

a program for recruiting and retaining students from disadvantaged backgrounds, including students who are members of racial and ethnic minority groups (section 737(d)(1)(B) of the Public Health Service Act). A school must meet the eligibility criteria to demonstrate that the program has

achieved success based on the number and/or percentage of disadvantaged students who are enrolled and graduate from the school. In awarding SDS funds to eligible schools, funding priorities must be given to schools based on the proportion of graduating students going into primary care, the proportion of

underrepresented minority students, and the proportion of graduates working in medically underserved communities (section 737(c) of the Public Health Service Act).

The estimated response burden is as follows:

Form	Number of respondents	Responses per respondent	Hours per response	Total hour burden
SDS	450	1	23.5	10,575

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: John Morrall, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: October 27, 2003.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

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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 (DHHS), Health Resources and Services Administration (HRSA) (60 FR 56605, as amended November 6, 1995; as last amended at 68 FR 8515-8517, February 21, 2003). This notice is to announce the re-titling of the Office of Special Programs to the Special Programs Bureau and to amend the functional statement to include functions relating to the National Hospital Bioterrorism Preparedness Program, the Smallpox Emergency Personnel Protection Act Program and the Trauma-Emergency Medical Services Systems Program. Specifically, this notice establishes the Division of Health Care Emergency Preparedness (RR5) and the Smallpox Vaccine Injury Compensation Program Office (RR6) in the newly titled Special Programs Bureau (RR) as follows:

Special Programs Bureau (RR)

Provides the overall leadership and direction for the procurement, allocation, and transplantation of human organs and bone marrow; programmatic, financial and architectural/engineering support for construction/renovation programs; operation of the Department's Vaccine Injury Compensation Program and the State Planning Grants Program. Specifically: (1) Administers the Organ Procurement and Transplantation Network and the Scientific Registry of Transplant Recipients to assure compliance with Federal regulations and policies; (2) administers the National Marrow Donor Program in matching volunteer unrelated marrow donors for transplants and studying the effectiveness of unrelated marrow donors for transplants and related treatment; (3) develops and maintains a national program of grants and contracts to organ procurement organizations and other entities to increase the availability of various organs to transplant candidates; (4) manages the national program for compliance with the Hill-Burton uncompensated care requirement and other assurances; (5) directs and administers the Section 242 hospital mortgage insurance program (through inter-agency agreement with HUD) and HHS direct and guaranteed construction loan repayment program; (6) directs and administers an earmarked grant program for the construction/renovation/equipping of health care and other facilities; (7) directs and administers the National Vaccine Injury Compensation Program; (8) directs and administers the Smallpox Emergency Personnel Protection Act Program; (9) directs and administers the State Planning Grants Program; (10) directs and administers the National Hospital Bioterrorism Preparedness Program; and (11) directs and administers the Trauma-Emergency Medical Services Systems Program.

Division of Health Care Emergency Preparedness (RR5)

The Division of Health Care Emergency Preparedness (DHCEP) facilitates the development of State, territorial and municipal terrorism preparedness programs under grants and/or cooperative agreements to improve the Nation's health care systems to respond to any terrorism or other public health emergency event. Specifically, the Division, together with other components of the Agency; (1) serves as the national focus for leadership in and coordination of Federal, State, local and non-governmental efforts to define the readiness needs for any terrorism or other public health emergency event and to assist in the development of programs that address the problems; (2) analyzes or coordinates analysis of regional or national issues and problems and recommends responses to those problems through research, training, or other actions, as indicated; (3) develops, interprets, and disseminates policies, regulations, standards, guidelines, new knowledge, and program information for the various programs and services relevant to terrorism and emergency preparedness; (4) provides technical assistance and professional consultation to field and headquarters staffs, to State and local health personnel, to other Federal agencies, and to voluntary and professional organizations on all aspects of terrorism preparedness planning efforts; (5) establishes and maintains cooperative working relationships with voluntary, professional, and other relevant entities and serves as a focal point for communications to improve terrorism preparedness; (6) coordinates within this Agency and with other Federal program efforts to extend and improve comprehensive, coordinated services and promote integrated, state-based systems of care for this program; (7) administers a program of cooperative agreements and contracts to provide comprehensive approaches to improve