*Time:* 8:30 a.m.–6 p.m. *Place:* Building 45, Natcher Center Main Auditorium, NIH campus, Bethesda, MD.

Meeting Objectives:

A. Discuss the uses and shortcomings of current symptom-based instruments in research of lower urinary tract dvsfunction (LUTD).

B. Disseminate state-of-the-art methodology to improve patient reported outcomes (PRO) of symptomatic LUTD.

C. Discuss the validation and qualification process of new measurement tools, and patient phenotyping.

D. Align the new LUTD symptom measurement tool among involved parties.

This workshop is free and open to the public. We encourage registration for those attending in person (see Web address below).

Individuals with disabilities who need reasonable accommodations should indicate your needs on the registration form or contact Ms. Mary Compton at The Scientific Consulting Group, Inc. by e-mail at *mcompton@scgcorp.com* or by telephone to 301–670–4990.

For more information, including an agenda, registration and visitor information, please visit the Workshop Web site: http://www2.niddk.nih.gov/News/Calendar/MOMUS2011.

*Contact Person:* Ziya Kirkali, M.D.; Senior Scientific Advisor, Division of Kidney, Urology and Hematology, NIDDK, NIH. Phone: 301–594–7718 Email: *kirkaliz@mail.nih.gov.* 

Dated: September 29, 2011.

#### Robert Star,

Director, KUH/NIDDK, National Institutes of Health.

[FR Doc. 2011–25872 Filed 10–5–11; 8:45 am] BILLING CODE 4140–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Institutes of Health

# National Institute of General Medical Sciences; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Institute of General Medical Sciences Special Emphasis Panel, Review of Minority Biomedical Research Support Behavioral Applications.

*Date:* October 27, 2011.

*Time:* 8:30 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Courtyard Chevy Chase, 5520 Wisconsin Avenue, Chevy Chase, MD 20815.

*Contact Person:* Rebecca H. Johnson, PhD, Scientific Review Officer, Office of Scientific Review, National Institute of General Medical Sciences, National Institutes of Health, 45 Center Drive, Room 3AN18C, Bethesda, MD 20892, 301–594–2771,

## johnsonrh@nigms.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.375, Minority Biomedical Research Support; 93.821, Cell Biology and Biophysics Research; 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.862, Genetics and Developmental Biology Research; 93.88, Minority Access to Research Careers; 93.96, Special Minority Initiatives, National Institutes of Health, HHS)

Dated: September 29, 2011.

### Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–25870 Filed 10–5–11; 8:45 am] BILLING CODE 4140–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## National Institutes of Health

# Statement of Organization, Functions, and Delegations of Authority

Part N, National Institutes of Health (NIH), of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services (40 FR 22859, May 27, 1975, as amended most recently at 66 FR 6617, January 22, 2001, and redesignated from Part HN as Part N at 60 FR 56605, November 9, 1995), is amended as set forth below to reflect organizational changes in the National Institute on Minority Health and Health Disparities (NIMHD).

Section N–B, Organization and Functions, is amended as follows: Immediately after the paragraph headed "National Institute of Minority Health and Health Disparities" (NE, formerly HNE), insert the following:

Office of the Director (ŎD) (NE 1 formerly HNE 1). Determines and provides leadership to the Institute's

programs, plans, and policies; Provides leadership for the NIH minority health and health disparities research and activities including the implementation of the Minority Health and Health **Disparities Research and Education Act** (Pub. L. 106-525) and the Patient Protection and Affordable Care Act (Pub. L. 111-148) and other relevant public laws as they relate to the NIMHD mission; Directs an integrated system of coordination for the NIH health disparities research program; Directs the Institute's development and coordination of minority health and health disparities research programs, activities, and strategic partnerships with the NIH Institutes and Centers, NIH Office of the Director, Federal agencies, State, local, tribal, and regional public health agencies and private entities; Provides leadership for the NIH health disparities strategic plan and budget; Leads the management, communications, legislation, strategic planning, science policy and ethics activities for the Institute; and Provides leadership for developing and revising the national definition for health disparity population in consultation with the Agency for Healthcare Research and Quality.

Office of Extramural Research Administration (OERA) (NE 16, formerly HNE 16). Responsible for the administration of the Institute's extramural research dealing with peer review activities, grants management, extramural grants policy, and ethics issues (patient rights, animal rights, financial conflict of interest, *etc.*); Facilitates Institute-wide communication and coordination regarding extramural policy, planning, and analysis; Provides advice and guidance to the Director regarding the Institute's peer and objective review processes as well as NIH extramural programs, policies and procedures; Recommends mechanisms to be used or develops mechanisms to accomplish program objectives; Provides leadership to program, review, and grants management staff in writing solicitations for grants and contracts and reviews funding opportunity announcements for clearance; Develops, implements, and manages integrated policies and procedures affecting all NIMHD extramural activities, and assures appropriate training, information dissemination, and systems for NIMHD extramural staff and the extramural research community Interprets, advises, and ensures NIMHD staff adherence to and understanding of impact of NIH and Department of Health and Human Services extramural

policies; Represents the Institute as liaison for *NIH Guide to Grants and Contracts* and the NIH Early Notification System (ENS); and Administers the Public Health Service Guidelines on Misconduct in Science and manages the Institute's Confidentiality Certificate program and the Grant Appeals Process.

Office of Administrative Management (OAM) (NE 17, formerly HNE 17). Directs, coordinates, and conducts administrative activities of the Institute including personnel and staffing, purchase and maintenance of equipment and supplies, and acquisition and management of space; Performs analytical studies related to the administrative organization, processes and procedures of the Institute and establishes effective administrative controls; Designs and conducts management analyses, studies and surveys including manpower utilization, workload measurement, work simplification, etc., for all parts of the Institute; Develops and/or provides advice on the development and implementation of general administrative policies, procedures and guidelines throughout the Institute; Interprets, analyzes, and makes recommendations concerning delegations and re-delegations of program and administrative authorities and develops appropriate delegating documents; Supervises, directs, manages, and coordinates the planning and execution of the Institute's budget process and financial management operations, which includes providing guidance to Institute leadership and staff on budget preparation and management; Oversees the records management activities of the Institute; Coordinates the Institute's committee management functions; and Oversees and coordinates the Institute's information technology (IT) activities.

Office of Communications and Public Liaison (OCPL) (NE 18, formerly HNE 18). Serves as the focal point for the Institute's communications, public affairs, media relations, and public liaison activities; Develops and conducts a comprehensive communications program utilizing various communications vehicles to interpret, develop, test, and disseminate the programs, policies, goals and research accomplishments supported and carried out by the NIMHD to diverse audiences including the public, the media, the biomedical community, healthcare providers, and specialized groups; Develops short- and long-term communications policies, goals, objectives, and strategies in support of the mission and priorities of the

Institute; Manages the Institute's Web site including content, policies, standards, guidelines, and a central Web-based resource for information and research findings on minority health and health disparities; Coordinates NIH communications activities related to minority health and health disparities in collaboration with the NIH Institutes and Centers; Coordinates and manages the Institute's intranet content; Manages correspondence control, and clearance services for the Institute; Coordinates and collaborates with other organizational components on health communications research activities.

Office of Strategic Planning, Legislation, and Scientific Policy (OSPLSP) (NE 19, formerly HNE 19). Serves as the focal point for NIMHD's science policy, strategic planning and evaluation activities; Provides leadership for the development of strategic plans, policies, goals, objectives, and techniques in support of the Institute's mission; Coordinates, develops, and implements an ongoing strategic planning process for the Institute and ensures that the Institute has a long-range, sustainable vision and program plan for carrying out its mandates; Leads the Institute's efforts to plan, coordinate, review, and evaluate research and other activities on minority health and health disparities conducted or supported by the NIH Institutes and Centers, consistent with the NIMHD's authorizing statute; Provides leadership for the development of an integrated and effective NIH health disparities strategic plan and budget consistent with the authorizing statute; Provides leadership for the legislative activities of the Institute, which includes analyzing and tracking legislation relevant to the mission of the Institute, and makes recommendations for legislative proposals; and Conducts and coordinates policy analysis related to various aspects of minority health and health disparities.

Division of Scientific Programs (DSP) (NE 3, formerly, HNE 3). Serves as the focal point for planning, directing, implementing and managing the Institute's extramural research programs, including its legislatively mandated extramural research programs and other research, research training, research capacity building, career development, and community-based participatory research initiatives; Manages a diverse portfolio of special projects with respect to minority health conditions and other populations with health disparities; and Determines program priorities and recommends funding strategies to achieve program goals.

Division of Data Management and Scientific Reporting (DDMSR) (NE 4, formerly, HNE 4). Provides leadership for knowledge management and scientific reporting; Maintains a Health Disparities Information (HDI) database to facilitate the collection, interpretation, and analysis of data, education, dissemination, and communication of information to various audiences in collaboration with other Institute organizational components; Collaborates with the NIMHD OSPLSP to analyze and synthesize data on minority health and health disparities research conducted and supported by the NIH Institutes and Centers; Coordinates reporting requests on the Institute and NIH activities on minority health and health disparities research; Provides epidemiological and statistical expertise for the Institute on planning, designing, and implementing research studies, and to support research programs; Coordinates datacollection activities and reporting on minority health and health disparities including the Institute's implementation of relevant policies, regulations, and laws; Provides advice to the Institute senior management and program officials on data collection standards and guidelines; Coordinates Institute activities under the Privacy Act; and Administers the Institute's Freedom of Information Act activities.

Division of Intramural Research (OIR) (NE 5, formerly, HNE 5). Provides leadership for the Institute's intramural research program to prevent, diagnose, treat and understand diseases and conditions that disproportionately affect health disparity populations; Plans, develops, and conducts innovative transdisciplinary research focusing on the linkage between biological and nonbiological determinants of health in health disparity populations to include basic, behavioral, social sciences and clinical research; Develops, coordinates and implements training and career development programs in minority health and health disparities research; Collaborates with and coordinates intramural research on minority health and health disparities conducted by the NIH Institutes and Centers; Integrates new research into the Institute's program structure; and Provides advice to the Institute Director and staff on matters of scientific interest to the Institute.

Delegations of Authority Statement: All delegations and redelegations of authority to officers and employees of NIH that were in effect immediately prior to the effective date of this reorganization and are consistent with this reorganization shall continue in effect, pending further redelegation.

Dated: August 8, 2011.

# Francis S. Collins,

Director, National Institutes of Health. [FR Doc. 2011–25862 Filed 10–5–11; 8:45 am] BILLING CODE 4140–01–P

# DEPARTMENT OF HOMELAND SECURITY

## Coast Guard

[USCG-2011-0948]

# Great Lakes Pilotage Advisory Committee

AGENCY: Coast Guard, DHS.

**ACTION:** Committee Management; Notice of Federal Advisory Committee Meeting; correction.

**SUMMARY:** The Coast Guard published in the **Federal Register** of October 4, 2011, a notice announcing a Great Lakes Pilotage Advisory Committee (GLPAC) public meeting on October 18, 2011, in Washington, District of Columbia. This notice corrects that previous notice to add an explanation for why 15-days advance notice was not given.

**DATES:** GLPAC will meet on Tuesday, October 18, 2011, from 9 a.m. to 4 p.m. Please note the meeting may close early if the committee completes its business. Written material and requests to make oral presentations should reach us on or before October 14, 2011.

**ADDRESSES:** The meeting will be held at Coast Guard Headquarters, 2100 2nd Street Southwest, Washington, District of Columbia 20593, in conference room 51309.

FOR FURTHER INFORMATION CONTACT: Mr. David Dean, GLPAC Assistant Designated Federal Officer (ADFO), Commandant (CG–5522), U.S. Coast Guard Headquarters, 2100 Second Street, SW., Stop 7580, Washington, DC 20593–7580; telephone 202–372–1533, fax 202–372–1909, or e-mail at David.J.Dean@uscg.mil.

**SUPPLEMENTARY INFORMATION:** The Coast Guard's October 4, 2011 notice of the October 18, 2011, GLPAC meeting inadvertently failed to contain an explanation for its publication less than 15 calendar days prior to the meeting, as required by General Services Administration rules 41 CFR 102– 3.150(b). The reason the notice was published only 14 calendar days prior to the meeting was a Coast Guard administrative delay. The Coast Guard regrets the delay in publication, but notes that the notice was published 14 days prior to the meeting and was publicly available on the **Federal Register** Web site 19 calendar days prior to the meeting. Additionally, all known interested parties were made aware of the meeting with sufficient time for planning purposes.

It is critical that this meeting be held on the announced meeting date because the advisory committee members have limited availability for the remainder of the calendar year. Delays in committee discussions could have significant ramifications for ongoing Coast Guard studies and evaluations on the agenda for the upcoming meeting. Maintaining the current meeting schedule allows the Coast Guard to continue deliberations and forward progress regarding the bridge hour study, a key component of the statutory ratemaking authority of the Great Lakes Pilotage program.

If you have been adversely affected by the one-day delay in publishing the notice, contact Mr. David Dean (see FOR FURTHER INFORMATION CONTACT) and the Coast Guard will make every effort to accommodate you.

Dated: September 29, 2011.

# Kathryn A. Sinniger,

Chief, Office of Regulations and Administrative Law (CG–0943), U.S. Coast Guard.

[FR Doc. 2011–25817 Filed 10–5–11; 8:45 am] BILLING CODE 9110–04–P

# DEPARTMENT OF HOMELAND SECURITY

### Federal Emergency Management Agency

[Internal Agency Docket No. FEMA-4030-DR; Docket ID FEMA-2011-0001]

## Pennsylvania; Major Disaster and Related Determinations

**AGENCY:** Federal Emergency Management Agency, DHS. **ACTION:** Notice.

**SUMMARY:** This is a notice of the Presidential declaration of a major disaster for the Commonwealth of Pennsylvania (FEMA–4030–DR), dated September 12, 2011, and related determinations.

**DATES:** *Effective Date:* September 12, 2011.

# FOR FURTHER INFORMATION CONTACT:

Peggy Miller, Office of Response and Recovery, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, (202) 646–3886. **SUPPLEMENTARY INFORMATION:** Notice is hereby given that, in a letter dated September 12, 2011, the President issued a major disaster declaration under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121 *et seq.* (the "Stafford Act"), as follows:

I have determined that the damage in certain areas of the Commonwealth of Pennsylvania resulting from Tropical Storm Lee beginning on September 3, 2011, and continuing, is of sufficient severity and magnitude to warrant a major disaster declaration under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121 *et seq.* (the "Stafford Act"). Therefore, I declare that such a major disaster exists in the Commonwealth of Pennsylvania.

In order to provide Federal assistance, you are hereby authorized to allocate from funds available for these purposes such amounts as you find necessary for Federal disaster assistance and administrative expenses.

You are authorized to provide Individual Assistance in the designated areas and Hazard Mitigation throughout the Commonwealth. Consistent with the requirement that Federal assistance is supplemental, any Federal funds provided under the Stafford Act for Hazard Mitigation and Other Needs Assistance will be limited to 75 percent of the total eligible costs.

Further, you are authorized to make changes to this declaration for the approved assistance to the extent allowable under the Stafford Act.

The time period prescribed for the implementation of section 310(a), Priority to Certain Applications for Public Facility and Public Housing Assistance, 42 U.S.C. 5153, shall be for a period not to exceed six months after the date of this declaration.

The Federal Emergency Management Agency (FEMA) hereby gives notice that pursuant to the authority vested in the Administrator, under Executive Order 12148, as amended, Thomas J. McCool, of FEMA is appointed to act as the Federal Coordinating Officer for this major disaster.

The following areas of the Commonwealth of Pennsylvania have been designated as adversely affected by this major disaster:

Adams, Bradford, Columbia, Cumberland, Dauphin, Lancaster, Lebanon, Luzerne, Lycoming, Montour, Northumberland, Perry, Schuylkill, Snyder, Sullivan, Susquehanna, Union, Wyoming, and York Counties for Individual Assistance.

All counties within the Commonwealth of Pennsylvania are eligible to apply for assistance under the Hazard Mitigation Grant Program.

(The following Catalog of Federal Domestic Assistance Numbers (CFDA) are to be used for reporting and drawing funds: 97.030, Community Disaster Loans; 97.031, Cora Brown Fund; 97.032, Crisis Counseling; 97.033, Disaster Legal Services; 97.034, Disaster Unemployment Assistance (DUA); 97.046, Fire Management Assistance Grant;