The information obtained from this data collection will help the CDC meet its evaluation objectives as described above. Responses are voluntary. No proprietary items or sensitive information will be collected. The annualized burden hours are estimated to be 32.

Form	Number of respondents	Number of responses per respond- ent	Average burden per response (in hours)
Mail-in Survey	32	1	1

Dated: August 17, 2004.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-04-04JM]

Proposed Data Collections Submitted for Public Comment and Recommendations

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 498-1210 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

HIV Prevention Capacity-Building Assistance (CBA) Information Collection: Reporting and Monitoring System—New—National Center for HIV, STD, and TB Prevention (NCHSTP), Centers for Disease Control and Prevention (CDC).

Background

CDC is requesting a 3-year clearance for information collection forms to monitor the HIV prevention activities of CBA provider grantees funded by CDC from 2004 to 2009. These forms will be used to collect information that assists in monitoring CBA services and activities. CDC is responsible for monitoring and evaluating HIV prevention activities conducted under these cooperative agreements. This requires that CDC have current information regarding the progress of CBA activities and services supported through these cooperative agreements. Therefore, forms such as the Trimester Interim Progress Report, CBA Notification Form, CBA Completion Form, and CBA Training Events Report are considered a critical component of the monitoring and evaluation process. Since, this program will encompass approximately 36 CBA provider organizations, there is a need for a standardized system for reporting individual episodes of CBA delivered by all CBA provider grantees. The collection of data will help CDC discern and refine national goals and objectives in the prevention of HIV.

CBA providers will be required to submit CBA Trimester Progress Reports (form A). The purpose of the CBA Trimester Progress Report is to describe CBA undertaken during the previous four months. The Trimester Progress Report will be a narrative on the programs' successes and barriers; process and outcome monitoring data; collaborative and cooperative activities with other organizations; and plans for future activities.

To effectively track and monitor all requests for capacity building assistance, CBA providers will be required to submit a CBA Notification Form (form B) following each contact with a community based organization (CBO) or HIV prevention stakeholder for CBA services. The purpose of this form is to track all requests for services from CBOs, health departments, and stakeholders. Requests for CBA from these CBOs and stakeholders are received by CBA providers on an ongoing basis.

CBA providers will also be required to submit a CBA Completion Form (form C) following each episode of CBA service delivered to all CBOs and stakeholders. The purpose of this form is to provide feedback and follow-up information to CDC Project Officers on the types of CBA services and quality of services that were delivered to all CBOs by CBA Providers. CBA requests from CBOs, health departments, and stakeholders are received by CBA providers on an on-going basis. Information collection will be on-going throughout the duration of the cooperative agreements.

In addition, CBA providers will be required to submit pre-planned CBA training events for a CBA Training Events Report (form D). The CBA Training Events Report is used to disseminate planned capacity building assistance activities delivered by CBA providers, the CDC, and other organizations providing training and technical assistance.

It is estimated that Form A will require 4 hours of preparation by the respondent, Form B will require 15 minutes of preparation by the respondent, Form C will require 30 minutes of preparation by the respondent, and Form D will require 2 hours of preparation by the respondent. The annualized burden is estimated to be 2,196 hours.

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)
Form A: CBA Trimester Report	36 Grantees	3	4
Form B: CBA Notification Form	36 CBA Provider	50	15/60
	Grantees.		
Form C: CBA Completion Form	36 CBA Provider	25	30/60
	Grantees.		

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)
Form D: CBA Training Events Report	36 CBA Provider Grantees.	12	2

Dated:

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

ADAPT: Adopting and Demonstrating the Adaptation of Prevention Techniques

Announcement Type: Competitive Supplement.

Funding Opportunity Number: PA 04064 (Supplemental).

Catalog of Federal Domestic Assistance Number: 93.944.

Dates: Letter of Intent Deadline: None. Application Deadline: September 22, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under sections 301 and 317(k) of the Public Health Service Act, (42 U.S.C. 241 and 247b(k)), as amended.

Purpose

The purpose of this program is to improve understanding of the processes needed for adapting evidence-based interventions to fit new conditions or populations and to pilot CDC-developed draft guidance for adaptation.

The ADAPT project responds to concerns from the field that existing interventions do not address the HIV prevention needs of their specific population. This project seeks to develop guidance for agencies to engage in evidence-based adaptation of interventions previously shown to be effective in research settings for use in real world applications. If data from this project is published, it will be published as case studies and not as generalizable research data.

Activities

Supplemental funds are intended to support 3–5 eligible grantees that are currently participating in Community-Based Organizations (CBO) PA 04064.

The funds will support additional activities that involve adapting an HIV prevention intervention listed in the Procedural Guidance for Selected Strategies and Interventions for Community-Based Organizations Funded Under Program Announcement 04064 (Procedural Guidance) for use in an HIV seropositive population of men of color who have sex with other men (MSM of color). CDC is especially interested in supporting projects that use the Many Men, Many Voices (MMMV) intervention listed in the Procedural Guidance. Contingent upon the quality of proposals, CDC anticipates that at least one of the applicants funded under the ADAPT supplement will adapt and implement MMMV. However, applicants are not limited to this particular intervention and may propose work using any one of the other interventions listed in the Procedural Guidance. Funded applicants will further evaluate the intervention they select to adapt. Preference will be given to those applicants that have limited or no previous experience with the adaptation and implementation of the intervention they were funded to implement under CBO PA 04064. Funded applicants will be required to conduct two evaluation components for this award: (1) To monitor and evaluate the adaptation process; and (2) to monitor and evaluate the intervention.

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC Activities for this program are as follows:

- CDC will provide to funded applicants the draft adaptation guidance developed by CDC with input from internal and external researchers, HIV prevention intervention implementers, and community advocates.
- CDC will provide process and outcome indicators and work with funded applicants in the evaluation processes for this award. The evaluation methods could include, but are not limited to: timelines; qualitative summaries; focus group summaries; unstructured key informant interviews; case studies; checklists; progress reports; and perhaps information on costs. Note that evaluation activities

will include unstructured interviews with key stakeholders before and after the implementation of the adapted intervention(s). Outcome measures could include, but are not limited to, behavioral outcomes such as condom use or frequency of unprotected sex, or biological outcomes such as sexually transmitted disease (STD) incidence as collected with the Program Evaluation and Monitoring System (PEMS).

II. Award Information

Type of Award: Cooperative Agreement. CDC involvement in this program is listed in the Activities Section above.

Fiscal Year Funds: 2004—2006. Approximate Total Funding: The estimated total cost is \$5,000,000 with approximately \$2,000,000 awarded during the first fiscal year.

Approximate Number of Awards: 3–5. Approximate Average Award: \$575,000 (This amount is for the first 12-month budget period, and includes both direct and indirect costs).

Floor of Award Range: \$200,000. Anticipated Award Date: September 1, 2004.

Budget Period Length: 12 months. Project Period Length: 2 years.

Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

III.1. Eligible applicants

Applications may only be submitted by grantees currently funded under CBO PA 04064 who are eligible to apply for supplemental funding.

III.2. Cost Sharing or Matching

Matching funds are not required for this program.

III.3. Other

If your application is incomplete or non-responsive to the requirements listed in this section, it will not be entered into the review process. You will be notified that your application did not meet submission requirements.