

OGE received one comment; however, the comment concerned the SF 278 report, not the survey form. In that notice, and this one, OGE proposes no changes to the survey form. If OGE's current stock of survey forms is depleted within the next three years, OGE plans to reprint the form with two minor modifications (with notice to OMB at that time) without further paperwork clearance. These modifications are: updating the OGE address from "Attn: FDD" to "Attn: PSD" and, in the public burden statement, change "Associate Director for Administration" to "Deputy Director for Administration and Information Management."

Pursuant to the Paperwork Reduction Act (44 U.S.C. chapter 35), OGE is not including in its public burden estimate for the survey form the limited number of access requests filed by other Federal agencies or Federal employees. Nor is OGE including in that estimate, the limited number of requests for copies of other records covered under the special Ethics Act public access provision (such as certificates of divestiture) since the survey form is only sent to persons who request copies of SF 278 reports.

As so defined, OGE's estimate for the total number of survey forms to be filed annually at OGE over the next three years by members of the public (primarily by news media representatives, public interest group members and private citizens) is 30. This estimate is based on a calculation of the number of survey forms received at OGE between January 2001 and December 2004 (112 survey forms). This estimate is 20 less than that for the prior three-year period. The estimated average amount of time to read the instructions and complete the survey form, remains the same at three minutes. Thus, the new overall estimated annual public burden for the OGE Public Financial Disclosure Access Customer Service Survey form will be two hours (rounded up from one and a half hours (30 forms × 3 minutes per form).

In this second round notice, public comment is again invited on all aspects of OGE's customer service survey form, specifically views on: the accuracy of OGE's public burden estimate; the potential for enhancement of quality, utility, and clarity of the information to be collected; and the minimization of burden (including the possibility of use of information technology). The Office of Government Ethics, in consultation with OMB, will consider all comments received, which will become a matter of public record.

Approved: March 14, 2005.

Marilyn L. Glynn,

Acting Director, Office of Government Ethics.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement AA018]

Association of Public Health Laboratories; Notice of Intent To Fund Single Eligibility Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2005 funds for a cooperative agreement program. The purpose of the program is to assist the Association of Public Health Laboratories (APHL), which includes two primary components, the National Laboratory Partnership (NLP) and the National Laboratory Training Network (NLTN), in promoting quality public health practice, improving the public health infrastructure, strengthening the public health laboratory system, and developing a well-trained competent laboratory work force in the United States by focusing on several key areas. These key areas include, maintaining, monitoring, and sharing information about public health laboratories by serving as a repository of public health laboratory information; enhance communication linkages between State, local, private clinical, and Federal laboratories that perform testing for diseases of public health significance; determine the effect of public health policies on testing practices to ensure the needs of the public are met and that public health laboratories are providing essential services to meet public needs; develop disease prevention strategies based on sound scientific knowledge that will be contained in its repository of information that can be shared and disseminated to other public health laboratories and Federal agencies; develop forums, conferences, symposiums, and related meetings to build leadership and technologic capabilities concerning critical issues; and support a national training network that will provide continuing education courses and training opportunities for laboratorians performing testing for diseases of public health significance. APHL, through the NLTN, will provide timely state of the art "hands-on" training, training broadcasts, and

develop appropriate training materials to provide continuing education to the nation's laboratorians that perform testing for diseases of health significance.

B. Eligible Applicant

Assistance will be provided only to the APHL. APHL is the appropriate and only qualified organization to address the activities described under this program announcement.

The Association of Public Health Laboratories (APHL) is the only organization that represents all public health laboratories, which is part of their mission statement and a goal of their strategic plan. By working through its own membership, the various APHL committees, and other affiliate organizations, APHL has developed a unique knowledge of the needs and operations of the public health laboratory practices. The APHL membership includes all States including the state laboratory director and three delegates. APHL represents public health laboratory science practitioners and therefore, represents officials from throughout the United States who have responsibility for all aspects of public health laboratory science, training and education, laboratory management, and policy development.

C. Funding

Approximately \$4,600,000.00 is available in FY 2005 to fund this award. It is expected that the award will begin on or before July 1, 2005, and will be made for a 12-month budget period within a project period of 5 years. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: (770) 488-2700.

For technical questions about this program, contact: William O. Schalla, M.S., Project Officer, Division of Public Health Partnerships Mail Stop K-36, National Center for Health Marketing, Centers for Disease Control and Prevention, 4770 Buford Highway, NE., Atlanta, Georgia 30341-3717, Telephone: (770) 488-8098, E-mail: WSchalla@cdc.gov.

Dated: March 17, 2005.

William P. Nichols,

*Director, Procurement and Grants Office,
Centers for Disease Control and Prevention.*
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Maternal, Infant, and Reproductive Health: National and State Coalition Capacity Building

Announcement Type: New.

Funding Opportunity Number: RFA AA004.

Catalog of Federal Domestic Assistance Number: 93.946, Safe Motherhood/Infant Health.

Key Dates: Letter of Intent Deadline (LOI): April 22, 2005.

Application Deadline: May 23, 2005.

I. Funding Opportunity Description

Authority: This program is authorized under Section 317(k)(2) [42 U.S.C. 247b(k)(2)] of the Public Health Service Act, as amended.

Purpose: The purpose of this program is to improve reproductive health through the application of science-based approaches by supporting State and major urban public health agencies, national organizations and State coalitions to improve reproductive and infant health through the application of science-based approaches. Reproductive and infant health needs to be addressed include the prevention of adverse maternal and infant health outcomes, unintended and teen pregnancy, HIV and STDs.

This cooperative agreement addresses the "Healthy People 2010" focus areas of Maternal, Infant and Child Health, Family Planning, Sexually Transmitted Diseases (STDs), Human Immunodeficiency Virus (HIV), Substance Abuse, Injury and Violence Prevention, Community-Based Programs, Physical Activity and Fitness, Nutrition and Overweight, Tobacco, and Mental Health and Mental Disorders.

Measurable outcomes of the program will be in alignment with one or more of the following performance goals for the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP):

- Improve the health and well being of women, infants, children, and families
- Promote health and reduce chronic disease associated with diet and weight.

- Improve health, fitness, and quality of life through daily physical activity.

- Promote responsible sexual behaviors, strengthen community capacity, and increase access to quality services to prevent STDs and their complications.

- Reduce illness, disability, and death related to tobacco use and exposure to secondhand smoke.

- Prevent abuse and neglect among pregnant women and infants.

- Prevent HIV infection and its related illness and death.

- Improve the health and well being of minority women before, during, and after pregnancy.

- Reduce racial and ethnic disparities in maternal health outcomes.

- Reduce the number of minority women who have adverse reproductive outcomes.

- Promote health, fitness, and quality of life through daily physical activity.

- Reduce maternal mortality among minority women.

- Increase the number of minority women who have access to and use preconception counseling and related services.

- Increase the number of minority women who have access to and use prenatal care services.

- Increase the proportion of adolescents who abstain from sexual intercourse or use condoms if currently sexually active.

- Reduce pregnancies among adolescent females.

- Reduce the number of cases of HIV infection among adolescents.

- Reduce the number of STD cases among adolescents.

This announcement is only for non-research activities supported by CDC/ATSDR. If research is proposed, the application will not be reviewed. For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/ads/opspoll1.htm>.

Activities: Awardees activities for this program are as follows: Parts A and B will provide support for organizations to work cooperatively with health departments and other Maternal and Child Health Programs (MCH) to promote the Safe Motherhood and Infant Health approach, enhance skill development for MCH-related public health programs, strengthen systems of services for women across their lifespan, including adolescents, assess and prevent birth defects and developmental disabilities, and establish programs to prevent behaviors that place young people, teens and those up to age 24, at risk for HIV infection, other STDs, unintended pregnancy, and other

important health problems. Part A of this program targets activities for State public health agencies nationwide and Part B of this program targets activities for public health agencies in major urban areas nationwide. Recipient activities for Part A and B are:

Develop work plans that include target organizations, collaborative activities, evaluation plan and a logic model. The logic model should contain program activities, short-term, intermediate, long-term and impact outcomes (see Appendix B on the CDC Web site, Internet address: <http://www.cdc.gov>. Click on "Funding" then "Grants and Cooperative Agreements)."

- Develop training initiatives to promote the capability of health departments to conduct epidemiology and surveillance and to use relevant scientific information and health data to improve maternal and child health policies and programs.

- Develop educational initiatives to promote the awareness and knowledge of the public health workforce to address current reproductive and infant health issues.

- Develop translation initiatives to translate and to promote translation of effective public health policies and practices in reproductive and infant health based on a systematic and scientific review of the published literature and consensus of national experts.

- Develop initiatives to assist federal Healthy Start communities in assessing their fetal and infant mortality and developing community action plans to address identified needs.

- Develop initiatives to assess reproductive and infant health needs and to assess the capabilities of public health agencies to address those needs. Also, initiatives to evaluate related programs.

- Develop partnership initiatives with other key national groups and organizations to promote reproductive and infant health and conduct these activities through communication, coordination and collaboration.

- Initiatives can include conferences, workshops, newsletters, publications, expert panels, year-long learning training institutes, web-casts, and distance-based offerings.

Part C will provide support for national organizations to promote safe motherhood for minority women before, during, and after pregnancy; eliminate racial and ethnic disparities in maternal health outcomes; reduce adverse reproductive outcomes; build relationships with State health departments or State coalitions and local affiliates; and strengthen systems