Quality (RA52) from the Office of Planning, Analysis and Evaluation (RA5) to the Office of Special Health Affairs (RA1); abolishes the Office of Data Management and Research (RA54) and establishes the Office of Research and Evaluation (RA56); and eliminates the Office of Planning and Evaluation (RA51) and moves its functions to the Office of Research and Evaluation (RA56).

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); and

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

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 Health Information Technology and Quality (RA14).

Office of the Director (RA1)

Provides overall leadership, direction, coordination, and planning in the support of the Agency's special 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 health care, mental health and other priority health concerns; (4) provides leadership in the development of policies on health information technology and quality; and (5) provides support for the Department's Medical Claims Review Panel.

Office of Health Information Technology and Quality (RA14)

Serves as the principal advisor and coordinator to the Agency for health information technology and quality. Specifically: (1) Provides support, policy direction, and leadership for HRSA's health quality efforts; (2) serves as the focal point for developing policy to promote the coordination and advancement of health information technology, including telehealth, to HRSA's programs, including the use of electronic health record systems; (3) develops an Agency-wide health information technology and telehealth strategy for HRSA; (4) assists HRSA components in program-level health information technology and health quality efforts; (5) ensures successful dissemination of appropriate information technology advances, such as electronic health records systems, to HRSA programs; (6) works collaboratively with States, foundations, national organizations, private sector providers, as well as departmental agencies and other Federal departments in order to promote the adoption of health information technology and health quality policy; (7) ensures the health information technology policy and activities of HRSA are coordinated with those of other HHS components; (8) assesses the impact of health information technology and quality initiatives in the community, especially for the uninsured, underserved, and special needs populations; (9) translates technological advances in health information technology to HRSA's programs; (10) provides guidance in using the results of the medical claims review process to HRSA programs to improve quality; and (11) provides support for the Department's Medical Claims Review Panel.

Chapter RA5—Office of Planning, Analysis and Evaluation

Section RA5–10, Organization

Delete in its entirety and replace with the following:

The Office is headed by the Director, Office of Planning, Analysis and Evaluation (RA5), who reports directly to the Administrator, Health Resources and Services Administration. Office of Planning, Analysis and Evaluation includes the following components:

(1) Office of the Director (RA5);

(2) Office of Policy Analysis (RA53); and

(3) Office of Research and Evaluation (RA56).

Section RA5–20, Functions

(1) Delete the functional statement for the Office of the Director (RA5) and replace in its entirety; and (2) delete the functional statement for the Office of Data Management and Research (RA54) and replace with the newly established Office of Research and Evaluation (RA56).

Office of the Director (RA5)

(1) Provides Agency-wide leadership for policy development, data collection and management, major analytic activities, research, and evaluation; (2) develops HRSA-wide policies; (3) participates with HRSA organizations in developing strategic plans for their component; (4) coordinates the Agency's long term strategic planning process; (5) conducts and/or guides analyses, research, and program evaluation; (6) analyzes budgetary data with regard to planning guidelines; (7) coordinates the Agency's intergovernmental activities; (8) maintains liaison between the Administrator, other OPDIVs, Office of the Secretary staff components, and other Departments on critical matters involving analysis of program policy undertaken in the Agency; (9) prepares policy analysis papers and planning documents as required; and (10) collaborates with Office of Operations in the development of budgets, performance plans, and other administration reporting requirements.

Office of Research and Evaluation (RA56)

(1) Serves as the principal source of leadership and advice on program information and research; (2) analyzes and coordinates the Agency's need for information and data for use in the management and direction of Agency programs; (3) manages an Agency-wide information and data group as well as an Agency-wide research group; (4) maintains an inventory of HRSA databases; (5) provides technical assistance to HRSA staff in database development, maintenance, analysis, and distribution; (6) promotes the availability of HRSA data through web sites and other on-line applications; (7) conducts, oversees, and fosters high quality research across HRSA programmatic interests; (8) develops an annual research agenda for the Agency; (9) conducts, leads, and/or participates with HRSA staff in the development of research and demonstration projects; (10) coordinates HRSA participation in institutional review boards and the protection of human subjects; (11) conducts, guides, and/or participates in major program evaluation efforts and prepares reports on HRSA program efficiencies; (12) develops annual performance plans; (13) analyzes budgetary data with regard to planning guidelines; (14) develops and produces performance reports required under the Government Performance and Accountability Report and OMB; and (15) manages HRSA activity related to the Paperwork Reduction Act, and other OMB policies.

Section RA–30, Delegations of Authority

All delegations of authority and re-delegations of authority made to HRSA officials that were in effect immediately prior to this reorganization, and that are consistent with this reorganization, shall continue in effect pending further re-delegation.

This reorganization is upon date of signature.

Dated: September 14, 2010.

Mary K. Wakefield,

Administrator.

[FR Doc. 2010–23429 Filed 9–17–10; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HOMELAND SECURITY

U.S. CUSTOMS AND BORDER PROTECTION

Agency Information Collection Activities: Passenger and Crew Manifest

AGENCY: U.S. Customs and Border Protection, Department of Homeland Security.

ACTION: 30–Day notice and request for comments; Revision of an existing information collection: 1651–0088.

SUMMARY: U.S. Customs and Border Protection (CBP) of the Department of Homeland Security will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act: Passenger and Crew Manifest (Advance Passenger Information System–APIS). This is a proposed extension of an information collection that was previously approved. CBP is proposing that this information collection be extended with a change to the burden hours. This document is published to obtain comments from the public and affected agencies. This proposed information collection was previously published in the **Federal Register** (75 FR 42115) on July 20, 2010, allowing for a 60-day comment period. This notice allows for an additional 30 days for public comments. This process is conducted in accordance with 5 CFR 1320.10.

DATES: Written comments should be received on or before October 20, 2010.

ADDRESSES: Interested persons are invited to submit written comments on this proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to the OMB Desk Officer for Customs and Border Protection, Department of Homeland Security, and sent via electronic mail to *oira_submission@omb.eop.gov* or faxed to (202) 395–5806.

SUPPLEMENTARY INFORMATION:

U.S. Customs and Border Protection (CBP) encourages the general public and affected Federal agencies to submit written comments and suggestions on proposed and/or continuing information collection requests pursuant to the Paperwork Reduction Act (Pub. L.104–13). Your comments should address one of the following four points:

(1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency/component, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agencies'/components' estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collections of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological techniques or other forms of information.