personal privacy (5 U.S.C. 552b(c)(6)). The board will also hear an interim status report from its subcommittee on FDA research. FDA believes that premature disclosure of the subcommittee's work is likely to significantly impede discussion of the issues being reviewed by the subcommittee and potential agency action on future recommendations (5 U.S.C. 552b(c)(9)(B)). Thus, the interim status report from the subcommittee will be presented in a closed session. However, the issues related to FDA science and research being reviewed by the subcommittee will be presented to the board for public discussion at a later date.

FDA regrets that it was unable to publish this notice 15 days prior to the Science Board to the Food and Drug Administration meeting. Because the agency believes there is some urgency to bring these issues to public discussion and qualified members of the Science Board to the Food and Drug Administration were available at this time, the Commissioner concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Each public advisory committee meeting listed above may have as many as four separable portions: (1) An open public hearing, (2) an open committee discussion, (3) a closed presentation of data, and (4) a closed committee deliberation. Every advisory committee meeting shall have an open public hearing portion. Whether or not it also includes any of the other three portions will depend upon the specific meeting involved. The dates and times reserved for the separate portions of each committee meeting are listed above.

The open public hearing portion of the meeting(s) shall be at least 1 hour long unless public participation does not last that long. It is emphasized, however, that the 1 hour time limit for an open public hearing represents a minimum rather than a maximum time for public participation, and an open public hearing may last for whatever longer period the committee chairperson determines will facilitate the committee's work.

Public hearings are subject to FDA's guideline (subpart C of 21 CFR part 10) concerning the policy and procedures for electronic media coverage of FDA's public administrative proceedings, including hearings before public advisory committees under 21 CFR part 14. Under 21 CFR 10.205, representatives of the electronic media may be permitted, subject to certain limitations, to videotape, film, or

otherwise record FDA's public administrative proceedings, including presentations by participants.

Meetings of advisory committees shall be conducted, insofar as is practical, in accordance with the agenda published in this Federal Register notice. Changes in the agenda will be announced at the beginning of the open portion of a meeting.

Any interested person who wishes to be assured of the right to make an oral presentation at the open public hearing portion of a meeting shall inform the contact person listed above, either orally or in writing, prior to the meeting. Any person attending the hearing who does not in advance of the meeting request an opportunity to speak will be allowed to make an oral presentation at the hearing's conclusion, if time permits, at the chairperson's discretion.

The agenda, the questions to be addressed by the committee, and a current list of committee members will be available at the meeting location on the day of the meeting.

Transcripts of the open portion of the meeting may be requested in writing from the Freedom of Information Office (HFI-35), Food and Drug Administration, 5600 Fishers Lane, rm. 12A-16, Rockville, MD 20857, approximately 15 working days after the meeting, at a cost of 10 cents per page. The transcript may be viewed at the Dockets Management Branch (HFA-305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23 Rockville, MD 20857, approximately 15 working days after the meeting, between the hours of 9 a.m. and 4 p.m., Monday through Friday. Summary minutes of the open portion of the meeting may be requested in writing from the Freedom of Information Office (address above) beginning approximately 90 days after the meeting.

The Commissioner has determined for the reasons stated that those portions of the advisory committee meetings so designated in this notice shall be closed. The Federal Advisory Committee Act (FACA) (5 U.S.C. app. 2, 10(d)), permits such closed advisory committee meetings in certain circumstances. Those portions of a meeting designated as closed, however, shall be closed for the shortest possible time, consistent with the intent of the cited statutes.

The FACA, as amended, provides that a portion of a meeting may be closed where the matter for discussion involves a trade secret; commercial or financial information that is privileged or confidential; information of a personal nature, disclosure of which would be a clearly unwarranted invasion of personal privacy; investigatory files

compiled for law enforcement purposes; information the premature disclosure of which would be likely to significantly frustrate implementation of a proposed agency action; and information in certain other instances not generally relevant to FDA matters.

Examples of portions of FDA advisory committee meetings that ordinarily may be closed, where necessary and in accordance with FACA criteria, include the review, discussion, and evaluation of drafts of regulations or guidelines or similar preexisting internal agency documents, but only if their premature disclosure is likely to significantly frustrate implementation of proposed agency action; review of trade secrets and confidential commercial or financial information submitted to the agency; consideration of matters involving investigatory files compiled for law enforcement purposes; and review of matters, such as personnel records or individual patient records, where disclosure would constitute a clearly unwarranted invasion of personal privacy.

Examples of portions of FDA advisory committee meetings that ordinarily shall not be closed include the review, discussion, and evaluation of general preclinical and clinical test protocols and procedures for a class of drugs or devices; consideration of labeling requirements for a class of marketed drugs or devices; review of data and information on specific investigational or marketed drugs and devices that have previously been made public; presentation of any other data or information that is not exempt from public disclosure pursuant to the FACA, as amended; and, deliberation to formulate advice and recommendations to the agency on matters that do not independently justify closing.

This notice is issued under section 10(a)(1) and (a)(2) of the Federal Advisory Committee Act (5 U.S.C. app. 2), and FDA's regulations (21 CFR part 14) on advisory committees.

Dated: October 21, 1996.
Michael A. Friedman,
Deputy Commissioner for Operations.
[FR Doc. 96–27490 Filed 10–24–96; 8:45 am]
BILLING CODE 4160–01–F

# **Indian Health Service**

[0917–ZA\_\_\_\_

Notice of Redesignation of Contract Health Service Delivery Area; Jamestown S'Klallam Tribe

**AGENCY:** Indian Health Service, HHS. **ACTION:** Final notice.

SUMMARY: This notice advises the public that the Indian Health Service (IHS) is redesignating the geographic boundaries of the Contract Health Service Delivery Area (CHSDA) for the Jamestown S'Klallam Tribe ("The Tribe"). The Jamestown S'Klallam CHSDA has been comprised of Clallam County in the State of Washington. This county was designated as the Tribe's CHSDA in the Federal Register of January 10, 1984 (49 FR 1291). Jefferson County, Washington, is being added to the existing CHSDA. This notice is issued under authority of 43 FR 34654, August 4, 1978.

FOR FURTHER INFORMATION CONTACT: Leslie M. Morris, Acting Director, Division of Legislation and Regulations, Office of Planning, Evaluation and Legislation, Indian Health Service, Suite 450, 12300 Twinbrook Parkway, Rockville, MD 20852, telephone 301/ 443–1116. (This is not a toll-free number.)

EFFECTIVE DATE: October 25, 1996.

SUPPLEMENTARY INFORMATION: The Secretary of the Interior acknowledged the Tribe as an Indian tribe, effective February 10, 1981 (45 FR 81890). The Tribe has entered into a self-governance compact with the IHS under Title III of the Indian Self-Determination Act (Pub. L. 93–638, as amended) to provide direct services at a clinic facility and also to provide, for eligible Indians, services purchased from private sector health care providers. Such purchased services are called "contract health services."

On August 4, 1978, the IHS published regulations establishing eligibility criteria for receipt of contract health services and for the designation of CHSDAs (43 FR 34654, codified at 42 CFR 36.22, last published in the 1986 version of the Code of Federal Regulations). On September 16, 1987, the IHS published new regulations governing eligibility for IHS services. Congress has repeatedly delayed implementation of the new regulations by imposing annual moratoriums. Section 719(a) of the Indian Health Care Amendments of 1988, Pub. L. 100-713, explicitly provides that during the period of the moratorium placed on implementation of the new eligibility regulations, the IHS will provide services pursuant to the criteria in effect on September 15, 1987. Thus, the IHS contract health services program continues to be governed by the regulations contained in the 1986 edition of the Code of Federal Regulations in effect on September 15, 1987. See 42 CFR 36.21 et seq. (1986).

As applicable to the Tribe, these regulations provide that, unless

otherwise designated, a CHSDA shall consist of a county which includes all or part of a reservation and any county or counties which have a common boundary with the reservation (42 CFR 36.22(a)(6) (1986)). The regulations also provide that after consultation with the tribal governing body or bodies of those reservations included in the CHSDA, the Secretary may, from time to time, redesignate areas within the United States for inclusion in or exclusion from a CHSDA. The regulations require that certain criteria must be considered before any redesignation is made. The criteria are as follows:

- (1) The number of Indians residing in the area proposed to be so included or excluded;
- (2) Whether the tribal governing body has determined that Indians residing in the area near the reservation are socially and economically affiliated with the tribe:
- (3) The geographic proximity to the reservation of the area whose inclusion or exclusion is being considered; and
- (4) The level of funding which would be available for the provision of contract health services.

Additionally, the regulations require that any redesignation of a CHSDA must be made in accordance with the procedures of the Administrative Procedure Act (5 U.S.C. 553). In compliance with this requirement, we published the proposal to redesignate the Tribe's CHSDA in the Federal Register of August 3, 1995, requesting public comment (60 FR 39761). One comment was received. A tribal government official commented that the Jefferson County trust land should not be designated as eligible for contract health services if the residents of that county are located in an urban setting. However, the map of Jefferson County, Washington, shows that it is a rural county with no urban areas. Consequently, redesignation of the Tribe's CHSDA to include Jefferson County does not conflict with the comment.

Since approximately 1984, the Tribe has been providing contract health services to 20 of its tribal members residing in Jefferson County, Washington. Under existing regulations, the CHSDA for the Tribes consists of only Clallam County. On December 21, 1992, the Tribe most recently requested the Secretary to redesignate its CHSDA as Clallam County and Jefferson County in the State of Washington. The Tribe based its request on the fact that S'Klallam tribal members are indigenous to Jefferson County, Washington, yet are still ineligible to receive contract health services because

they do not reside within the Tribe's existing CHSDA. In addition, the Tribe has developed a land consolidation plan, which has been approved by the Department of the Interior, through the Bureau of Indian Affairs, and which includes tribal trust land in Jefferson County. However, the Jefferson County tribal trust land has not yet been added to the reservation by proclamation of the Secretary of the Interior, but that action is reportedly pending.

In applying the aforementioned CHSDA redesignation criteria required by operative regulations (43 FR 35654), the following findings are made:

- (1) There are 112 Indians residing in Jefferson County, of which 59 are members of the Tribe or have close socioeconomic ties to the Tribe. Of these 59, 20 are already receiving services due to a previous administrative decision. The remaining 53 individuals are not covered by this request as they do not have close social and economic ties to the Tribe and are, therefore, not eligible for contract health services under existing law.
- (2) The Tribe has determined that contract health services would be available to all of its members and to all federally recognized Indians in Jefferson County having social and economic affiliation with the Tribe.
- (3) Although the Tribe's reservation is in Clallam County, the Tribe has trust land in Jefferson County that is included in an approved land consolidation plan and is pending proclamation to add it to the Tribe's reservation. This tribal trust land is contiguous to the existing reservation and extends into Jefferson County.
- (4) It is estimated that the current eligible contract health service population will be increased by 39 individuals, changing the active patient population from 192 to 231, assuming 100 percent utilization for Jefferson County eligibles. Based upon data from the fiscal year 1994 application of the health services priority system and the modified resource requirements methodology, the total clinical work units (CWUs) generated by the user population of 192 was 998.4, or 5.2 per individual. Assuming the same utilization, the 39 new users will generate an additional 202.8 CWUs. The calculated cost per CWU in the inpatient and ambulatory care category, which includes contract health care costs, was \$139.22 for the Tribe. Therefore, potential added costs for contract health services resulting from new users is approximated at \$139.22×202.8 CWUs=\$28,233.82. Total resources available to the program in fiscal year 1994 were \$139.000. The

addition of new usage would not be expected to result in an increase in funding for the Tribe. The impact on existing contract health services will not be substantial. The current level of funding will allow sufficient flexibility to assure that there will be no significant reduction in the level of contract health services to current CHSDA residents, so the designation of the two-county CHSDA is within available resources.

Accordingly, after considering the Tribe's request in light of the criteria specified in the regulations, the IHS is redesignating the CHSDA of the Tribe to consist of Clallam and Jefferson Counties of the State of Washington.

This notice does not contain reporting or recordkeeping requirements subject to prior approval by the Office of Management and Budget under the Paperwork Reduction Act of 1980.

Dated: September 24, 1996.
Michael H. Trujillo,
Assistant Surgeon General Director.
[FR Doc. 96–27411 Filed 10–24–96; 8:45 am]
BILLING CODE 4160–16–M

# DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4124-N-09]

Office of the Assistant Secretary for Community Planning and Development; Federal Property Suitable as Facilities To Assist the Homeless

**AGENCY:** Office of the Assistant Secretary for Community Planning and Development, HUD.

ACTION: Notice.

**SUMMARY:** This Notice identifies unutilized, underutilized, excess, and surplus Federal property reviewed by HUD for suitability for possible use to assist the homeless.

**EFFECTIVE DATE:** October 25, 1996.

# FOR FURTHER INFORMATION CONTACT:

Mark Johnston, Department of Housing and Urban Development, Room 7256, 451 Seventh Street SW, Washington, DC 20410; telephone (202) 708–1226; TDD number for the hearing- and speechimpaired (202) 708–2565, (these telephone numbers are not toll-free), or call the toll-free Title V information line at 1–800–927–7588.

SUPPLEMENTARY INFORMATION: In accordance with the December 12, 1988 court order in *National Coalition for the Homeless* v. *Veterans Administration*, No. 88–2503–OG (D.D.C.), HUD publishes a Notice, on a weekly basis,

identifying unutilized, underutilized, excess and surplus Federal buildings and real property that HUD has reviewed for suitability for use to assist the homeless. Today's Notice is for the purpose of announcing that no additional properties have been determined suitable or unsuitable this week.

Dated: October 18, 1996.

Jacquie M. Lawing,

Deputy Assistant Secretary for Economic Development.

[FR Doc. 96–27180 Filed 10–24–96; 8:45 am]

#### DEPARTMENT OF THE INTERIOR

## Fish and Wildlife Service

Notice of Receipt of an Application, and Availability of an Environmental Assessment and Finding of No Significant Impact for an Incidental Take Permit by Plantation Palms, L.L.C., for Construction of a Residential Project on the Fort Morgan Peninsula, Alabama; Correction

**AGENCY:** Fish and Wildlife Service, Interior.

**ACTION:** Notice—correction.

**SUMMARY:** On Thursday, September 18, 1996, the Fish and Wildlife Service announced in the Federal Register (61 FR 49151–49152), a Notice of Receipt of an Application, and availability of an **Environmental Assessment and Finding** of No Significant Impact for an Incidental Take Permit by Plantation Palms, L.L.C., for construction of a residential project on the Fort Morgan Peninsula, Alabama. In the Summary of the Federal Register Notice, the description of the Applicant's project was incorrect. The Applicant's Project is described as an 84-unit condominium complex and its associated landscaped grounds and parking areas and recreational amenities. Public comments must still be received by October 19, 1996 to be considered on the abovereferenced application.

Dated: October 17, 1996.

Noreen K. Clough, Regional Director.

 $[FR\ Doc.\ 96\text{--}27408\ Filed\ 10\text{--}24\text{--}96;\ 8\text{:}45\ am]$ 

BILLING CODE 4310-55-P

### **Bureau of Indian Affairs**

Notice of Availability of a Supplemental Final Environmental Impact Statement for the Proposed Swinomish Marina, LaConner, Washington

**AGENCY:** Bureau of Indian Affairs,

Interior. **ACTION:** Notice.

SUMMARY: The Supplemental Final Environmental Impact Statement (SFEIS) for the proposed Swinomish Marina at LaConner, Washington, is now available for public review.

DATES: A Record of Decision will be issued after November 24, 1996. Public comments will be accepted by the U.S. Army Corps of Engineers and the Swinomish Indian Tribal Community, pursuant to the Section 10/404 and Swinomish Tribal Coastal Zone Management Permit applications, until November 18, 1996.

ADDRESSES: Comments on the Section 10/404 Permit application may be addressed to Mr. Jack Gossett, Project Manager, Regulatory Branch, U.S. Army Corps of Engineers, P.O. Box C–3755, Seattle, Washington 98124–2255. Comments on the Swinomish Tribal Coastal Zone Management Permit application may be sent to the Natural Resources Manager, Planning Department, Swinomish Tribal Community, P.O. Box 817, LaConner, Washington 98257.

Copies of the SFEIS are available for review at (1) the Office of the Portland Area Director, Bureau of Indian Affairs, 911 NE 11th Avenue, Portland, Oregon 97232–4169; (2) the Puget Sound Agency, Bureau of Indian Affairs, 3006 Colby Avenue, Everett, Washington 98201; and (3) the Swinomish Office of Planning and Community Development, Swinomish Indian Tribal Community, 950 Moorage Way, LaConner, Washington 98257. A limited number of individual copies of the SFEIS may also be obtained from this last address, or by calling that office at (503) 466–3163.

FOR FURTHER INFORMATION CONTACT: Mr. Jim LeBret, Team Leader, Resources, Environmental and Regulatory Compliance, Portland Area Office, Bureau of Indian Affairs, 911 NE 11th Avenue, Portland, Oregon 97232–4169, telephone (503) 231–6749, FAX (503) 231–2275.

SUPPLEMENTARY INFORMATION: The Swinomish Indian Tribal Community is proposing to develop a 1200 slip salt water marina and related upland support facilities on the Swinomish Indian Reservation in Skagit County,