

the Commissioner or designee from among authorities knowledgeable in the fields of science or engineering, applicable to electronic product radiation safety. Members will be invited to serve for overlapping terms of up to 4 years. Terms of more than 2 years are contingent upon the renewal of the committee by appropriate action prior to its expiration.

III. Nomination Procedures

Any interested person may nominate one or more qualified individuals for membership on the committee. Self-nominations are also accepted. Nominations must include a current, complete résumé or curriculum vitae for each nominee, including current business address and/or home address, telephone number, and email address if available and a signed copy of the Acknowledgement and Consent form available at the FDA Advisory Nomination Portal (see **ADDRESSES**). Nominations must also specify the advisory committee for which the nominee is recommended. Nominations must also acknowledge that the nominee is aware of the nomination unless self-nominated. FDA will ask potential candidates to provide detailed information concerning such matters related to financial holdings, employment, and research grants and/or contracts to permit evaluation of possible sources of conflicts of interest.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. 1001 *et seq.*), and 21 CFR part 14, relating to advisory committees.

Dated: December 27, 2024.

P. Ritu Nalubola,

Associate Commissioner for Policy.

[FR Doc. 2025-00310 Filed 1-8-25; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the Advisory Commission on Childhood Vaccines

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Commission on Childhood Vaccines (ACCV) has scheduled a public meeting. Information about ACCV and the agenda for this meeting can be found on the

ACCV website at <https://www.hrsa.gov/advisory-committees/vaccines/index.html>.

DATES: The ACCV meeting will be held on January 29, 2025, 12 p.m. eastern time (ET)–4 p.m. ET and January 30, 2025, 12 p.m. ET–4 p.m. ET.

ADDRESSES: The meeting will be held by Zoom webinar. For meeting information updates and instructions for joining remote meetings, go to the ACCV website meeting page at <https://www.hrsa.gov/advisory-committees/vaccines/meetings.html>.

FOR FURTHER INFORMATION CONTACT: Pita Gomez, Principal Staff Liaison, Division of Injury Compensation Programs, HRSA, 5600 Fishers Lane, 8W–25A, Rockville, Maryland 20857; 800–338–2382; or ACCV@hrsa.gov.

SUPPLEMENTARY INFORMATION: ACCV provides advice and recommendations to the Secretary of Health and Human Services on policy, program development, and other matters of significance related to implementation of the National Vaccine Injury Compensation Program and concerning other matters as described under section 2119 of the Public Health Service Act (42 U.S.C. 300aa–19).

Since priorities dictate meeting times, be advised that start times, end times, and agenda items are subject to change. Refer to the ACCV website listed above for any meeting updates that may occur. For the January 2025 meeting, agenda items may include, but are not limited to: updates from the Division of Injury Compensation Programs, Department of Justice, Office of Infectious Disease and HIV/AIDS Policy (Department of Health and Human Services), Immunization Safety Office (Centers for Disease Control and Prevention), National Institute of Allergy and Infectious Diseases (National Institutes of Health), and Center for Biologics Evaluation and Research (Food and Drug Administration). Refer to the ACCV website listed above for all current and updated information concerning the January 2025 ACCV meeting, including the draft agenda that will be posted 15 calendar days before the meeting.

This meeting is open to the public and requires registration. Registration details will be provided on our ACCV website at <https://www.hrsa.gov/advisory-committees/vaccines/meetings.html>. All registrants will be asked to provide their name, affiliation, and email address. After registration, individuals will receive personalized Zoom information via email.

Members of the public will have the opportunity to provide comments. Public participants may submit written

statements in advance of the meeting. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to ACCV should be sent to Pita Gomez using the contact information above at least 5 business days before the meeting date.

Individuals who need special assistance or another reasonable accommodation should notify Pita Gomez using the contact information listed above at least 10 business days before the meeting.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2025-00389 Filed 1-8-25; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Minority Health, Organizational Structure

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

ACTION: Notice.

SUMMARY: This notice provides an update to the organizational structure for the Department of Health and Human Services (HHS), Office of the Secretary (OS), Office of Minority Health (OMH). OMH has changed the name of the Division of Information and Education (DIE acronym), as noted in an April 11, 1995 **Federal Register** Notice, to the Division of Strategic Communication and Community Engagement (DCE acronym). This name change better aligns with the functions of the division and provides for a more socially acceptable acronym. The functions of the division are unchanged from the April 11, 1995 **Federal Register** Notice.

SUPPLEMENTARY INFORMATION: OMH develops policies and programs for the improvement of the health status of racial and ethnic minority populations and coordinates minority health activities across HHS. The establishment of OMH is noted in 50 FR 50847–48 (December 12, 1985). OMH's organization, functions, and delegations of authority are noted in 60 FR 18418–19 (April 11, 1995), as amended in 78 FR 59699–700 (September 27, 2013).

This notice provides an update to Part A, Office of the Secretary, Statement of Organization, Functions, and Delegations of Authority for the U.S. Department of Health and Human Services at Chapter AC, to change the name of the OMH Division of

Information and Education (DIE acronym), as noted at 60 FR 18418–19 (April 11, 1995), to the Division of Strategic Communication and Community Engagement (DCE acronym). This name change better aligns with the functions of the division and provides for a more socially acceptable acronym. The functions of the division are unchanged from the April 11, 1995 **Federal Register** Notice.

Vivianna P. Cowl,

Paperwork Reduction Act Reports Clearance Officer, Health and Human Service, Office of the Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Statement of Organization, Functions, and Delegations of Authority

AGENCY: Office of the Assistant Secretary for Administration, Office of the Secretary, HHS.

ACTION: Notice.

The Department of Health and Human Services (HHS)/Office of the Secretary (OS)/Office of the Assistant Secretary for Administration (ASA) has modified its organizational structure. This notice provides an updated Statement of Organization, Functions, and Delegations of Authority for the Office of the Assistant Secretary for Administration, last amended at 82 FR 49385, dated October 25, 2017. The statement fully replaces “Part A, Chapter AJ,” and “Part P” and supersedes all previous Statements of Organization, Functions, and Delegations of Authority related to ASA (“Part A, Chapter AJ”, including “Part P,” formally realigning PSC within ASA at “Part A, Chapter AJ”).

1. ASA Statement of Organization

The ASA is the Secretary’s principal advisor on all aspects of business and administrative operations at HHS. The ASA’s office is a Staff Division (StaffDiv) that supports human resources, acquisitions, information technology, physical and cyber security, financial management, real property, labor relations, equal employment opportunity, employee health, and other shared services. ASA’s Standard Administrative Code (SAC) is AJ.

2. ASA Functions

ASA consists of six (6) components that report directly to the ASA, with the following summarized functions:

- *Office of Human Resources (OHR) (AJA)*
 - OHR provides human resources and human capital support fostering and promoting an engaged, talented, and diverse workforce that advances the health and wellbeing of the American people. Part of OHR is the National Labor and Employee Relations Office (NLERO). NLERO provides strategic, technical advice and consulting services in core labor relations (LR) and employee relations (ER) policy areas to HHS leadership and senior labor and employee practitioners through each Operating Division (OpDiv), which have collectively eight unions (and numerous local chapters).
- *Office of Equal Employment Opportunity and Strategic Engagement and Partnerships (EEOSEP) (AJB)*
 - The HHS Office of Equal Employment Opportunity and Strategic Engagement and Partnerships (EEOSEP) is dedicated to fostering a dynamic workplace where all employees can thrive. This office combines the critical functions of ensuring equal employment opportunity (EEO) and forging strategic partnerships that supports talent management by fostering a fair and inclusive workplace that values employee development.
- *ASA Immediate Office (ASAIO) (AJC)*
 - ASAIO provides direct support for ASA initiatives and internal functions, working to coordinate across ASA components and reduce siloing. This work includes budget, communications, ASA-wide talent management and human resource priorities, and project management on key initiatives. ASAIO is the lead for ASA’s Continuity of Operations (COOP) program. ASAIO also oversees correspondence.
- *Office of the Chief Information Officer (OCIO) (AJD)*
 - OCIO provides: (1) assistance and guidance on the use of technology-supported business process reengineering; (2) investment analysis; (3) performance measurement; (4) strategic development and application of information systems and infrastructure; (5) policies to provide improved management of information resources and technology; and (6) better, more efficient service to our clients and employees.
 - OCIO is led by the HHS Chief Information Officer, who reports

directly to the HHS Deputy Secretary. The CIO serves as the primary IT leader for the Department and advises the ASA on matters related to IT.

- *Program Support Center (PSC) (AJE)*
 - PSC provides value-added, cost effective, and innovative mission support solutions to foster government efficiency while helping customer agencies achieve mission-critical results. PSC is a federal shared service organization, providing over 40 shared services to our customers, which include both HHS Divisions and other federal agencies. PSC helps its customers achieve mission-critical results within their organizations. PSC provides support services that include Financial Management, Federal Occupational Health, Real Estate, Security and General Administrative Support.
- *Office of Acquisition Management Services (OAMS) (AJF)*
 - OAMS provides value-added acquisition services in support of HHS customer missions in a timely manner, at reasonable cost, and in compliance with acquisition statutes, regulations, and policies. The vision of OAMS is to support the HHS mission, program objectives, and public trust by fostering a partnership between the contracting workforce, program representatives, and other acquisition stakeholders to ensure products and services are acquired at best value.

3. ASA Delegations of Authority

The Secretary has delegated the authorities for all administrative functions, including the authority to oversee all administrative functions across all HHS OpDivs and StaffDivs to the ASA. These authorities are to administer the functions summarized in the above section, which include but are not limited to authorities for: human resources, acquisitions, information technology, physical and cyber security, financial management, real property, labor relations, equal employment opportunity, employee health, and other shared services. The ASA re-delegates these authorities internally to ASA components and externally to HHS OpDivs/StaffDivs as needed.

4. Authority To Post Notice

44 U.S.C. 3101, as delegated to the ASA.

Cheryl Campbell,

Assistant Secretary for Administration.

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