

Monday January 4, 1999

# Part VIII

# Department of Education

National Institute on Disability and Rehabilitation Research; Notice of Proposed Funding Priorities for Fiscal Years 1999–2000 for Certain Centers and Projects; Notice

# DEPARTMENT OF EDUCATION

# National Institute on Disability and Rehabilitation Research; Funding Priorities

**AGENCY:** Department of Education. **ACTION:** Notice of Proposed Funding Priorities for Fiscal Years 1999–2000 for Certain Centers and Projects.

**SUMMARY:** The Secretary proposes funding priorities for two Rehabilitation Research and Training Centers (RRTCs) and two Disability and Rehabilitation Research Projects (DRRPs) under the National Institute on Disability and Rehabilitation Research (NIDRR) for fiscal years 1999–2000. The Secretary takes this action to focus research attention on areas of national need. These priorities are intended to improve rehabilitation services and outcomes for individuals with disabilities.

**DATES:** Comments must be received on or before February 3, 1999.

ADDRESSES: All comments concerning these proposed priorities should be addressed to Donna Nangle, U.S. Department of Education, 600 Maryland Avenue, S.W., room 3418, Switzer Building, Washington, D.C. 20202–2645. Comments may also be sent through the Internet: comments@ed.gov

You must include the term "Disability and Rehabilitation Research Projects and Centers" in the subject line of your electronic message.

FOR FURTHER INFORMATION CONTACT: Donna Nangle. Telephone: (202) 205– 5880. Individuals who use a telecommunications device for the deaf (TDD) may call the TDD number at (202) 205–2742. Internet:

Donna\_Nangle@ed.gov

Individuals with disabilities may obtain this document in an alternate format (e.g., Braille, large print, audiotape, or computer diskette) on request to the contact person listed in the preceding paragraph.

SUPPLEMENTARY INFORMATION: This notice contains proposed priorities under the Disability and Rehabilitation **Research Projects and Centers Program** for two RRTCs related to: measuring rehabilitation outcomes; and rehabilitation of persons with disabilities from minority backgrounds. The notice also contains proposed priorities for two DRRPs related to: dissemination of disability and rehabilitation research; and the international exchange of information and experts. There are references in the proposed priorities to NIDRR's Long-Range Plan (LRP). The LRP can be accessed on the World Wide Web at:

http://www.ed.gov/legislation/ FedRegister/announcements/1998–4/ 102698a.html. These proposed priorities support the National Education Goal that calls for every adult American to possess the skills necessary to compete in a global economy.

The authority for the Secretary to establish research priorities by reserving funds to support particular research activities is contained in sections 202(g) and 204 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 762(g) and 764).

The Secretary will announce the final priorities in a notice in the Federal **Register**. The final priorities will be determined by responses to this notice, available funds, and other considerations of the Department. Funding of a particular project depends on the final priority, the availability of funds, and the quality of the applications received. The publication of these proposed priorities does not preclude the Secretary from proposing additional priorities, nor does it limit the Secretary to funding only these priorities, subject to meeting applicable rulemaking requirements.

**Note:** This notice of proposed priorities does not solicit applications. A notice inviting applications under this competition will be published in the **Federal Register** concurrent with or following the publication of the notice of final priorities.

#### **Rehabilitation Research and Training Centers**

Authority for the RRTC program of NIDRR is contained in section 204(b)(2)of the Rehabilitation Act of 1973, as amended (29 U.S.C. 764(b)(2)). Under this program the Secretary makes awards to public and private organizations, including institutions of higher education and Indian tribes or tribal organizations for coordinated research and training activities. These entities must be of sufficient size, scope. and quality to effectively carry out the activities of the Center in an efficient manner consistent with appropriate State and Federal laws. They must demonstrate the ability to carry out the training activities either directly or through another entity that can provide that training.

The Secretary may make awards for up to 60 months through grants or cooperative agreements. The purpose of the awards is for planning and conducting research, training, demonstrations, and related activities leading to the development of methods, procedures, and devices that will benefit individuals with disabilities, especially those with the most severe disabilities.

# Description of Rehabilitation Research and Training Centers

RRTCs are operated in collaboration with institutions of higher education or providers of rehabilitation services or other appropriate services. RRTCs serve as centers of national excellence and national or regional resources for providers and individuals with disabilities and the parents, family members, guardians, advocates or authorized representatives of the individuals.

RRTCs conduct coordinated, integrated, and advanced programs of research in rehabilitation targeted toward the production of new knowledge to improve rehabilitation methodology and service delivery systems, to alleviate or stabilize disabling conditions, and to promote maximum social and economic independence of individuals with disabilities.

RRTCs provide training, including graduate, pre-service, and in-service training, to assist individuals to more effectively provide rehabilitation services. They also provide training including graduate, pre-service, and inservice training, for rehabilitation research personnel and other rehabilitation personnel.

RRTCs serve as informational and technical assistance resources to providers, individuals with disabilities, and the parents, family members, guardians, advocates, or authorized representatives of these individuals through conferences, workshops, public education programs, in-service training programs and similar activities.

RRTCs disseminate materials in alternate formats to ensure that they are accessible to individuals with a range of disabling conditions.

NIDRR encourages all Centers to involve individuals with disabilities and individuals from minority backgrounds as recipients of research training, as well as clinical training.

The Department is particularly interested in ensuring that the expenditure of public funds is justified by the execution of intended activities and the advancement of knowledge and, thus, has built this accountability into the selection criteria. Not later than three years after the establishment of any RRTC, NIDRR will conduct one or more reviews of the activities and achievements of the Center. In accordance with the provisions of 34 CFR 75.253(a), continued funding depends at all times on satisfactory performance and accomplishment.

#### **Proposed General Requirements**

The Secretary proposes that the following requirements apply to these RRTCs pursuant to these absolute priorities unless noted otherwise. An applicant's proposal to fulfill these proposed requirements will be assessed using applicable selection criteria in the peer review process. The Secretary is interested in receiving comments on these proposed requirements:

Each RRTC must provide: (1) training on research methodology and applied research experience; and (2) training on knowledge gained from the Center's research activities to persons with disabilities and their families, service providers, and other appropriate parties.

Each RRTC must develop and disseminate informational materials based on knowledge gained from the Center's research activities, and disseminate the materials to persons with disabilities, their representatives, service providers, and other interested parties.

<sup>•</sup> Each RRTC must involve individuals with disabilities and, if appropriate, their representatives, in planning and implementing its research, training, and dissemination activities, and in evaluating the Center.

The RRTC must conduct a state-ofthe-science conference and publish a comprehensive report on the final outcomes of the conference. The report must be published in the fourth year of the grant.

The RRTC must coordinate with other entities carrying out related research or training activities.

#### Priorities

Under 34 CFR 75.105(c)(3), the Secretary proposes to give an absolute preference to applications that meet the following priorities. The Secretary proposes to fund under this competition only applications that meet one of these absolute priorities.

#### Proposed Priority 1: Measuring Rehabilitation Outcomes

#### Introduction

Chapter Four of NIDRR's proposed LRP (63 FR 57204) discusses issues in medical rehabilitation, including research on rehabilitation outcomes. There is a need to develop more effective outcomes measurement tools to determine the effectiveness, including the cost-effectiveness, of medical rehabilitation interventions and products. Chapter Seven of the Proposed LRP (63 FR 57211) reviews the importance of documenting outcomes across service settings and programs. The proposed LRP identifies long-term outcomes, such as employment, community integration, and quality of life, as an important component of the new paradigm of disability that expands the focus of research from the individual to society and the environment. NIDRR expects this RRTC to integrate the new paradigm of disability in its research activities. The new paradigm maintains that disability is a product of an interaction between characteristics of the individual and characteristics of the natural, manmade, cultural, social environments.

Medical rehabilitation outcomes research has focused on function. NIDRR supported the development and application of the Functional Independence Measure (FIM), a criterion-referenced scale that has been widely accepted in inpatient rehabilitation settings. NIDRR also supported the development of the Craig Handicap Assessment and Reporting Technique that contains scales for assessing the World Health Organization dimensions of "handicap" (i.e., participation) and is currently being refined to measure cognitive components of disability.

While researchers have been able to demonstrate gain in function, as measured by instruments like the FIM, there is no conclusive evidence regarding the specific impact of therapeutic intervention on functional gain (Heinemann, A. et al., "Relation of Rehabilitation Intervention to Functional Outcome," Final Technical Report, Center for Functional Assessment Research, University of Buffalo, pg. 11, 1998). In addition, medical rehabilitation providers are being asked to demonstrate the relationship between short-term functional gain and long-term outcomes for persons with disabilities (Wilkerson, D. and Johnston, M., "Clinical Program Monitoring Systems," in *Assessing* Medical Rehabilitation Practices—The Promise of Outcomes Research, pgs. 275-305, 1997).

In addition to the widespread use of the FIM as a measure of function, there are other commonly used measures. Also, there are multiple measures related to other types of outcomes, including quality of life, community integration, and consumer satisfaction. Providers, consumers, and other stakeholders have difficulty comparing outcomes because use of outcome measures across settings is not standardized (Wilkerson, D. and Johnston, M., ibid.).

#### Proposed Priority

The Secretary proposes to establish an RRTC for the purpose of developing

improved methods that assess the effectiveness of medical rehabilitation services. The RRTC must:

(1) Develop and test a theoretical model or models assessing long-term outcomes as part of a system of evaluating medical rehabilitation effectiveness;

(2) Investigate the extent to which the effectiveness of medical rehabilitation services can be determined by applying functional outcomes measures to specific rehabilitation interventions;

(3) Identify gaps in existing measures of medical rehabilitation effectiveness, assessing not only the FIM's, but also other instruments' utility as a measure of the impact of therapeutic interventions on function across rehabilitation settings;

(4) Revise or develop and test measures of medical rehabilitation effectiveness to address gaps identified by (3) above; and

(5) Evaluate and describe the uses of medical rehabilitation outcome data by payers, providers, and consumers.

In carrying out these purposes, the RRTC must coordinate with the RRTC on Health Care for Individuals with Disabilities—Issues in Managed Health Care, the National Center on Medical Rehabilitation Research, the Department of Veterans Affairs, and the Health Care Financing Administration.

# Proposed Priority 2: Rehabilitation of Persons With Disabilities From Minority Backgrounds

#### Introduction

Chapter Two of NIDRR's proposed LRP (63 FR 57194) discusses and highlights methodological problems in the categorization and definition of disability, including identifying and measuring consequences of disability in minority populations. Disabilities in minority populations may be associated with factors such as health, poverty, family structure, environment, aging, substance abuse, chronic disease, and violence-related trauma in ways that are substantially different from nonminority populations. Chapter 3 of the proposed LRP identifies the need for minority populations research that provides information about employment factors, including identifying rehabilitation strategies that are based on knowledge about the characteristics of racial and ethnic minorities.

For the purpose of this proposed priority, persons for minority backgrounds include one or more of the following minorities: Asian-Americans, Hispanics or Latinos, Black or African-Americans, and Native Hawaiians or other Pacific Islanders. American Indians and Alaskan Natives are not included as a target population for this RRTC because other NIDRR grants address their needs directly.

# Proposed Priority

The Secretary proposes to establish an RRTC on rehabilitation of persons with disabilities from minority backgrounds for the purpose of evaluating their rehabilitation needs and improving their rehabilitation outcomes. The RRTC must:

(1) Identify methodological problems in determining the rehabilitation needs of persons with disabilities from minority backgrounds, including subpopulations within these groups, and propose strategies to address these methodological problems;

(2) Based on paragraph (1), identify implications for rehabilitation research, training, policy development, and services;

(3) Assess the outcomes of rehabilitation for persons with disabilities from minority backgrounds, as measured by two or more variables (e.g., functional abilities, health and wellness, employment, and psychosocial status), and analyze the effects of minority status on rehabilitation outcomes; and

(4) Identify, develop, and evaluate rehabilitation methodologies, models and interventions for specific minorities in selected areas drawn from the NIDRR Research Agenda in Section Two of the proposed LRP.

In carrying out the purpose of the priority, the RRTC must:

• Include concepts of health selfassessment and consumer decisionmaking related to participation in the labor force; and

• Coordinate with the Centers for Disease Control and Prevention's Center on Minority Health.

# Disability and Rehabilitation Research Projects

Authority for Disability and Rehabilitation Research Projects (DRRPs) is contained in section 204(a) of the Rehabilitation Act of 1973, as amended (29 U.S.C. 764(a)). DRRPs carry out one or more of the following types of activities, as specified in 34 CFR 350.13—350.19: research, development, demonstration, training, dissemination, utilization, and technical assistance. Disability and Rehabilitation Research Projects develop methods, procedures, and rehabilitation technology that maximize the full inclusion and integration into society, employment, independent living, family support, and economic and social selfsufficiency of individuals with

disabilities, especially individuals with the most severe disabilities. In addition, DRRPs improve the effectiveness of services authorized under the Rehabilitation Act of 1973, as amended.

# Proposed Priority 3: Dissemination of Disability and Rehabilitation Research

#### Introduction

Chapter Eight of NIDRR's proposed LRP (63 FR 57213) describes the importance of effective knowledge dissemination and utilization (D&U). NIDRR proposes to establish a center that will serve as the cornerstone of NIDRR's D&U efforts by carrying out research on effective dissemination methodologies and providing technical assistance to all of NIDRR's grantees as well as to the wide array of consumers of disability research findings.

# Proposed Priority

The Secretary proposes to establish a DRRP for the purpose of increasing the usefulness of NIDRR-funded research findings. The National Center for the Dissemination of Disability Research must:

(1) Identify and evaluate effective methodologies for disseminating disability research to persons with disabilities and their families, service providers, policymakers, and other researchers;

(2) Provide technical assistance on D&U methodologies to all NIDRR grantees including, but not limited to, addressing cultural relevance, ensuring physical accessibility of information, and developing effective dissemination plans.

(3) Develop, implement, and evaluate a plan for collaboration among NIDRR projects that primarily disseminate information in order to enhance dissemination and avoid duplication of activities; and

(4) Develop, implement, and evaluate methods that diverse public audiences can use to access NIDRR-funded research findings.

# Proposed Priority 4: International Exchange of Information and Experts

#### Introduction

The Rehabilitation Act of 1973, as amended, provides NIDRR with the authority to exchange experts and technical assistance in field of rehabilitation of individuals with disabilities as well as conduct a program for international research and demonstration (Section 204 (b)(6)). Cooperative international research activities can offer new perspectives on solving rehabilitation problems, provide data for the evaluation of domestic programs, and assist U.S. rehabilitation practitioners to improve the effectiveness of the services they provide, especially for minority and immigrant populations.

# Proposed Priority

The Secretary proposes to establish a DRRP for the purpose of improving rehabilitation services by obtaining and disseminating information on international rehabilitation research and practices. The project must:

(1) Develop and maintain a database of international rehabilitation research and make this database available to grantees supported by NIDRR, the Office of Special Education Programs, and the Rehabilitation Services Administration;

(2) Conduct rehabilitation research conferences involving participants from the U.S. and other countries;

(3) Conduct an international exchange of research and technical assistance experts between other countries and the United States; and

(4) Disseminate information on cultural perspectives on rehabilitation to entities that provide rehabilitation or conduct rehabilitation research and training activities involving persons from foreign backgrounds.

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Note: The official version of this document is the document published in the **Federal Register**.

Invitation to Comment: Interested persons are invited to submit comments and recommendations regarding these proposed priorities. All comments submitted in response to this notice will be available for public inspection, during and after the comment period, in Room 3424, Switzer Building, 330 C Street S.W., Washington, D.C., between the hours of 9:00 a.m. and 4:30 p.m., Monday through Friday of each week except Federal holidays. Applicable Program Regulations: 34

CFR Parts 350.

Program Authority: 29 U.S.C. 760-762. (Catalog of Federal Domestic Assistance Number 84.133A, Disability and Rehabilitation Research Projects, and 84.133B, Rehabilitation Research and Training Centers)

Dated: December 28, 1998. Judith E. Heumann, Assistant Secretary for Special Education and Rehabilitative Services. [FR Doc. 98-34750 Filed 12-31-98; 8:45 am] BILLING CODE 4000-01-P