



DEPARTMENT OF HEALTH AND HUMAN SERVICES

2007 - 2008 TRIBAL RESOURCE GUIDE

PREPARED BY:
THE OFFICE OF INTERGOVERNMENTAL AFFAIRS
SEPTEMBER 2007

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Dear Tribal Leader:

The Office of Intergovernmental Affairs (IGA) produced the enclosed 2007-2008 Department of Health and Human Services Tribal Resource Guide in cooperation with each Health and Human Services (HHS) Division. The Guide provides information about the vast array of programs within HHS that we anticipate will be beneficial to you.

We strive to maintain and improve our communication with the Tribes. We heard your voices loud and clear at our 2007 Regional Consultation Sessions asking for more open channels of communication with tribal partners. We understand the unique relationship for Tribes working with HHS and we hope this Guide assists in that process.

The Guide includes a section of funding opportunities for which Tribes are eligible, as outlined in the Catalog of Federal Domestic Assistance issued by the General Services Administration (GSA). As you review each of the program divisions you will notice individual contacts names, these individuals are Tribal liaisons who represent the Intradepartmental Council on Native American Affairs. The Tribal liaisons are available to help you with specific program information in each respective Division. Please, feel free to contact them directly with your specific program questions.

Please do not hesitate to provide me your comments about this Tribal Resource Guide. I value your comments and our continued partnership.

Respectfully,

A handwritten signature in cursive script that reads "Laura Caliguiri".

Laura Caliguiri
Director, Office of Intergovernmental Affairs

Enclosure

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Department of Health and Human Services: What We Do

The Department of Health and Human Services is the United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.

The department includes more than 300 programs, covering a wide spectrum of activities. Some highlights include:

- *Health and social science research*
- *Preventing disease, including immunization services*
- *Assuring food and drug safety*
- *Medicare (health insurance for elderly and disabled Americans) and Medicaid (health insurance for low-income people)*
- *Health information technology*
- *Financial assistance and services for low-income families*
- *Improving maternal and infant health*
- *Head Start (pre-school education and services)*
- *Faith-based and community initiatives*
- *Preventing child abuse and domestic violence*
- *Substance abuse treatment and prevention*
- *Services for older Americans, including home-delivered meals*
- *Comprehensive health services for Native Americans*

- *Medical preparedness for emergencies, including potential terrorism*

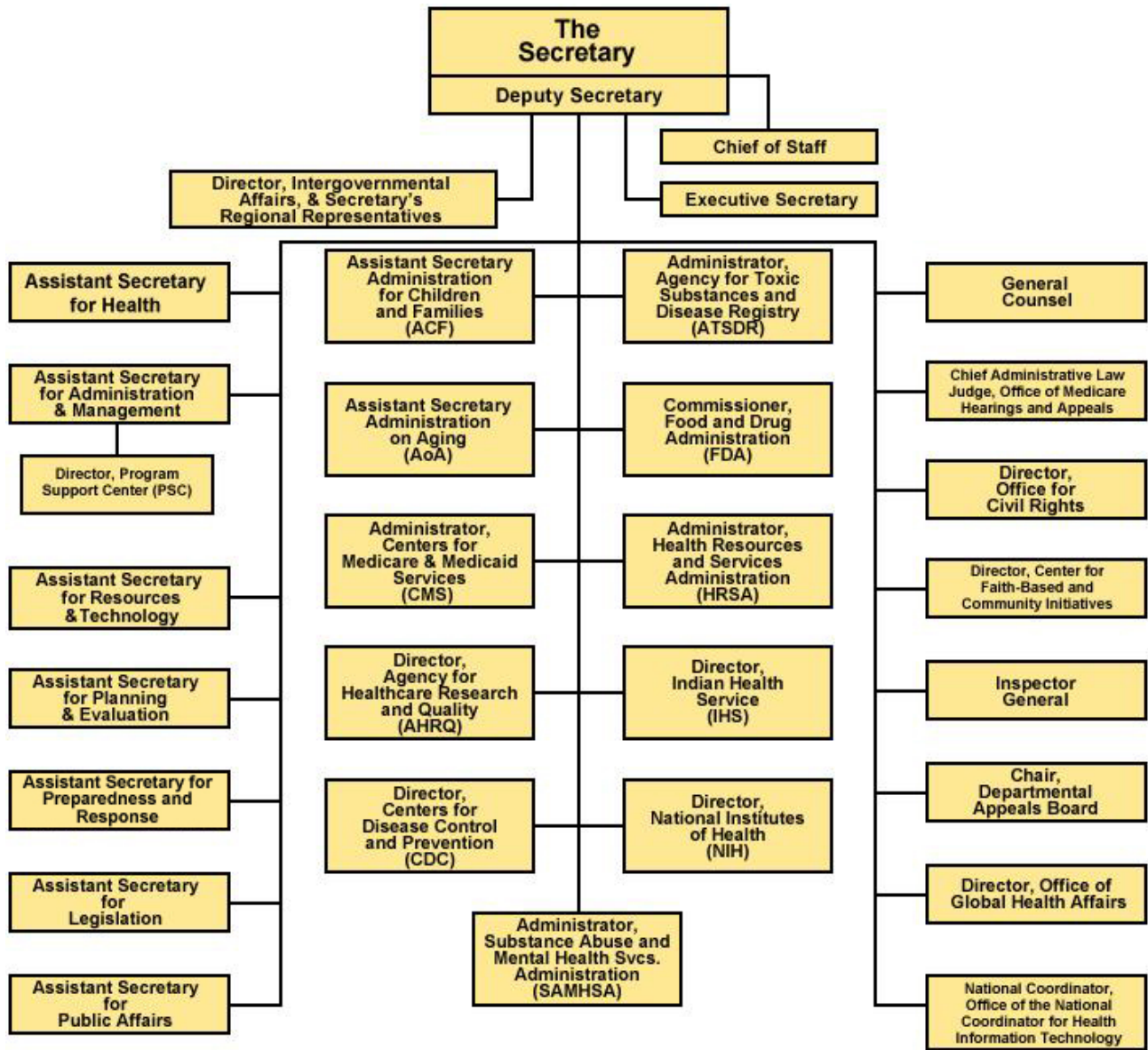
HHS represents almost a quarter of all federal outlays, and it administers more grant dollars than all other federal agencies combined. HHS' Medicare program is the nation's largest health insurer, handling more than 1 billion claims per year. Medicare and Medicaid together provide health care insurance for one in four Americans.

HHS works closely with state local and tribal governments and many HHS-funded services are provided at the local level by state or county agencies, or through private sector grantees. The Department's programs are administered by 11 operating divisions, including eight agencies in the U.S. Public Health Service and three human services agencies. In addition to the services they deliver, the HHS programs provide for equitable treatment of beneficiaries nationwide, and they enable the collection of national health and other data.

- HHS Budget, FY 2007 -- \$698 billion
- HHS employees – 67,444

THE U.S. PUBLIC HEALTH SERVICE COMMISSIONED CORPS is a uniformed service of more than 6,000 health professionals who serve in many HHS and other federal agencies. The Surgeon General is head of the Commissioned Corps.

Department of Health & Human Services Organizational Chart*



* Only HHS OPDIVS offer funding opportunities for eligible applicants. STAFFDIVS do not have any funding opportunities..

**OFFICE OF INTERGOVERNMENTAL
AFFAIRS (IGA)**

The Office of Intergovernmental Affairs' (IGA), as part of the Immediate Office of the Secretary, mission is to facilitate communication regarding Health and Human Services (HHS) initiatives as they relate to state, local, and tribal governments. IGA is the Departmental liaison to state governments, and serves the dual role of representing the state and tribal perspective in the federal policymaking process as well as clarifying the federal perspective to state, and tribal representatives.

Additionally, IGA works with state and local governments to facilitate the application and approval process for grant waivers and program planning. For more information on these topics, please visit the Centers for Medicare and Medicaid Services and the Administration for Children and Families web sites. IGA also coordinates ten Regional Offices and represents HHS on several key interagency initiatives.

The Tribal Affairs focus within IGA coordinates and manages IGA's tribal policy issues, assists Tribes in navigating through HHS programs and services, and coordinates the Secretary's policy development for Tribes and national Tribal organizations. The IGA Director also provides executive direction for the Secretary's Intradepartmental Council on Native American Affairs (ICNAA). The ICNAA is an internal council that brings together all Health and Human Services Operating Divisions and Staff Divisions to help frame HHS' policy and initiatives on American Indians, Alaska Natives, and Native Americans. Links to tribal consultation documents, speeches, etc. and national and regional American Indian/Alaskan Native

organizations and HHS and other federal governmental tribal links can be found at www.hhs.gov/ofta.

CONTACT INFORMATION:

OFFICE OF INTERGOVERNMENTAL AFFAIRS

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Kimberly Romine

Executive Director
Intradepartmental Council for Native
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Office of Intergovernmental Affairs
Immediate Office of the Secretary
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HHS REGIONAL DIRECTORS LIST

Region I

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Region II

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Region IV

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Region VI

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Region VII

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Region IX

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Region X

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**INTRADEPARTMENTAL COUNCIL ON
NATIVE AMERICAN AFFAIRS (ICNAA)**

The Intradepartmental Council on Native American Affairs (ICNAA), authorized by the Native American Programs Act of 1974, as amended, serves as the focal point within the Department for coordination and consultation of health and human services issues affecting the American Indian, Alaska Native and Native American (AI/An/NA) population, which includes over 560 federally recognized tribes, approximately 60 tribes that are state recognized or seeking federal recognition, Indian organizations, Native Hawaiian communities and Native American Pacific Islanders, including Native Samoans. The ICNAA is an internal council that:

1. Develops and promotes a Department of Health and Human Services (HHS) policy to provide greater access and quality services for American Indians, Alaska Natives and Native Americans (AI/AN/NAs) throughout the Department and where possible, the Federal government.
2. Promotes implementation of HHS policy and HHS agency plans on consultation with federally recognized Tribal Governments in accordance with statutes and executive orders.

3. Identifies and develops legislative, administrative, and regulatory proposals that promote an effective, meaningful AI/AN/NA policy to improve health and human services for AI/AN/NAs.
4. Identifies and develops a comprehensive Departmental strategy proposal that promotes self-sufficiency and self-determination for all AI/AN/NA people.
5. Promotes the Tribal/Federal government-to-government relationship on a Department-wide basis in accordance with Presidential Executive Order.

The Council priorities are:

1. Health promotion and disease prevention
2. Health professions recruitment
3. Health Information Technology (IT)
4. Emergency Preparedness
5. Behavioral health
6. Increase access to HHS programs and Grants: Improve Technical Assistance for all AI/AN/NAs
7. Increase Awareness and Effectiveness of Human Services with Native Populations
8. Tribal Consultation

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Section 2: HHS Offices

Staff Divisions (STAFFDIVS)

Assistant Secretary for Administration and Management
Assistant Secretary for Resources and Technology
Assistant Secretary for Health
Assistant Secretary for Legislation
Assistant Secretary for Policy and Evaluation
Assistant Secretary for Preparedness and Response
Departmental Appeals Board
Office for Civil Rights
Office of Inspector General
Office of the General Counsel

Operating Divisions (OPDIVS)

Administration for Children and Families
Administration on Aging
Agency for Healthcare Research and Quality
Agency for Toxic Substances and Disease Registry
Centers for Disease Control and Prevention
Centers for Medicare & Medicaid Services
Food and Drug Administration
Health Resources and Services Administration
Indian Health Service
National Institutes of Health
Substance Abuse and Mental Health Services Administration

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United States Department of Health & Human Services

The Office of the Secretary is directly supported by the Deputy Secretary, and a number of Assistant Secretaries and Offices.

ASSISTANT SECRETARY FOR ADMINISTRATION AND MANAGEMENT

ASAM provides leadership for HHS departmental management, including human resource policy, grants management, acquisitions, and departmental operations. The ASAM also serves as the operating division head for the HHS Office of the Secretary. A special responsibility of the ASAM is to help bring about improvements and effectiveness that can be achieved by structuring HHS as a united department, in support of the Secretary's goals and the President's Management Agenda.

Contact Information:

Assistant Secretary for Administration
and Management
Department of Health and Human Services
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Intradepartmental Council on Native American Affairs Liaison

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Management & Administration

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ASSISTANT SECRETARY FOR RESOURCES AND TECHNOLOGY (ASRT)

ASRT provides advice and guidance to the Secretary on budget, financial management, information technology, and grants management, and provides for the direction and coordination of these activities through the Department.

The Office is headed by the Assistant Secretary for Resources and Technology (ASRT). The ASRT:

- Is the Department's Chief Financial Officer. By delegation, the ASRT/CFO exercises full Department-wide authority of the Secretary's responsibilities delineated in the Chief Financial Officers Act of 1990.
- Manages the Chief Information Officer (CIO) and all functional responsibilities included in the Clinger-Cohen Act.
- Is responsible for the formulation, analysis and presentation of the HHS Budget submitted to OMB and the Congress.

Contact Information:

Assistant Secretary for Resources
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Department of Health and Human Services
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Washington, DC 20201

Intradepartmental Council on Native American Affairs Liaison

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ASSISTANT SECRETARY FOR HEALTH

ASH serves as the Secretary's primary advisor on matters involving the nation's public health and oversees HHS' U.S. Public Service (PHS) for the Secretary. The Office of Public Health and Science (OPHS) is comprised of 12 core public health offices and the Commissioned Corps, a uniformed service of more than 6,000 health professionals who serve at HHS and other federal agencies.

Contact Information:

Assistant Secretary for Health
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

OFFICE OF MINORITY HEALTH (OMH)

The Office of Minority Health located in the Office of Public Health Services under the Assistant Secretary for Health is the federal focal point for addressing the health status and quality of life for racial and ethnic minority populations in the United States.

The mission of the Office of Minority Health (OMH) is to improve and protect the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities.

OMH was established in 1986 by the U.S. Department of Health and Human Services

(HHS). It advises the Secretary and the Office of Public Health and Science (OPHS) on public health program activities affecting American Indians and Alaska Natives, Asian Americans, Blacks/African Americans, Hispanics/Latinos, Native Hawaiians, and other Pacific Islanders.

Contact Information:

Office of Minority Health
The Tower Building
1101 Wootton Parkway Suite 650
Rockville, MD 20852

Mailing Address:
P.O. Box 37337,
Washington, D.C. 20013-7337

Toll-free line: 1-800-444-6472
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Intradepartmental Council on Native American Affairs Liaison

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ASSISTANT SECRETARY FOR LEGISLATION

ASL Serves as the primary link between the Department of Health & Human Services (HHS) and Congress. It provides advice on legislation and facilitates communication between the Department and Congress. The office also informs the Congress of the Department's views, priorities, actions, grants and contracts. ASL is the Department liaison with Members of Congress, staff, Committees, and with the Government Accountability Office (GAO).

The Office provides support to the Secretary of Health and Human Services by:

- developing, transmitting, providing information about, and working to enact the Department's legislative and administrative agenda;
- supporting implementation of legislation passed by Congress;
- working closely with the White House to advance Presidential initiatives relating to health and human services;
- responding to Congressional inquiries and notifying Congressional offices of grant awards (GrantsNet, TAGGS) made by the Department;
- providing technical assistance regarding grants and legislation to Members of Congress and their staff and facilitating informational briefings relating to Department programs and priorities;
- managing the Senate confirmation process for the Secretary and the 14 other Presidential appointees (HHS) who must be confirmed by the Senate;
- preparing witnesses and testimony for Congressional hearings;
- coordinating meetings and communications of the Secretary and other Department officials with Members of Congress;
- notifying and coordinating with Congress regarding the Secretary's travel and event schedule;
- coordinating Department response to Congressional oversight and investigations;
- acting as Departmental liaison with the Government Accountability Office (GAO) and coordinating responses to GAO inquiries; and
- serves as liaison to external organizations, including public and private interest groups, with respect to the legislative agenda.

Contact Information:

Assistant Secretary for Legislation
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Intradepartmental Council on Native American Affairs Liaison

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ASSISTANT SECRETARY FOR PLANNING AND EVALUATION (ASPE)

ASPE is the principal advisor on policy development, and is responsible for major activities in policy coordination, legislation development, strategic planning, policy research, evaluation, and economic analysis. The Assistant Secretary for Planning and Evaluation (ASPE) advises the Secretary of the Department of Health and Human Services on policy development in health, disability, human services, data, and science, and provides advice and analysis on economic policy. ASPE leads special initiatives, coordinates the Department's evaluation, research and demonstration activities, and manages cross-Department planning activities such as strategic planning, legislative planning, and review of regulations. Integral to this role, ASPE conducts research and evaluation studies, develops policy analyses, and estimates the cost and benefits of policy alternatives under consideration by the Department or Congress.

Contact Information:

Assistant Secretary for Planning
and Evaluation
Department of Health and Human Services
200 Independence Avenue, SW
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**Intradepartmental Council on Native
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**ASSISTANT SECRETARY FOR PUBLIC
AFFAIRS (ASPA)**

ASPA serves as the principle counsel on public affairs matters, conducts a national public affairs program, provides centralized leadership and guidance for public affairs activities within HHS' staff and operation divisions and regional offices, and administers the Freedom of Information and Privacy Act.

Contact Information:

Assistant Secretary for Public Affairs
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

**Intradepartmental Council on Native
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Confidential Assistant to the Assistant Secretary
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PH (202) 205-1314
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**ASSISTANT SECRETARY FOR
PREPAREDNESS AND RESPONSE (ASPR)**

The Office of the Assistant Secretary for Preparedness and Response (formerly the Office of Public Health Emergency Preparedness) serves as the Secretary's principal advisory staff on matters related to bioterrorism and other public health emergencies. ASPR also coordinates interagency activities between HHS, other Federal departments, agencies, and offices, and State and local officials responsible for emergency preparedness and the protection of the civilian population from acts of bioterrorism and other public health emergencies.

Contact Information:

Assistant Secretary for Preparedness
and Response
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

**Intradepartmental Council on Native
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Human Services Policy Coordinator
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DEPARTMENTAL APPEALS BOARD (DAB)

DAB provides prompt, fair, and impartial dispute resolution services to parties in many different kinds of disputes involving components of HHS. DAB's mission is to provide the best possible dispute resolution services for the people who appear before us, those who rely on our decisions, and the public. The following principles guide us:

- We provide a great work environment for each other, we treat each other with respect, and we take pride in what each of us, and all of us, do.

- We are fair and impartial, and we always try to assure that our customers perceive us so.
- We do our job as promptly as possible.
- We deliver products which are thorough, well-reasoned and written in concise, clear English.
- We value creativity and innovation, and we always seek better ways to do things in every part of our job.
- We each take personal responsibility for assuring that customers' needs are met.
- We help parties economize in case preparation.
- We empower parties to narrow and resolve issues on their own or with the help of mediation or other alternative dispute resolution.

Contact Information:

Departmental Appeals Board
 Department of Health and Human Services
 200 Independence Avenue, SW
 Washington, DC 20201

Intradepartmental Council on Native American Affairs Liaison

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 Board Member
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OFFICE FOR CIVIL RIGHTS (OCR)

OCR helps to ensure that people have equal access to and opportunity to participate and receive services in all the programs of entities over which OCR has jurisdiction without facing unlawful discrimination, and that the privacy of their health information is protected. Some of the major Federal laws for which OCR has enforcement authority are:

- *Title VI of the Civil Rights Act of 1964.* Title VI prohibits discrimination based on race, color and national origin.
- *Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act (ADA) of 1990.* Section 504 and the ADA prohibit discrimination based on disability.
- *The Age Discrimination Act of 1975.* The Age Act prohibits discrimination based on age (excludes employment).
- *The community service assurance provisions of the Hill-Burton Act.* The Hill-Burton Act prohibits discrimination by hospitals and other health care facilities based on race, color, national origin, or any other ground unrelated to a person's need for the service.
- *The Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) of 1996.* HIPAA and the Privacy Rule create national standards to protect individuals' medical records and other personal health information.

Through prevention and elimination of unlawful discrimination and by protecting the privacy of individually identifiable health information, OCR helps HHS carry out its overall mission of improving the health and well-being of all people affected by its many programs.

Contact Information:

Office for Civil Rights
 Department of Health and Human Services
 200 Independence Avenue, SW
 Washington, DC 20201

Intradepartmental Council on Native

American Affairs Liaison

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Office for Civil Rights
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OFFICE OF INSPECTOR GENERAL (OIG)

The mission of the Office of Inspector General, as mandated by Public Law 95-452 (as amended), is to promote efficiency and economy in the programs of the Department of Health and Human Services (HHS), and to prevent and detect fraud and abuse. The OIG is an independent division of HHS that has a responsibility to report both to the Secretary and to the Congress program and management problems and recommendations to correct them. The OIG's duties are carried out through audits, investigations, inspections and other mission-related functions performed by OIG components.

Contact Information:

Office of Inspector General
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Intradepartmental Council on Native American Affairs Liaison

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OFFICE OF THE GENERAL COUNSEL (OGC)

OGC is the legal team for HHS, providing quality representation and legal advice on a wide range of highly visible national issues. OGC supports the development and implementation of the Department's programs by providing the highest quality legal services to the Secretary of HHS and the organization's various agencies and divisions.

A team of over 400 attorneys and a comprehensive support staff, OGC is one of the largest and most diverse and talented law offices in the country. Many OGC lawyers are heavily involved in administrative and Federal court litigation. In collaboration with the Department of Justice, OGC attorneys may have primary responsibility for complex district court and appellate litigation, trying cases and arguing appeals in the initial years of service. The OGC team also reviews proposed regulations and writes and reviews legislation affecting significant issues of health and human services.

We strive to advance the Department's goal of protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves. We further the HHS mission by working in areas such as:

- cancer research
- privacy of medical records
- contract disputes litigation
- victims of human trafficking

- faith-based and community initiatives
- welfare reform
- medicare-medicaid
- child welfare
- Head Start
- alternatives to institutional care
- civil rights
- Indian health
- bio-terrorism programs
- food safety
- child support enforcement
- refugee resettlement
- organ donation
- genetic testing
- nursing home care
- drug approvals
- foster care and adoption assistance
- nursing home bankruptcies
- fraud, waste and abuse
- district and appellate court litigation
- vaccine procurement and distribution

Contact Information:

Office of the General Counsel
 Department of Health and Human Services
 200 Independence Avenue, SW
 Washington, DC 20201

**Intradepartmental Council on Native
 American Affairs Liaison**

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Administration for Children & Families

MISSION STATEMENT

The Administration for Children and Families (ACF), within the Department of Health and Human Services (HHS) is responsible for federal programs that promote the economic and social well-being of families, children, individuals, and communities. ACF programs aim to achieve the following: families and individuals empowered to increase their own economic independence and productivity; strong, healthy, supportive communities that have a positive impact on the quality of life and the development of children; partnerships with individuals, front-line service providers, communities, American Indian tribes, Native communities, states, and Congress that enable solutions which transcend traditional agency boundaries; services planned, reformed, and integrated to improve needed access; and a strong commitment to working with people with developmental disabilities, refugees, and migrants to address their needs, strengths, and abilities.

Established: 1991, bringing together several already-existing programs.

Headquarters: Washington, D.C.

Web site: <http://www.acf.hhs.gov/>

Employees -- 1,246

(Acting) Assistant Secretary for Children and Families -- Daniel Schneider

FY 2007 Budget -- \$47 billion

Contact information:

Assistant Secretary for Children and Families
370 L'Enfant Promenade, S.W.
Washington, D.C. 20201

Tribal Consultation Policy: Currently under development

Intrdepartmental Council on Native American Affairs Liaison

Sheila Cooper

*Director Program Operations Division,
Administration on Native Americans*

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FAX (202) 690-7441

Sheila.Cooper@hhs.gov

Tribal Specific Grant Programs

- Administration for Native Americans
- American Indian Alaska Native Head Start Program
- Tribal Child Care Technical Assistance
- Tribal TANF



MISSION STATEMENT

The Administration on Aging (AoA), an agency in the U.S. Department of Health and Human Services, is one of the nation's largest providers of home- and community-based care for older persons and their caregivers. Our mission is to develop a comprehensive, coordinated and cost-effective system of long-term care that helps elderly individuals to maintain their dignity in their homes and communities. Our mission statement also is to help society prepare for an aging population.

Created in 1965 with the passage of the Older Americans Act (OAA), AoA is part of a federal, state, tribal and local partnership called the National Network on Aging. This network, serving about 7 million older persons and their caregivers, consists of 56 State Units on Aging; 655 Area Agencies on Aging; 23 Tribal

organizations; two organizations that serve Native Hawaiians; 29,000 service providers; and thousands of volunteers. These organizations provide assistance and services to older individuals and their families in urban, suburban, and rural areas throughout the United States.

While all older Americans may receive services, the OAA targets those older individuals who are in greatest economic and social need: the poor, the isolated, and those elders disadvantaged by social or health disparities.

Headquarters: Washington, D.C.

Web site: <http://www.aoa.hhs.gov>

Employees -- 115

Assistant Secretary for Aging -- Josefina G. Carbonell

FY 2007 Budget -- \$1.4 billion

Contact Information:

Administration on Aging
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201
Phone: 202 619-0724

Tribal Consultation Policy: Currently under development

Intradepartmental Council on Native American Affairs Liaison

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Tribal Specific Grant Programs

- Nutrition and Supportive Services for American Indian Alaska Native and Native Hawaiians

- Native American Caregiver Support Program



MISSION STATEMENT

As 1 of 12 agencies within the Department of Health and Human Services (HHS), the Agency for Healthcare Research and Quality (AHRQ) supports health services research initiatives that seek to improve the quality of health care in America. AHRQ's mission is to improve the quality, safety, efficiency, effectiveness, and cost-effectiveness of health care for all Americans. The Agency works to fulfill this mission by conducting and supporting health services research, both within AHRQ as well as in leading academic institutions, hospitals, physicians' offices, health care systems, and many other settings across the country. The Agency has a broad research portfolio that touches on nearly every aspect of health care.

Established: 1989.

Headquarters: Rockville, Md.

Web site: <http://www.ahrq.gov/>

Employees -- 293

Director -- Carolyn M. Clancy, M.D.

FY 2007 Budget -- \$319 million

Contact Information:

Agency for Healthcare Research and Quality
Office of Communications and Knowledge Transfer
540 Gaither Road, Suite 2000
Rockville, MD 20850.
(301) 427-1364

Tribal Consultation Policy: Currently under revision

Intradepartmental Council on Native American Affairs Liaison

Wendy Perry

Senior Program Analyst

PH (301) 427-1216

FAX (301) 427-1210

Wendy.Perry@ahrq.hhs.gov

Tribal Specific Grant Programs

AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives - This program brief summarizes a number of ongoing and recently completed research pursuits sponsored by the Agency for Healthcare Research and Quality, in which information technology, educational programs, cooperative partnerships, and analyses of care are being used to improve health outcomes in United States indigenous populations. The brief can be accessed at the following web site address:

<http://www.ahrq.gov/research/amindup.htm>



MISSION STATEMENT

The mission of the Agency for Toxic Substances and Disease Registry (ATSDR), as an agency of the U.S. Department of Health and Human Services, is to serve the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and disease related to toxic substances.

ATSDR is directed by congressional mandate to perform specific functions concerning the effect on public health of hazardous substances in the environment. These functions include public health assessments of waste sites, health consultations concerning specific hazardous substances, health surveillance and registries,

response to emergency releases of hazardous substances, applied research in support of public health assessments, information development and dissemination, and education and training concerning hazardous substances.

The Agency for Toxic Substances and Disease Registry (ATSDR) Office of Tribal Affairs (OTA) was established in 1999 in response to tribal requests. Since that time, OTA has been assisting with tribal-specific environmental health needs resulting from exposure to hazardous waste sites and pollution. ATSDR has established a firm commitment to working with American Indian/Alaska Native governments, organizations, and communities.

Contact information:

Agency for Toxic Substances and Disease Registry

1825 Century Blvd

Atlanta, GA 30345

CDC-INFO

800-CDC-INFO

800-232-4636

TTY 888-232-6348

24 Hours/Day

E-mail: cdcinfo@cdc.gov

Intradepartmental Council on Native American Affairs Liaison

[Leslie Campbell](#)

Environmental Health Scientist

PH (404) 498-0457

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Health Education Specialist

PH (404) 498-0527

FAX (404) 498-1744



MISSION STATEMENT

To promote health and quality of life by preventing and controlling disease, injury, and disability.

CDC seeks to accomplish its mission by working with partners throughout the nation and the world to:

- monitor health,
- detect and investigate health problems,
- conduct research to enhance prevention,
- develop and advocate sound public health policies,
- implement prevention strategies,
- promote healthy behaviors,
- foster safe and healthful environments,
- provide leadership and training.

Those functions are the backbone of CDC’s mission. Each of CDC’s component organizations undertakes these activities in conducting its specific programs. The steps needed to accomplish this mission are also based on scientific excellence, requiring well-trained public health practitioners and leaders dedicated to high standards of quality and ethical practice.

Headquarters: Atlanta, Ga.

Web site: <http://www.cdc.gov/>

Employees -- 8,646

Director -- Julie Louise Gerberding, M.D., M.P.H.

FY 2007 Budget -- \$6.1 billion

Contact information:

Centers for Disease Control and Prevention
1600 Clifton Rd
Atlanta, GA 30333
(404) 639-3534 / (800) 311-3435

Tribal Consultation Policy? Yes

Website:

<http://www.cdc.gov/omh/TCP/TribalConsultation.htm>

Tribal Consultation Workgroup Name: CDC Tribal Consultation Advisory Committee

Website:

<http://www.cdc.gov/omh/TCAC/TCAC.html>

Intradepartmental Council on Native American Affairs Liaison

[Ralph Bryan](#)

Senior CDC Tribal Liaison for Science and Public Health

PH (505) 248-4142

FAX (505) 248-4393

[Pelagie “Mike” Snesrud](#)

Senior CDC Tribal Liaison for Policy and Evaluation

PH (404) 498-2343

FAX (404) 498-2355

[Walter W. Williams](#)

Associate Director for Minority Health

PH (404) 498-2310

FAX (404) 498-2360



MISSION STATEMENT

The mission of CMS is to ensure effective, up-to-date health care coverage and to promote quality care for beneficiaries

CMS' Vision, to achieve a transformed and modernized health care system, to ensure effective, up-to-date health care coverage and to promote quality care for beneficiaries.

CMS will accomplish our mission by continuing to transform and modernize America's health care system.

- CMS' Strategic Action Plan Objectives
- Skilled, Committed, and Highly-Motivated Workforce
- Accurate and Predictable Payments
- High-Value Health Care
- Confident, Informed Consumers
- Collaborative Partnerships

Established as the Health Care Financing Administration: 1977.

Headquarters: Baltimore, Md.

Web sites: <http://www.medicare.gov/>
<http://www.cms.hhs.gov/default.asp?>

Employees -- 4,538

Acting Administrator – Kerry Weems

FY 2007 Budget -- \$547 billion

Contact information:

Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244
Toll-Free: 877-267-2323
Local: 410-786-3000

Tribal Consultation Policy: Currently under development

Website: <http://www.cms.hhs.gov/>

Tribal Consultation Workgroup Name: Tribal Technical Advisory Group (TTAG)

Website: <http://www.cms.hhs.gov/>

Intradepartmental Council on Native American Affairs Liaison

[Dorothy Dupree](#)

Director, Tribal Affairs

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FAX (410) 786-1424

[Priya Helweg](#)

Policy Analyst

PH (410) 786-6128

FAX (410) 786-1424



MISSION STATEMENT

The FDA is responsible for protecting the public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, our nation's food supply, cosmetics, and products that emit radiation. The FDA is also responsible for advancing the public health by helping to speed innovations that make medicines and foods more effective, safer, and more affordable; and helping the public get the accurate, science-based information they need to use medicines and foods to improve their health.

Established: 1906, when the Pure Food and Drugs Act gave regulatory authority to the Bureau of Chemistry.

Headquarters: Rockville, Md.

Web site: <http://www.fda.gov/>

Employees – 9,678

Commissioner -- Andrew C. von Eschenbach, M.D.

FY 2007 Budget -- \$1.6 billion

Contact information:

Food and Drug Administration
5600 Fishers Lane
Rockville, Maryland 20857
1-888-INFO-FDA (1-888-463-6332)

Tribal Consultation Policy: Currently under development

Intradepartmental Council on Native American Affairs Liaison

[Jason D. Brodsky](#)

Associate Commissioner for External Relations

PH: (301) 827-6251

[Mary Hitch](#)

PH: (301) 827-4406

FAX: (301) 480-8039



MISSION STATEMENT

HRSA is the nation's access agency – improving health and saving lives by making sure the right services are available in the right places at the right time.

The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable.

Comprising five bureaus and 12 offices, HRSA provides leadership and financial support to health care providers in every state and U.S. territory. HRSA grantees provide health care to uninsured people, people living with HIV/AIDS, and pregnant women, mothers and children. They train health professionals and improve systems of care in rural communities.

HRSA oversees organ, tissue and bone marrow donation. It supports programs that prepare against bioterrorism, compensate individuals harmed by vaccination, and maintains databases that protect against health care malpractice and health care waste, fraud and abuse.

Since 1943 the agencies that were HRSA precursors have worked to improve the health of

needy people. HRSA was created in 1982, when the Administration were merged.

Established: 1982

Headquarters: Rockville, Md.

Web site: <http://www.hrsa.gov/>

Employees – 1,781

Administrator -- Elizabeth M. Duke, Ph.D.

FY 2007 Budget -- \$6.5 billion

Contact Information:

Health Resources and Services Administration
5600 Fishers Lane
Rockville, MD 20857

Tribal Consultation Policy: Currently under development

Intradepartmental Council on Native American Affairs Liaison

[Tanya Pagan-Raggio](#)

Office of Minority Health

PH (301) 443-2964

FAX (301) 443-7853



MISSION STATEMENT

To raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.

GOAL

To assure that comprehensive, culturally acceptable personal and public health services are available and accessible to American Indian and Alaska Native people.

FOUNDATION

To uphold the Federal Government's obligation to promote healthy American Indian and Alaska Native people, communities, and cultures and to honor and protect the inherent sovereign rights of Tribes.

In order to carry out its mission, attain its goal, and uphold its foundation, the IHS:

1. Assists Tribes in developing their health programs through activities such as health management training, technical assistance, and human resource development;
2. Assists Tribes in coordinating health planning, in obtaining and using health resources available through Federal, State, and local programs, and in operating comprehensive health care services and health programs.
3. Provides comprehensive health care services, including hospital and ambulatory medical care, preventive and rehabilitative services, and development of community sanitation facilities.
4. Serves as the principal Federal advocate in the health field for Indians to ensure comprehensive health services for Indian people.

The Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives. The provision of health services to members of federally-recognized tribes grew out of the special government-to-government relationship between the federal government and Indian tribes. This relationship, established in 1787, is based on Article I, Section 8 of the Constitution, and has been given form and substance by numerous treaties, laws, Supreme Court decisions, and Executive Orders. The IHS is the principal federal health care provider and health advocate for Indian people, and its goal is to raise their health status to the highest possible level. The IHS currently provides health services

to approximately 1.5 million American Indians and Alaska Natives who belong to more than 557 federally recognized tribes in 35 states.

Established: 1921 (mission transferred from the Interior Department in 1955).

Headquarters: Rockville, Md.

Web site: <http://www.ihs.gov/>

Employees: 15,147

Director -- Charles W. Grim, D.D.S., M.H.S.A.

FY 2007 Budget -- \$3.3 billion

Contact information:

Indian Health Service (HQ)
The Reyes Building
801 Thompson Avenue, Ste. 400
Rockville, MD 20852-1627
301-443-1083

Tribal Consultation Policy: Yes

Website: <http://www.ihs.gov>

Intradepartmental Council on Native American Affairs Liaison

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Senior Policy Analyst

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Associate Director for Direct Services

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MISSION STATEMENT

The National Institutes of Health (NIH), a part of the U.S. Department of Health and Human

Services, is the primary Federal agency for conducting and supporting medical research. It is the steward of medical and behavioral research for the Nation. Its mission is science in pursuit of fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability.

The goals of the agency are as follows: foster fundamental creative discoveries, innovative research strategies, and their applications as a basis to advance significantly the Nation's capacity to protect and improve health; develop, maintain, and renew scientific human and physical resources that will assure the Nation's capability to prevent disease; expand the knowledge base in medical and associated sciences in order to enhance the Nation's economic well-being and ensure a continued high return on the public investment in research; and exemplify and promote the highest level of scientific integrity, public accountability, and social responsibility in the conduct of science.

In realizing these goals, the NIH provides leadership and direction to programs designed to improve the health of the Nation by conducting and supporting research: in the causes, diagnosis, prevention, and cure of human diseases; in the processes of human growth and development; in the biological effects of environmental contaminants; in the understanding of mental, addictive and physical disorders; and in directing programs for the collection, dissemination, and exchange of information in medicine and health, including the development and support of medical libraries and the training of medical librarians and other health information specialists.

Composed of 27 Institutes and Centers, the NIH provides leadership and financial support to researchers in every state and throughout the world.

Established: 1887, as the Hygienic Laboratory, Staten Island, N.Y.

Headquarters: Bethesda, Md.

Web site: <http://www.nih.gov/>

Employees -- 17,000

Director -- Elias A. Zerhouni, M.D.

FY 2007 Budget -- \$29.1 billion

Contact information:

National Institutes of Health
9000 Rockville Pike
Bethesda, Maryland 20892
301-496-4000,
TTY 301-402-9612
NIHinfo@od.nih.gov

Tribal Consultation Policy: Currently under development

Intradepartmental Council on Native American Affairs Liaison

Primary:

John Ruffin,

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FAX (301) 402-7040

Alternate:

Lisa Evans, J.D.,

Senior Advisor for Policy, National Center on Minority Health and Health Disparities

PH (301) 594-8748

FAX (301) 480-4049



MISSION STATEMENT

The Substance Abuse and Mental Health Services Administration (SAMHSA) has established a clear vision for its work—a life in the community for everyone. To realize this vision, the Agency has sharply focused its mission on building resilience and facilitating recovery for people with or at risk for mental or substance use disorders. SAMHSA is gearing all of its resources—programs, policies and grants—toward that outcome.

Established: 1992. (A predecessor agency, the Alcohol, Drug Abuse and Mental Health Administration, was established in 1974.)

Headquarters: Rockville, Md.

Web site: <http://www.samhsa.gov/>

Employees -- 528

Administrator – Terry Cline, Ph.D.
FY 2007 Budget -- \$3.2 billion

Tribal Consultation Policy: Yes

Website: <http://www.samhsa.gov/>

Tribal Consultation Workgroup Name:
SAMHSA Tribal Technical Advisory Committee (STTAC):

Website: None.

Intradepartmental Council on Native American Affairs Liaison

Senior Advisor, Tribal Affairs

PH (240) 276-2204

FAX (240) 276-2240

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Section 3: Grants and Resources at HHS

HOW TO READ THIS GUIDE

The following pages provide the descriptions of the funding opportunities available from HHS to Indian Tribes, Indian Organizations, Indian Individuals, Indian Health Centers, Tribally Controlled Universities and/or Indian Urban Centers. Each description is an extrapolation of that contained in the Catalog of Federal Domestic Assistance (CFDA) which can be found on the Internet at the following address: <http://12.46.245.173/cfda/cfda.html>. Funding Opportunities are separated by the Office or Operating Division responsible for receipt of applications.

Each description lists the following information:

- The CFDA number and its corresponding title;
- The federal agency within HHS offering the funding opportunity;
- The objective of the program; the types of assistance (project grant, formula grant, block grant, etc.);
- Uses and Use Restrictions of the program;
- Applicant Eligibility (including tribes or tribal organizations, individual members of Indian tribes, Indian Health Centers, Tribally Controlled Universities or Indian Urban Centers);
- The application procedure;
- The award procedure;
- Deadlines for applications;
- The range of approval/disapproval time of applications;
- The range and average amount of federal assistance;
- Program accomplishments;
- Information contacts including regional and headquarters;
- The agency web site address;
- Examples of funded projects; and
- The criteria for selecting proposals

Grants and Funding Available to Tribes	
Office of the Secretary/Office of Minority Health	29
Administration for Children and Families	61
Administration for Aging	119
Agency for Healthcare Research and Quality	127
Agency for Toxic Substance Disease Registry	131
Centers for Disease Control	145
Centers for Medicare & Medicaid Services	161
Food and Drug Administration	165
Health Resources Service Administration	171
Indian Health Service	191
National Institutes of Health	223
Substance Abuse Mental Health Service Administration	227

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FUNDING OPPORTUNITIES
(Office of the Secretary
Assistant Secretary of Health
Office of Minority Health)

- 93.001 CIVIL RIGHTS AND PRIVACY RULE COMPLIANCE ACTIVITIES
- 93.004 COOPERATIVE AGREEMENTS TO IMPROVE THE HEALTH STATUS OF MINORITY POPULATIONS
- 93.006 STATE AND TERRITORIAL AND TECHNICAL ASSISTANCE CAPACITY DEVELOPMENT MINORITY HIV/AIDS DEMONSTRATION PROGRAM
- 93.012 IMPROVING, ENHANCING, AND EVALUATING OUTCOMES OF COMPREHENSIVE HEART HEALTH CARE PROGRAMS FOR HIGH-RISK WOMEN
- 93.015 HIV PREVENTION PROGRAMS FOR WOMEN
- 93.100 HEALTH DISPARITIES IN MINORITY HEALTH (Health Disparities Grants)
- 93.105 BILINGUAL/BICULTURAL SERVICE DEMONSTRATION
- 93.137 COMMUNITY PROGRAMS TO IMPROVE MINORITY HEALTH GRANT PROGRAM
- 93.260 FAMILY PLANNING-PERSONNEL TRAINING
- 93.294 MENTORING PARTNERSHIP PROGRAM - PROTÉGÉ (Protégé)
- 93.295 INTERGENERATIONAL APPROACHES TO HIV/AIDS PREVENTION EDUCATION WITH WOMEN ACROSS THE LIFESPAN PILOT PROGRAM (Intergenerational)
- 93.910 FAMILY AND COMMUNITY VIOLENCE PREVENTION PROGRAM (Family Life Centers)

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93.001 CIVIL RIGHTS AND PRIVACY RULE COMPLIANCE ACTIVITIES

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	The Office for Civil Rights (OCR) in the U.S. Department of Health and Human Services (HHS) conducts public education, outreach, complaint investigation and resolution and other compliance activities to prevent and eliminate discriminatory barriers, to ensure the privacy of protected health information, and to enhance access to quality HHS-funded programs. OCR ensures that individuals have equal access and the opportunity to participate in, and receive services from, all HHS programs without facing unlawful discrimination on the basis of race, national origin, disability, age, and gender and that the privacy of their health information will be protected. These activities help HHS carry out its overall mission of improving the health and well-being of all people affected by its many programs by protecting their rights of nondiscrimination and privacy.
Types Of Assistance:	Investigation of Complaints; Advisory Services and Counseling.
Uses And Use Restrictions:	<p>The Office for Civil Rights (OCR) in the U.S. Department of Health and Human Services (HHS) is responsible for ensuring that beneficiaries of HHS federally-funded programs receive benefits without discrimination. These benefits are provided through state agencies, nursing homes, skilled nursing facilities, medical laboratories, hospitals, day care centers, social service agencies and other providers. Any person who believes that he or she has been discriminated against in the provision of these services because of race, color, national origin, disability, age, sex or religion, may file a complaint with OCR, HHS. Individuals may also file complaints of sex discrimination in health training programs receiving Federal financial assistance, and complaints of denials of health care for reasons other than the need and availability of services, by recipients of Hill-Burton grants and loans. OCR also has enforcement responsibilities under the Americans with Disabilities Act (ADA) of 1990, and Section 1808 of the Small Business Job protection Act (SBJPA) of 1996. Regarding the ADA, any person who believes that he or she has been denied benefits in health and human services programs and activities conducted by state or local government entities, because of his/her disability, may file a complaint with OCR, HHS.</p> <p>Regarding Section 1808 of the SBJPA, any individual may file a complaint with OCR alleging that an adoption or foster care organization funded by HHS makes placement decisions in violation of Section 1808 of the SBJPA and Title VI of the Civil Rights Act of 1964. The Office will investigate complaints and take steps to ensure compliance with applicable civil rights laws. On April 14, 2003, OCR began enforcing the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. OCR's activities under the Privacy Rule include: investigating complaints and conducting public education, technical assistance and other outreach activities to health care providers, health care clearinghouses and health plans, to ensure that they understand their responsibilities under the Rule; to other entities that may be impacted by the Rule, including Federal, State and local government agencies, researchers, and business associates of covered entities; and to consumers to inform them of their rights under the Privacy Rule. Anyone who believes that a person, agency or organization covered under the HIPAA Privacy Rule ("a covered entity") has violated the Privacy Rule may file a complaint with OCR.</p>
Applicant Eligibility:	Anyone who believes he or she has been discriminated against in the manner out lined above or seeks information concerning civil rights; and recipients of Federal financial assistance who desire technical assistance and information for the purpose of assuring their compliance with nondiscrimination laws.
Application Procedure:	Complaints of discrimination and alleged violations of the HIPAA Privacy Rule may be filed, and technical assistance information and public education requested, at the Headquarters and Regional Office locations of the Office for Civil Rights.
Award Procedure:	Not applicable.
Deadlines:	A complaint must be filed not later than 180 days from the last act of the alleged discrimination, unless the time for filing is waived for good cause. OCR began

	accepting complaints under the HIPAA Privacy Rule on the compliance date of April 14, 2003. Complaints under the Privacy Rule must be filed within 180 days of the date when the complainant knew, or should have known, that the act or omission complained of occurred, unless the time limit is waived for good cause.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	Not applicable.
Program Accomplishments:	<p>As stated above, OCR enforces nondiscrimination and privacy requirements by processing and resolving complaints, conducting compliance reviews, and carrying out voluntary compliance, public education, outreach and technical assistance activities. OCR continues to achieve significant accomplishments in all these areas. In Fiscal Year (FY) 2005: 9,802 individual complaints were filed with OCR (3,046 civil rights discrimination cases and 6,756 Privacy Rule cases); OCR completed action on 8,423 complaint cases (3,038 discrimination and 5,385 Privacy Rule); and OCR completed 3,969 compliance reviews (including pre-grant and post-grant reviews) on its traditional civil rights authorities. Highlights of OCR's major accomplishments in FY 2005 in some of our priority areas are as follows: LIMITED ENGLISH PROFICIENCY. In FY 2005, OCR continued to work with health care and social service providers, state and local agencies, and other HHS components to ensure that limited English proficient (LEP) persons are not discriminated against on the basis of national origin in HHS funded programs (e.g., emergency room care, welfare to work, child protective services, senior centers, and in-home services). We continued our technical assistance, public education and outreach activities in connection with OCR's revised Limited English Proficiency guidance issued in August 2003. Additionally, in partnership with the U.S. Departments of Justice and Agriculture, OCR produced a 35 minute educational video entitled "Title VI Limited English Proficiency," and a "Know Your Rights" brochure, regarding national origin discrimination. These instruments were designed to raise awareness among recipients, LEP persons, and the public regarding the rights of LEP persons to meaningfully access federally supported services. The video and brochure, which are available in different languages and formats, are used by OCR at conferences and meetings with providers and community-based organizations serving LEP populations. MULTI-ETHNIC PLACEMENT ACT (MEPA) / SECTION 1808 -- FOSTER CARE AND ADOPTION SERVICES. OCR continues to strengthen families and create better conditions for children to live in permanent, safe environments through our work to remedy race, color, and national origin discrimination in foster care and adoption. In FY 2005, OCR and the Administration for Children and Families (ACF) worked to implement an agreement with the Ohio Department of Job and Family Services and the Hamilton County Job and Family Services to resolve civil rights violations identified by OCR and ACF regarding discrimination on the basis of race in adoption placements. OCR had determined that Ohio and Hamilton County violated Title VI of the Civil Rights Act of 1964, as well as provisions of MEPA and Section 1808 of the Small Business Job Protection Act of 1996, by making adoption determinations on the basis of race, rather than on the basis of the individual needs of children. As a result of the agreement with OCR and ACF, Ohio is taking numerous actions designed to avoid discriminatory practices. NEW FREEDOM INITIATIVE. OCR is involved in a variety of efforts to increase the independence and quality of life of persons with disabilities, including those with long-term needs. Most notably, OCR has played a critical role in implementation of the Administration's New Freedom Initiative that was announced in February 2001, and implemented through Executive Order (E.O.) 13217 issued on June 19, 2001. The E.O. calls for swift implementation of the Olmstead Supreme Court decision and full enforcement of Title II of the Americans with Disabilities Act through investigations, complaint resolution, and the use of alternative dispute resolution. In FY 2005, OCR created a new web page, "Civil Rights on the Basis of Disability," which acts as a portal to information of interest to persons with disabilities and to providers of health and social services. OCR also maintains a New Freedom Initiative web page, on which it published "Delivering on the Promise: OCR's Compliance Activities Promote Community Integration." This report provides accounts</p>

	<p>of satisfactorily resolved complaints affecting approximately 250 individuals. Also newly available from the OCR website is a 2005 video presentation that provides training on OCR's guidance on Discrimination on the Basis of Disability in the Administration of Temporary Assistance for Needy Families (TANF), which ensures integration of individuals with disabilities in all aspects of a TANF program, including applications, assessments, work program activities, sanctions, and time limits. Through its website, OCR will continue to expand the information available to consumers and providers about the civil rights of persons with disabilities in order to further facilitate the community integration of individuals with disabilities. HIPAA PRIVACY RULE. A major new responsibility given to OCR in December 2000 is protecting the privacy of health information under the Privacy Rule, which was enacted under the Health Insurance Portability and Accountability Act (HIPAA) of 1996. The Rule protects the privacy of individually identifiable health information held by health plans, covered health care providers, and health care clearinghouses. FY 2004 was the first full year during which OCR received and investigated complaints under the Rule. OCR promotes compliance with the Privacy Rule by investigating and resolving complaints, developing policy guidance and public education materials, and providing technical assistance directly to covered entities and members of the public.</p>
Information Contacts	
Regional Or Local Office:	Regional Manager, Office for Civil Rights, HHS Regional Offices. (See Appendix IV of the Catalog for listing.)
Headquarters Office:	Deputy Director, Management Operations Division, Office for Civil Rights, U.S. Department of Health and Human Services, Hubert H. Humphrey Building - Mail Stop Room 509-F6, 200 Independence Ave. SW, Washington, D.C. 20201. Telephone: (202) 619-1333. Director, Office for Civil Rights, Office of the Secretary, U.S. Department of Health and Human Services, Hubert H. Humphrey Building - Mail Stop Room 509 F6, 200 Independence Ave. SW, Washington, D.C. 20201. Telephone: (202) 619-0403. FTS is unavailable. Hotlines: 1-800-368-1019 (voice); 1-800-537-7697 (TDD). Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule information hotline: 1-866-627-7748.
Web Site Address:	http://www.hhs.gov/ocr
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Not applicable.

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93.004 COOPERATIVE AGREEMENTS TO IMPROVE THE HEALTH STATUS OF MINORITY POPULATIONS

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To provide support for activities which have the potential to improve the health status and/or quality of life of racial/ethnic minorities, with the objective of reducing the excessive burden and death borne by minority and disadvantaged populations in the United States.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Funds are to be used for support of projects or activities consistent with the mission of the Office of Minority Health. Funds are not to be used for the provision of health care services, construction, augmentation of on-going Office of Minority Health (OMH) supported demonstrations, or supplementation of on-going project activities.
Applicant Eligibility:	Public and private nonprofit entities may apply. Faith based organizations are eligible to apply.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Accepted applications will be reviewed by a review panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel, the Deputy Assistant Secretary for Minority Health, will make a final decision on funding projects and a notice of grant award will be issued.
Deadlines:	To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.
Range Of Approval/ Disapproval Time:	From 90 to 120 days.
Range And Average Of Financial Assistance:	\$25,000 to \$614,000; \$186,000.
Program Accomplishments:	FY 2005 (9) new awards were issued. In FY 2006 and FY 2007 (9) continuation awards will be supported.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 600, Rockville, MD 20852. Telephone: (240) 453-8444. Grants Management Contact: Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, Telephone (240) 453-8822.
Web Site Address:	http://www.OMHRC.gov .
Examples Of Funded Projects:	The following are examples of activities funded under the cooperative agreements: 1) provide through the establishment of an American Indian Alaska Native Research Network a

	<p>means by which American Indian and Alaskan Native researchers can network, collaborate and seek support; 2) to educate and increase provider sensitivity about cultural practices and their influence on patient compliance with medication and therapeutic treatment interventions; and 3) reduce the prenatal HIV transmission among African American women of child bearing age and their care providers through health promotion and education.</p>
<p>Criteria For Selecting Proposals:</p>	<p>Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan; 3) strength of proposed grant organization's management capability; 4) adequacy of qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.</p>

93.006 STATE AND TERRITORIAL AND TECHNICAL ASSISTANCE CAPACITY DEVELOPMENT MINORITY HIV/AIDS DEMONSTRATION PROGRAM

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To demonstrate that the involvement of State and Territorial Offices of Minority Health in coordinating a statewide response to the HIV/AIDS crisis in minority communities can have a greater impact on the communities' understanding of the disease, and the coordination of prevention and treatment services for minority populations, than agencies and/or organizations working independently; and to stimulate and foster the development of effective and durable service delivery capacity for HIV prevention and treatment among organizations closely linked with the minority populations.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds are to be used to support minority-targeted health education and prevention strategies which will help to eliminate or reduce the risk for acquiring or transmitting HIV/AIDS and increase access to services and treatment; and to provide technical assistance and capacity development to community based minority-serving organizations to enhance their delivery capacity for HIV/AIDS prevention and treatment. Funds are not to be used for the provision of health care services, construction, augmentation of ongoing Office of Minority Health (OMH) supported demonstrations, or to supplant ongoing project activities.
Applicant Eligibility:	Community based, minority-serving organizations.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Accepted applications will be reviewed by a panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel, the Deputy Assistant Secretary for Minority Health, will make a final decision on funding projects and a notice of grant award will be issued.
Deadlines:	To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.

Range Of Approval/ Disapproval Time:	Approximately 90 to 120 days from the application deadline date.
Range And Average Of Financial Assistance:	\$144,127 to \$1,200,000; \$430,649.
Program Accomplishments:	In FY 05 17 new awards were issued and 5 continuation awards. In FY 06 and FY 07 17 continuation awards will be supported.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852. Telephone: (240) 453-8444. Grants Management Contact: Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, Telephone (240) 453-8822.
Web Site Address:	http://www.omhrc.gov .
Examples Of Funded Projects:	The following are examples of activities funded under this program: 1) identification of the needs of minority populations, facilitation of linkages between minority community based organizations to develop greater resource capacity, and coordinating federal resources through a needs assessment, mobilization of ethno-specific community coalitions, and minority linkage conferences; 2) using Geographic Information System mapping to explore the correlation between HIV/AIDS distribution and identified socioeconomic indicators, and employing epidemiological data to determine areas of highest need, profiling local and state minority community based organizations and making the information available on the Internet, and disseminating data and other HIV/AIDS related information via the Internet; and 3) conducting needs assessment, training workshops and seminar for minority community based organization staff and board members in diverse planning and management skills, and developing a pool of consultants with technical assistance and cultural/linguistic competence.
Criteria For Selecting Proposals:	Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan; 3) strength of proposed grant organization's management capability; 4) adequacy of qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.

93.012 IMPROVING, ENHANCING, AND EVALUATING OUTCOMES OF COMPREHENSIVE HEART HEALTH CARE PROGRAMS FOR HIGH-RISK WOMEN

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To provide funding to improve and enhance existing women's heart health care programs in hospitals, clinics, and/or health centers and to enable the programs to track and evaluate outcome data. Each grantee shall enhance an existing women's heart health care program so that it provides a continuum of heart health care services through the integration of the following five interrelated components: Education and Awareness, Screening and Risk Assessment, Diagnostic Testing and Treatment, Lifestyle Modification and Rehabilitation, and Tracking and Evaluation. Grantees shall also target high-risk women in at least one of the following groups: women aged 60 years or older, racial and ethnic minority women, and/or women who live in rural communities. These programs will offer comprehensive heart health care services that are women-centered, culturally competent, multi-disciplinary, continuous and integrated. The goal of these programs will be to reduce heart disease mortality and morbidity among women and to increase the number of high-risk women who receive quality heart health care, including education, prevention, screening, diagnosis, treatment and rehabilitation. These programs will be demonstration projects; as such, they will provide the evidence necessary to evaluate whether comprehensive women's heart health care programs are effective in improving heart disease outcomes in high-risk women.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Funds may be used to cover costs of: personnel; consultants; grant related office supplies and software; grant related travel (domestic only); educational, promotional and evaluation materials; and other grant related costs. Funds should be used to strengthen infrastructure, track and evaluate outcome data, conduct community outreach and educational activities, improve the coordination and continuity of care, and reduce fragmentation of heart health care services that already exist within the health care facility. For example, funds can be used to hire a program coordinator, set up a data tracking system, acquire or produce educational materials, etc. Funds shall not be used to fund direct health care services or equipment for patients (e.g. diagnostic tests, screening equipment, treatment, etc.). Also, funds may not be used for: building alterations or renovations, construction, screening supplies or equipment, incentives and prizes, food, fund raising activities, political education and lobbying, and other activities that are not grant related.
Applicant Eligibility:	Native American tribal organizations and organizations serving rural or frontier communities are also encouraged to apply.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not

	conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Applications will be screened upon receipt. Those that are judged to be incomplete or arrive after the deadline will be returned without review or comment. If funding is requested in an amount greater than the ceiling of the award range (\$150,000 for a 12-month budget period), the application will be considered nonresponsive and will not be entered into the review process. The application will be returned with notification that it did not meet the submission requirements. Applicants that are judged to be in compliance will be notified by the OPHS Office of Grants Management. Accepted applications will be reviewed for technical merit in accordance with DHHS policies. Applications will be evaluated by a technical review panel composed of experts in the fields of program management, heart disease and health care, community outreach and health education, and community-based research. Consideration for award will be given to applicants that best demonstrate the potential to design a program that achieves the program goals stated in this announcement. The federal government may conduct pre-award site visits of applicants with scores in the funding range prior to final selection. Funding decisions will be made by the DHHS Office on Women's Health (OWH), and will take into consideration the recommendations and ratings of the review panel, pre-award site visits, program needs, geographic location, and stated preferences. To increase the likelihood of funding organizations serving rural or frontier communities and/or Native American tribal organizations, OWH will award 5 bonus points to applicants meeting these criteria.
Deadlines:	To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.
Range Of Approval/ Disapproval Time:	Approximately 50 days from the application deadline date.
Range And Average Of Financial Assistance:	up to \$150,000 (direct and indirect costs).
Program Accomplishments:	Award 6 grants in FY 05, and 6 continuation awards in FY 06.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Questions regarding programmatic information and/or requests for technical assistance in the preparation of the "Project Narrative" should be directed to: Dr. Suzanne Haynes, Senior Science Advisor, Office on Women's Health, US Department of Health and Human Services, 200 Independence Avenue, SW, Rm. 719E, Washington, DC 20201, E-mail: shaynes@osophs.dhhs.gov . For application kits and information on budget and business aspects, please contact: Ms. Karen Campbell, Director, OPHS Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20857, Telephone: 240-453-8822, E-mail: kcampbell@osophs.dhhs.gov .
Web Site Address:	http://www.4woman.gov/owh .
Examples Of Funded Projects:	None.
Criteria For Selecting	Applications will be reviewed using the following criteria: (A) The Program

<p>Proposals:</p>	<p>Plan (30 points) evaluated by rating the applicant's approach to accomplishing each of the requirements identified in the funding opportunity description of the federal register notice; (B) The Statement of Need (20 points) evaluated by rating the applicant's demonstrated need for improving, enhancing, and evaluating outcomes of the women's heart health care program; (C) The Experience and Commitment of Key Personnel (20 points) evaluated by rating the qualifications of key personnel proposed to perform the work and the amount of effort estimated for each person; (D) The Management Plan (20 points) evaluated by rating the effectiveness of the applicant's staffing, scheduling, and logistics plans and the applicant's ability to achieve the program goals within the time frames set-forth. (E) Past Performance (10 points) evaluated by considering the number, size, complexity, and success of similar projects that the applicant has previously successfully implemented. Accepted applications will be reviewed for technical merit in accordance with DHHS policies. Applications will be evaluated by a technical review panel composed of experts in the fields of program management, heart disease and health care, community outreach and health education, and community-based research. Consideration for award will be given to applicants that best demonstrate the potential to design a program that achieves the program goals. The federal government may conduct pre-award site visits of applicants with scores in the funding range prior to final selection. Funding decisions will be made by the DHHS Office on Women's Health (OWH), and will take into consideration the recommendations and ratings of the review panel, pre-award site visits, program needs, geographic location, and stated preferences. To increase the likelihood of funding organizations serving rural or frontier communities and/or Native American tribal organizations, OWH will award 5 bonus points to applicants meeting these criteria.</p>
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93.015 HIV PREVENTION PROGRAMS FOR WOMEN

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	<p>HIV Prevention for Women Living in the Rural South: 1.) Increase knowledge of accurate HIV prevention information among women living in rural communities in the south. 2.) Improve and increase access to quality HIV prevention services to women living with or at high risk for HIV infection in rural communities in the south. 3.) Improve receptivity to and awareness of HIV prevention education, necessary to reduce the stigma among women in rural southern communities. 4.) Increase the number of women living in the rural south, who voluntarily receiving HIV testing.</p> <p>HIV Prevention for Young Women Attending Minority Institutions: 1.) Increase on campus activities targeting women at risk for HIV infection. 2.) Improve HIV prevention education efforts involving women on campus. 3.) Increase knowledge base of accurate HIV/STD prevention information among women attending minority institutions. 4.) Improve access to HIV health related services for women attending minority institutions.</p> <p>HIV Prevention for Women Living in the Rural and Frontier Indian Country: 1.) Increase knowledge of accurate HIV prevention information among women living in Indian Country. 2.) Improve and increase access to quality HIV prevention services to women living with or at high risk for HIV infection in rural and frontier Indian Country. 3.) Improve receptivity to and awareness of HIV prevention education necessary to reduce the stigma among women in rural and frontier Indian Country. 4.) Increase the number of women living in rural and frontier Indian Country, who voluntarily receiving HIV testing.</p> <p>HIV Prevention for Women Incarcerated and Newly Released: 1.) Increase the number of incarcerated women receiving pre-release discharge planning, particularly those who are living with HIV or at high risk for HIV infection. 2.) Increase the number of HIV infected incarcerated women who are connected to drug assistance programs, medical care, and case management services prior to release or at time of release. 3.) Increase the number of community linkages and networks for ensuring continuum of care for incarcerated and newly released women living with or at high risk for HIV in locations with high rates of HIV infections and incarcerated populations. 4.) Increase the number of newly released women receiving support services and HIV care six months post release.</p> <p>HIV Prevention for Women Living in the U.S. Virgin Islands & Puerto Rico: 1.) Increase access to quality care and treatment for women living with HIV infection. 2.) Improve and increase access to secondary HIV prevention services to women living with HIV infection and primary prevention for those women at risk for infection. 3.) Increase understanding of living with HIV, disease management, and treatment adherence. 4.) Increase community support activities for women living with HIV and their families.</p>
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Funds may be used to cover costs of: personnel; consultants; grant related office supplies and software; grant related travel (domestic only); educational, promotional and evaluation materials; and other grant related costs. Funds shall not be used to fund direct health care services or equipment for patients (e.g. diagnostic tests, screening equipment, treatment, etc.). Also, funds may not be used for: building alterations or renovations, construction, screening supplies or equipment, incentives and prizes, food, fund raising activities, political education and lobbying, and other activities that are not grant related.
Applicant Eligibility:	A Tribal College or University; a Native American Tribal Organization
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen

	<p>Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm. The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov.</p>
Award Procedure:	<p>Applications will be screened upon receipt. Those that are judged to be incomplete or arrive after the deadline will be returned without comment. Accepted applications will be reviewed for technical merit in accordance with PHS policies. Applications will be evaluated by a technical review panel composed of experts. Funding decisions will be determined by the Director, Division for Policy and Program Development, Office on Women's Health and will take into consideration the recommendations and ratings of the review panel; program needs, stated preferences; geographic location; and recommendations of DHHS Regional Women's Health Coordinators.</p>
Deadlines:	<p>To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.</p>
Range Of Approval/ Disapproval Time:	<p>Approximately 90 days from the application deadline date.</p>
Range And Average Of Financial Assistance:	<p>This is a new program therefore the number of awards and the amounts are specified in the announcement published in the Federal Register, pending availability of funds.</p>
Program Accomplishments:	<p>1.) Develop and implement the model described in the application. 2.) Provide complete curricula, i.e., topics, content, participant workbook, participant evaluation forms, pre/post instruments, and goals/objectives. 3.) Describe training, teaching methods and strategies, e.g., interactive exercises, facilitated discussion, lectures, video/films, community peers, etc., proposed to deliver modules. Describe the intervention format: one time session, series of sessions occurring beyond one day, one day session, etc. 4.) Conduct outreach to local entities and community representatives. Identify locations for prevention education sites and identify community liaisons for assistance in identifying prospective women participants. 5.) Establish community partnerships through Memoranda of Understanding. 6.) Participate in the OWH Evaluation of HIV/AIDS program, submitting requested data as needed as well as participating in a site visit conducted by Evaluation Contractor. 7.) Participate in special meetings and projects/funding opportunities identified by the OWH. 8.) Adhere to all program requirements specified in this announcement and the Notice of Grant Award. 9.) Submit required quarterly progress, annual, and financial</p>

	reports by the due dates stated in this announcement and the Notice of Grant Award. 10.) Comply with the DHHS Protection of Human Subjects regulations (45 CFR Part 46), which require obtaining Institutional Review Board (IRB) approval, if applicable.
Information Contacts	
Regional Or Local Office:	None. For questions regarding programmatic information and/or requests for technical assistance in the preparation of grant applications contact the Program Office. Program Contact: Office on Women's Health, Ms. Mary Bowers, Division of Policy and Program Development, Office on Women's Health, Hubert H. Humphrey Building, Room 712E, Washington D.C. 20201, email: mbowers@osophs.dhhs.gov. For technical assistance on budget and business aspects of the application may be obtained from the Office of Grants Management. Contact the Office of Public Health and Science, Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, or phone at (240) 453-8822.
Headquarters Office:	Office on Women's Health, Department of Health and Human Services, 200 Independence Avenue, SW, Room 712E, Washington, DC 20201.
Web Site Address:	http://www.4woman.gov/owh
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	The applicant must be a Public College or University; a Historically Black College or University; a Hispanic Serving Institution; a Tribal College or University; a Private Non-Profit Community-Based Organization; a Native American Tribal Organization; and/or a Faith-Based Community Organization serving underserved women. Small businesses or organizations not in an official partnership with a qualified institution are not eligible for funding under this announcement. For specific details see the full announcement published in the Federal Register.

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93.100 HEALTH DISPARITIES IN MINORITY HEALTH (Health Disparities Grants)

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To support the elimination of health disparities among racial and ethnic populations through local small-scaled projects which address a demonstrated health problem or health issue.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds are to be used for support of projects or activities consistent with the mission of the Office of Minority Health of the U.S. Public Health Service and the purpose of the Health Disparities Grant program. Funds are not to be used for the provision of health care, for construction, or to supplant ongoing project activities.
Applicant Eligibility:	Private nonprofit community-based minority serving organizations may apply.
Application Procedure:	Requests for the standard PHS application form (SF PHS 1561-1, Revised July 2000) and instructions for submission should be directed to Ms. Karen Campbell, Director, Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20853, Telephone (301) 594-0758. A signed original and two copies of the application are to be sent to the above address. Applications are screened upon receipt for completeness, responsiveness and conformance to the program announcement. Those applications judged to be unacceptable based on this initial screening will be returned.
Award Procedure:	Accepted applications will be reviewed by a review panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel, the Deputy Assistant Secretary for Minority Health, will make a final decision on funding projects and a notice of grant award will be issued.
Deadlines:	Contact Headquarter Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	From 90 to 120 days.
Range And Average Of Financial Assistance:	\$30,028 to \$50,000; \$49,146.
Program Accomplishments:	In fiscal year 2003, 17 new awards were made. 47 continuation awards were funded in fiscal year 04. FY 05 will support non-competing applications only. This is the final year for this program.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852. Telephone: (301) 594-0769. Grants Management Contact: Ms. Karen Campbell, Director, Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, Telephone (301) 594-0758.
Web Site Address:	http://www.omhrc.gov .
Examples Of Funded Projects:	Increasing knowledge of diabetes among African American community residents and improving skills necessary for the maintenance of diabetes through workshops, dissemination of health information and participation in health fairs; improving the health status of American Indians at risk for or diagnosed with cardiovascular disease and/or diabetes through fitness activities and an educational component; and reducing teen pregnancy and HIV/STDs among young Latinos by increasing parents knowledge of the conditions and promoting inter-generational communication skills between Latino parents and children about sexuality and family planning issues.
Criteria For Selecting Proposals:	Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan; 3) strength of proposed grant organization's management capability; 4) adequacy of

	qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.
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93.105 BILINGUAL/BICULTURAL SERVICE DEMONSTRATION

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To improve and expand the capacity for linguistic and cultural competence of health care professionals and paraprofessionals working with Limited-English-Proficient (LEP) minority communities and improve the accessibility and utilization of health care services among the LEP minority populations.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds are to be used to support projects that provide bilingual/bicultural assistance in the delivery of health services for minority populations. Funds are not to be used for the provision of health care services, construction, augmentation of ongoing Office of Minority Health (OMH) supported demonstrations, or supplantation of on-going project activities.
Applicant Eligibility:	Public and private nonprofit minority community-based organizations or health care facilities serving a targeted LEP minority community may apply.
Application Procedure:	Requests for the standard PHS application form (SF PHS 1561-1, Revised July 2000) and instructions for submission should be directed to Ms. Karen Campbell, Director, Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20853, Telephone (301) 594-0758. A signed original and two copies of the application are to be sent to the above address. Applications are screened upon receipt for completeness, responsiveness and conformance to the program announcement. Those applications judged to be unacceptable based on this initial screening will be returned.
Award Procedure:	Accepted applications will be reviewed by a review panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel, the Deputy Assistant Secretary for Minority Health, will make a final decision on funding projects and a notice of grant award will be issued.
Deadlines:	Contact Headquarters Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	From 90 to 120 days.
Range And Average Of Financial Assistance:	\$100,000 to \$200,000; \$150,000.
Program Accomplishments:	FY 05 - 16 new awards were made, FY 2006 and 2007 will support continuation awards only.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 600, Rockville, MD 20852, or phone at (240) 453-8444. For technical assistance on budget and business aspects of the application may be obtained from the Office of Grants Management. Contact the Office of Public Health and Science, Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, or phone at (240) 453-8822.
Web Site Address:	http://www.omhrc.gov .
Examples Of Funded Projects:	1) Reducing linguistic and cultural barriers which exist between Hispanic patients and health care providers through language and cultural training sessions; 2) developing and implementing a case management and education program that targets specific groups of limited-English-speaking Asians and Pacific Islanders; 3) assessing the health status of Chinese, Vietnamese, Cambodian, and Laotian seniors; providing lectures on Asian health care needs and specific health resources, and providing bilingual and bicultural translators and interpreters; and increasing knowledge and awareness about managed care and its implications.
Criteria For Selecting Proposals:	Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan;

	3) strength of proposed grant organization's management capability; 4) adequacy of qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.
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93.137 COMMUNITY PROGRAMS TO IMPROVE MINORITY HEALTH GRANT PROGRAM

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To support minority community health coalitions to develop, implement, and conduct demonstration projects which coordinate integrated community-based screening and out reach services, and include linkages for access and treatment to minorities in high-risk, low-income communities; and to support minority community health coalitions involving nontraditional partners in carrying out projects to increase the educational understanding of HIV/AIDS, increase testing, and improve access to HIV/AIDS prevention and treatment serious.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds are to be used to conduct collaborative efforts to modify the behavioral and/or environmental conditions which are implicated in the health problems of minority groups: for example, cancer; cardiovascular disease and stroke; chemical dependency; diabetes; homicide, suicide, and unintentional injuries; infant mortality; human immunodeficiency virus (HIV) infection and acquired immunodeficiency syndrome (AIDS). These projects are to address socio-cultural and linguistic barriers to care and should have the potential for replication in similar communities. Funds are not to be used for the provision of health care services, construction, augmentation of ongoing Office of Minority Health (OMH) supported demonstrations, or to supplant ongoing project activities.
Applicant Eligibility:	Members of minority groups: American Indians or Alaska Natives;
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Accepted applications will be reviewed by a review panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel, the Deputy Assistant Secretary for Minority Health, will make a final decision on funding projects and a notice of grant award will be issued.
Deadlines:	To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.

Range Of Approval/ Disapproval Time:	Approximately 90 to 120 days from the application deadline date.
Range And Average Of Financial Assistance:	\$181,266 to \$270,000; \$200,000.
Program Accomplishments:	In FY 2005 24 continuation awards were made and 17 new earmark grants were awarded. In FY 2006 and FY 2007 24 continuation awards will be funded and approx. 15 new earmark grants will be awarded.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852. Telephone: (240) 453-8444. Grants Management Contact: Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, Telephone (240) 453-8822.
Web Site Address:	http://www.omhrc.gov .
Examples Of Funded Projects:	The following are examples of activities funded under this program; 1) Developing a program to prevent the incidence, increase the diagnosis and improve the management of childhood asthma through educational sessions, screenings, events, case management and ongoing support; 2) conducting vision assessment, eye health education and referral to eye doctors, disseminating health education materials in 7 languages, and providing diabetes screening, counseling and referral; and 3) developing outreach and education activities, complemented by efforts of faith-based organizations, to address HIV in the African American community.
Criteria For Selecting Proposals:	Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan; 3) strength of proposed grant organization's management capability; 4) adequacy of qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.

93.260 FAMILY PLANNING-PERSONNEL TRAINING

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To provide job specific training for personnel to improve the delivery of family planning services.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grants are awarded to provide training to Title X project staffs; to improve utilization and career development of paraprofessional and paramedical manpower in family planning services, particularly in rural areas. Funds may not be used in programs where abortion is a method of family planning.
Applicant Eligibility:	Any public entity (including city, county, local, regional, or State government) or nonprofit private entity located in a State
Application Procedure:	Applications and instructions may be obtained from the Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Rockville, MD 20853, Telephone (301) 594-0758. The standard application forms, as furnished by PHS and required by 45 CFR 74 (for institutions of higher education, hospitals and other non-profit organizations), and 45 CFR 92 (for state and local governments), must be used for this program. This program is subject to the provisions of 45 CFR 74, and 45 CFR 92, as well as OMB Circular No. A-102 (Administrative Guidelines and Standards for States and Local Governments), and OMB Circular No. A-110 (administrative guidelines and standards for institutions of higher education, hospitals, and other non-profit organizations).
Award Procedure:	The Regional Health Administrator, DHHS, makes the final decision(s) to approve, hold, or reject individual applications. Applicants are notified regarding the final decision on each application. All projects funded are issued a Notice of Grant Award.
Deadlines:	To be announced.
Range Of Approval/ Disapproval Time:	From 90 to 180 days.
Range And Average Of Financial Assistance:	\$238,000 to \$472,000; \$355,000.
Program Accomplishments:	Support was given to 11 family planning training grantees in fiscal year 2005, and 2006, and estimated for 2007.
Information Contacts	
Regional Or Local Office:	Regional Health Administrator, DHHS Regional Offices. (See Appendix IV of the Catalog for addresses.)
Headquarters Office:	Program Contact: Ms. Susan Moskosky, Director, Office of Family Planning, Office of Population Affairs, Department of Health and Human Services, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852. Telephone: (240) 453-2888. Grants Management Contact: Karen Campbell, Director, Office of Grants Management, Office of Public Health and Science, Department of Health and Human Services, 1101 Wootton Parkway, Suite 550, Rockville, MD 20853, Telephone (240) 453-8822.
Web Site Address:	http://www.opa.osophs.dhhs.gov .
Examples Of Funded Projects:	(1) Short-term family planning personnel training; (2) brief workshops on specific topics; and (3) family planning/women's health specialty training continuing education course for health care practitioners.
Criteria For Selecting Proposals:	Proposals will be evaluated to determine which would best promote the purposes of the authorizing legislation, taking into account: (1) The increase in delivery of services to people, particularly low-income groups, with a high percentage of unmet need for family planning services; (2) the promise of the program to fulfill the family planning services needs of the area to be served; (3) capacity to use assistance rapidly and effectively; (4) the administrative and management capability and competence of the applicant; (5) competence of the project staff; and (6) compliance with pertinent regulations and guidelines.

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93.294 MENTORING PARTNERSHIP PROGRAM - PROTÉGÉ (Protégé)

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	The purpose of the Mentoring Partnership Program - Protégé is to strengthen the organizational infrastructure and program services of small nonprofit organizations so they may deliver improved HIV/AIDS prevention and support services to women most at risk for acquiring HIV/AIDS and women with positive HIV serostatus. With a sound infrastructure and culturally competent, gender-focused program services, women will increase their HIV prevention knowledge and reduce the risk of contracting HIV. The goals of the program are: -- For Protégé or nonprofit community-based, faith-based, and women's service organizations to gain skills and be prepared to compete for Federal and private funding before the program period ends; and for Protégé or nonprofit community-based, faith-based, and women's service organizations to increase the number of women at risk for or living with HIV/AIDS served with culturally competent, gender-focused, evidence-based program services.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	A majority of the funds from the award must be used to support staff and efforts aimed at implementing the program. Funds may be used for supplies (including screening, education, and outreach supplies); local travel to perform duties of the funded HIV/AIDS prevention program; and out-of town travel (required training at one national and one regional HIV/AIDS prevention conference). Funds may not be used for construction, building alterations, equipment, medical treatment, or renovations. All budget requests must be justified fully in terms of the proposed goals and objectives and include an itemized computational explanation/breakout of how costs were determined.
Applicant Eligibility:	Tribal government agencies and tribal/urban Indian organizations.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS eGrants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS eGrants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Applications will be screened upon receipt. Those that are judged to be incomplete or arrive after the deadline will be returned without comment. Accepted applications will be reviewed for technical merit in accordance with PHS policies. Applications will be evaluated by a technical review panel composed of experts. Funding decisions will be determined by the Director, Division for Policy and Program Development, Office on Women's Health and will take into consideration the recommendations and ratings of the review panel; program needs, stated preferences; geographic location; and recommendations of DHHS Regional Women's Health Coordinators.
Deadlines:	Approximately 90 days from the application deadline date.
Range Of Approval/	Approximately 90 days from the application deadline date.

Disapproval Time:	
Range And Average Of Financial Assistance:	OWH anticipates making four cooperative agreement awards. Approximately \$200,000 is available to make four awards of up to \$50,000 each. It is expected that the award will cover costs for the 12month period from September 1, 2006 through August 31, 2007. Funding estimates may change.
Program Accomplishments:	Protégé grantee be paired with a certified small business or mentors with expertise in designing tailor-made capacity building training for organization infrastructure (fiscal management, human resources, governance); data management and technology development; and gender-focused programmatic development and implementation (including evaluation and monitoring); and women's health, particularly HIV/AIDS prevention services for women at high risk for or living with HIV/AIDS; and, have developed a mentoring partnership approach offering protégé the opportunity to receive training and gain skills to adapt evidence-based HIV/AIDS prevention curricula to improve program services to women disproportionately impacted by HIV/AIDS.
Information Contacts	
Regional Or Local Office:	None.
Headquarters Office:	Office on Women's Health Department of Health and Human Services, 200 Independence Avenue, SW Room 712E, Washington, DC 20201. For questions regarding programmatic information and/or requests for technical assistance in the preparation of the grant application should be directed to: Ms. Joanna Short, Public Health Advisor, Division of Policy and Program Development Office on Women's Health, OPHS, DHHS, Hubert H. Humphrey Building, Room 733E, 200 Independence Avenue, SW., Washington, DC 20201. Telephone: (202) 260-8420. e-mail: jshort@osophs.dhhs.gov. For budget and business aspects of the application, please contact: Mr. Eric West, Associate Grants Management Officer, Grants Management Office, OPHS, DHHS, 1101 Wootton Parkway, Suite 550, Rockville, MD 20857. Telephone: 240-453-8822.
Web Site Address:	http://www.4woman.gov/owh
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	To receive consideration, applications must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS), no later than June 22, 2006. Application Review Information: the technical review of applications will consider the following factors: Factor 1: Background/Understanding of the Problem (25%); Factor 2: Implementation/Approach (25%); Factor 3: Management Plan (25%); and Factor 4: Indicators of Success (25%).

93.295 INTERGENERATIONAL APPROACHES TO HIV/AIDS PREVENTION EDUCATION WITH WOMEN ACROSS THE LIFESPAN PILOT PROGRAM (Intergenerational)

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	The objectives of the program are for African American, Native American/ American Indian, Hispanic/Latino, and Asian/Pacific Islander women and other female members of the family 12+ years old to: -know their serostatus; -increase their knowledge of HIV/AIDS prevention; -gain competencies in cross-generational communications about health in general and sexual health specifically; and connect with a primary healthcare physician (and navigate other systems of care).
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	A majority of the funds from the award must be used to support staff and efforts aimed at implementing the program. Funds may be used for supplies (including screening, education, and outreach supplies); local travel to perform duties at the funded HIV/AIDS prevention program; and out-of-town travel (required training at one national and one regional HIV/AIDS prevention conference). Funds may not be used for construction, building alterations, equipment, medical treatment, or renovations. All budget requests must be justified fully in terms of the proposed goals and objectives and include an itemized computational explanation/ breakout of how costs were determined.
Applicant Eligibility:	tribal government agencies and tribal/urban Indian organizations.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS eGrants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS eGrants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Applications will be screened upon receipt. Those that are judged to be incomplete or arrive after the deadline will be returned without comment. Accepted applications will be reviewed for technical merit in accordance with PHS policies. Applications will be evaluated by a technical review panel composed of experts. Funding decisions will be determined by the Director, Division for Policy and Program Development, Office on Women's Health and will take into consideration the recommendations and ratings of the review panel; program needs, stated preferences; geographic location; and recommendations of DHHS Regional Women's Health Coordinators.
Deadlines:	Approximately 90 days from the application deadline date.
Range Of Approval/ Disapproval Time:	Approximately 90 days from the application deadline date.
Range And Average Of Financial Assistance:	OWH anticipates making four cooperative agreement awards. Approximately \$1,000,000 is available to make four awards of up to \$250,000 each. It is expected that the award will cover costs for the period September 1, 2006 through August 31, 2007. Funding estimates may change.

Program Accomplishments:	To teach cross-generations of women how to develop healthy communication patterns built on caring, trusting familial relationships. To equip women to give accurate information about their sexual health issues by incorporating gender-focused, culturally competent, and linguistically-appropriate HIV/AIDS prevention information.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Office on Women's Health, Department of Health and Human Services, 200 Independence Avenue, SW Room 712E, Washington, DC 20201. For questions regarding programmatic information and/or requests for technical assistance in the preparation of the grant application should be directed to: Ms. Joanna Short, Public Health Advisor, Division of Policy and Program Development Office on Women's Health, OPHS, DHHS, Hubert H. Humphrey Building, Room 733E, 200 Independence Avenue, SW., Washington, DC 20201. Telephone: (202) 260-8420. E-mail: jshort@osophs.dhhs.gov. For budget and business aspects of the application, please contact: Mr. Eric West, Associate Grants Management Officer, Grants Management Office, OPHS, DHHS, 1101 Wootton Parkway, Suite 550, Rockville, MD 20857. Telephone: (240)-453- 8822.
Web Site Address:	http://www.4woman.gov/owh
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	To receive consideration, the applications must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS), no later than July 31, 2006. Application Review Information Criteria: The technical review of applications will consider the following (4) factors: Factor 1: Background/Understanding of the Problem (30%), Factor 2: Implementation /Approach (25%), Factor 3: Management Plan (25%), and Factor 4: Evaluation Plan (20%). For specific details see the full announcement published in the Federal Register.

93.910 FAMILY AND COMMUNITY VIOLENCE PREVENTION PROGRAM (Family Life Centers)

Federal Agency:	OFFICE OF THE SECRETARY
Objectives:	To establish Family Life Centers on the campuses of 24 minority institutions of higher education to: 1) Assess local community resources for violence prevention projects; 2) Coordinate activities with existing violence prevention projects; 3) Design and implement educational interventions addressing interpersonal family violence; and 4) Design and implement a project to identify students from dysfunctional families and support them with coping strategies.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds will be used to support a cooperative agreement for a family and community violence program to prevent minority related violence and improve health and human services to minorities. Funds are not to be used for the provision of health care services, construction, augmentation of ongoing Office of Minority Health (OMH) supported demonstrations, or supplantation of ongoing project activities.
Applicant Eligibility:	Eligible Applicants: An institute of higher education representing 4-year undergraduate institutions and a 2 year tribal college historically identified as providing education primarily to minority students, or having a majority enrollment of minority students.
Application Procedure:	Application kits may be requested by calling 240-453-8822 or writing to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS) Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications should be submitted to: Ms. Karen Campbell, Director, Office of Public Health and Science (OPHS), Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. Applications must be prepared using Form OPHS-1. This form is available in Adobe Acrobat format at the following website: http://www.cdc.gov/od/pgo/forminfo.htm . The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. Applicants will receive notification via mail from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS Office of Grants Management after the deadlines will not be accepted for review and will be returned to the applicant unread. The submission deadline will not be extended. Applications which do not conform to the requirements of the grant announcement will not be accepted for review and will be returned to the applicant. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the OPHS e-Grants system or the Grants.gov Web site Portal is encouraged. Information about this system is available on the OPHS e-Grants Web site, https://egrants.osophs.dhhs.gov .
Award Procedure:	Accepted applications will be reviewed by a review panel that will make recommendations on the technical merit based on the published criteria. After considering the recommendations of the panel. The Deputy Assistant Secretary for Minority Health makes final decisions to approve, hold, or reject individual grants or contracts. Applicants are notified regarding the final decision on each application and are furnished with a Notice of Grant Award for all projects approved.
Deadlines:	To be considered for review, applications must be submitted by the established due date. Applications not meeting the deadline will be considered late and will be returned to the applicant unread.
Range Of Approval/ Disapproval Time:	About 60 days.
Range And Average Of Financial Assistance:	Cooperative Agreements: \$7,400,000.
Program Accomplishments:	In fiscal year 2003, one continuation award was issued to the same institute representing 24 participants. It is estimated that one continuation award with 26 participants will be made in fiscal year 2004. In fiscal year 2005 and fiscal year 2006, it is anticipated that one continuation award will be issued with 26 participants.

Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Cynthia H. Amis, Director, Division of Program Operations, Office of Minority Health, Office of Public Health and Science, Office of the Secretary, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852. Telephone: (240) 453-8444. Grants Management Contact: Office of Grants Management, Office of Public Health and Science, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, Telephone (240) 453-8822.
Web Site Address:	http://www.fcvp.org .
Examples Of Funded Projects:	The following are examples of projects funded under the cooperative agreement: 1) A database and resource directory was developed on viable violence and substance abuse services and resources; 2) A variety of education experiences were provided to youth and families to assist them in making positive life style choices and facilitating their educational pursuits; and 3) Community outreach services were provided to neighborhoods.
Criteria For Selecting Proposals:	Complete review criteria are published in the Federal Register Notice or can be obtained from the Program contact. Listed below are some criteria used to review applications: 1) consistency of project's goals and objectives with the Office of Minority Health's mission; 2) coherence and feasibility of methodology and activities selected to address the problem as evidence in the proposed implementation plan; 3) strength of proposed grant organization's management capability; 4) adequacy of qualifications, experience and cultural competence of proposed personnel; and 5) strength of analysis of potential impact or innovation the project proposes to generate.



FUNDING OPPORTUNITIES

93.009	COMPASSION CAPITAL FUND (CCF)
93.010	COMMUNITY-BASED ABSTINENCE EDUCATION (CBAE)
93.087	ENHANCE THE SAFETY OF CHILDREN AFFECTED BY PARENTAL METHAMPHETAMINE OR OTHER SUBSTANCE ABUSE
93.551	ABANDONED INFANTS
93.556	PROMOTING SAFE AND STABLE FAMILIES
93.558	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)
93.563	CHILD SUPPORT ENFORCEMENT
93.568	LOW-INCOME HOME ENERGY ASSISTANCE
93.569	COMMUNITY SERVICES BLOCK GRANT
93.575	CHILD CARE AND DEVELOPMENT BLOCK GRANT (Child Care and Development Fund (CCDF))
93.581	IMPROVING THE CAPABILITY OF INDIAN TRIBAL GOVERNMENTS TO REGULATE ENVIRONMENTAL QUALITY
93.582	MITIGATION OF ENVIRONMENTAL IMPACTS TO INDIAN LANDS DUE TO DEPARTMENT OF DEFENSE ACTIVITIES
93.587	PROMOTE THE SURVIVAL AND CONTINUING VITALITY OF NATIVE AMERICAN LANGUAGES
93.592	FAMILY VIOLENCE PREVENTION AND SERVICES/GRANTS FOR BATTERED WOMEN'S SHELTERS DISCRETIONARY GRANTS
93.593	JOB OPPORTUNITIES FOR LOW-INCOME INDIVIDUALS (JOLI Program)
93.594	TRIBAL WORK GRANTS (Native Employment Works; NEW)
93.596	CHILD CARE MANDATORY AND MATCHING FUNDS OF THE CHILD CARE AND DEVELOPMENT FUND (Child Care and Development Fund (CCDF))
93.600	HEAD START
93.601	CHILD SUPPORT ENFORCEMENT DEMONSTRATIONS AND HEAD START SPECIAL PROJECTS
93.602	ASSETS FOR INDEPENDENCE DEMONSTRATION PROGRAM (Assets for Independence)
93.612	NATIVE AMERICAN PROGRAMS
93.616	MENTORING CHILDREN OF PRISONERS (MCP)
93.623	BASIC CENTER GRANT (BCP)
93.670	CHILD ABUSE AND NEGLECT DISCRETIONARY ACTIVITIES
93.671	FAMILY VIOLENCE PREVENTION AND SERVICES/GRANTS FOR BATTERED WOMEN'S SHELTERS GRANTS TO STATES AND INDIAN TRIBES

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93.009 COMPASSION CAPITAL FUND (CCF)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide grants to charitable organizations to emulate model social service programs and to encourage research on the best practices of social service organizations. This is accomplished through the goal of assisting faith-based and community organizations to increase their effectiveness, enhance their ability to provide social services, expand their organizations, diversify their funding sources, and create collaborations to better serve those most in need. This is accomplished by funding experienced intermediary organizations in well-defined geographic locations with a proven track record of providing technical assistance to smaller faith-based and community organizations in their communities, as well as providing one-time \$50,000 grants to smaller faith-based and community organizations to build their capacity.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	<p>Intermediary organizations use the CCF funds to provide two services within their communities: 1) Technical assistance to faith-based and community organizations; and 2) Financial support through sub-awards to some subset of the faith-based and community organizations in their communities. Technical assistance activities funded under CCF are to be conducted at no cost to interested faith-based and community organizations. Applicants must have demonstrated experience in the delivery of capacity-building assistance to smaller organizations in several of the following areas: strategic planning, financial management, board development, fund development, and outcome measurement. Technical assistance should be provided on a long-term, on-going basis to smaller organizations. The program goals would be further accomplished through the issuance of sub-awards by the funded intermediary organizations to a diverse set of small faith-based organizations that seek to increase program and organizations effectiveness for a 12-month period. Sub-Award recipients must adhere to the following: sub-award recipients must be chosen from fair and open competitive process; sub-award recipients must not be pre-selected; the awarding process must be fair and open competition and include outreach to both faith-based and community organizations; intermediary reorganizations must provide on-going technical assistance and capacity-building support to the organizations to which they issue sub-awards; and the criteria for selection must not include consideration of the religious nature of the program it offers. Priority for sub-awards is given to organizations that historically have not received grants from the Federal government. Intermediaries must not require sub-award applicants to provide matching funds even if the applicants offer matching funds in their applications. Intermediaries must not require sub-award applicants to have 501 (c) (3) status or to identify a sponsoring organization with 501 (c) (3) status; Organizations that partner with an intermediary to deliver technical assistance or provide a cost-sharing fund for the proposed project are not to be eligible for sub-awards, unless approved by the Administration for Children and families; Sub-awards should not be used to assist organizations in differing stages of development. Sub-awards may also be provided to promising organizations to expand the reach of existing programs; Sub-awards must not be used to provide direct services, but rather improve the sub-awardee's efficiency and capacity. Organizations who receive the targeted capacity building funds (mini-grants) are able to use the funds to improve their organization in a sustainable way by increasing effectiveness and sustainability, enhancing their ability to provide social services, expanding their organization, diversifying funding sources, and emulating model programs and best practices. They must use the awards to increase efficiency and capacity; therefore, the awards cannot be used to augment or supplant direct service delivery funds. The Office of Community Services (OCS) will not fund any project, either demonstration or targeted capacity building, where the role of the applicant is primarily to serve as a conduit for funds to organizations other than the applicant. The applicant must have a substantive role in the implementation of the project for which funding is requested. This prohibition does not bar the making of sub-grants or subcontracting for specific services or activities needed to conduct the project.</p>

	<p>CCF monies shall not be used to support inherently religious practices such as religious instruction, worship, or proselytization. Grant or sub-award recipients, therefore, may not and will not be selected based on religious criteria. Neutral, non-religious criteria that neither favor nor disfavor religion must be employed in a selection of a grantee and sub-award recipients. n t must have a substantive role in the implementation of the project for which funding is requested. This prohibition does not bar the making of sub-grants or sub-contracting for specific services or activities needed to conduct the project. CCF monies shall not be used to support inherently religious practices such as religious instruction, worship, or proselytization. Grant or sub-award recipients, therefore, may not and will not be selected based on religious criteria. Neutral, non-religious criteria that neither favor nor disfavor religion must be employed in a selection of a grantee and sub-award recipients.</p>
Applicant Eligibility	<p>(Intermediaries): Native American tribal governments (Federally recognized), (Mini-Grants): Native American Tribal governments (Federally recognized).</p>
Application Procedure:	<p>The application must be double-spaced and single-spaced on 8-1/2 x 11 plain white paper, with 1 inch margins on all sides. The application must use Times New Roman 12 point font or Arial 12 point font. All pages of the application (including appendices, resumes, charts, references/footnotes, tables, maps and exhibits) must be sequentially numbered. Each application may include only one proposed project. For the intermediary applications, the Project Narrative including Table of Contents must not exceed 25 pages in the application project narrative sections. There is a 5-page limit to any additional supporting documentation, including letters of support. The project description should include all the information requirements described in the specific evaluation criteria outlined in the program announcement. In addition, the applicant needs to complete all the standard forms required for making applications for awards under this announcement. Applicants requesting financial assistance for non-construction projects must file the Standard Form 424B, Assurances: Non-Construction Programs. Applicants must sign and return the Standard Form 424B with their applications. Applicants must disclose lobbying activities on the Standard Form LLL when applying for an award in excess of \$100,000. Applicants must sign and return the certification with their applications. They must also fill out Standard Forms 424 and 424A and the associated certifications and assurances based on the instructions on the forms. Private, non-profit organizations are encouraged to submit with their applications the survey located under Grant Related Documents and Firms titled Survey for Private, Nonprofit Grant Applicants. For the mini-grant applications, the Project Narrative, including the Table of Contents, must not exceed 8 pages. Pages submitted beyond the first 8 in the application Project Narrative section and Table of Contents will be removed prior to panel review. The Narrative Budget Justification, Standard Forms for Assurances, Certifications, Disclosures and appendices and the cost-share letters are not included in this limitation, yet applicants are urged to be concise. Any additional supporting documentation, including letters of support and appendixes must not exceed 5 pages. The project description should include all the information requirements described in the specific evaluation criteria outlined in the program announcement. In addition, the applicant needs to complete all the standard forms required for making applications for wards under this announcement. Applicants requesting financial assistance for non-construction projects must file the Standard Form 424B, Assurances: Non-Construction Programs. Applicants must sign and return the Standard Form 424B with their applications. Applicants must disclose lobbying activities on the Standard Form LLL when applying for an award in excess of \$100,000. Applicants must sign and return the certification with their applications. They must also fill out Standard Forms 424 and 424A and the associated certifications and assurances based on the instructions on the forms. Private, nonprofit organizations are encouraged to submit with their applications the survey located under Grant Related Documents and Firms titled Survey for Private, Nonprofit Grant Applicants.</p>
Award Procedure:	<p>Applications received by the due date will be reviewed and scored competitively. Experts in the field, generally persons from outside the Federal government, will use the evaluation criteria listed in Part V of the Program Announcement to review and</p>

	score the applications. The results of the review will be a primary factor in making funding decisions. ACF may also solicit comments from Regional Office staff and other Federal agencies. ACF may consider a variety of factors in addition to the review criteria identified above, including geographic diversity/coverage and types of applicant organizations, in order to ensure that the interests of the Federal Government are met in making the final selections. Furthermore, ACF may limit the number of awards made to the same or affiliated organizations although they would service different geographic areas. The successful applicants will be notified through issuance of a Financial Assistance Award document which sets forth the amount of funds granted, the terms and conditions of the grant, the budget period for which initial support will be given, the nonfederal share to be provided, and the total project period for which support is contemplated. The financial Assistance Award will be signed by the Grants Officer.
Deadlines:	Deadlines for grants are announced in www.grants.gov , as part of the solicitation of applicants.
Range Of Approval/ Disapproval Time:	30 - 60 days.
Range And Average Of Financial Assistance:	\$50,000 to \$100,000; \$500,000.
Program Accomplishments:	In FY 2002, CCF's first year of operation, a total of \$24.7 million was awarded to 21 intermediary organizations. These intermediary organizations gave over \$10 million in sub-awards to over 550 grassroots faith-based and community organizations implementing programs that address the needs of the homeless, elderly, at-risk youth, families in transition from welfare to work, and those in need of intensive rehabilitation such as addicts or prisoners. Also awards were made to organizations that provide marriage education and preparation services to help couples develop the skills and knowledge to form and sustain healthy marriages. In FY 2003, second year awards were made to the existing 21 intermediary organizations. \$5.6 million was awarded to ten new intermediary organizations. In addition, fifty-two \$50,000 awards were made to faith-based and community organizations addressing the needs of at-risk youth and the homeless. In FY 2004, Congress appropriated \$47.7 million for CCF. CCF funded 14 new intermediary organizations and 102 mini-grants. In FY 2005, Congress appropriated \$54.5 million for CCF. CCF funded 24 continuation awards, 33 new awards to intermediary organizations and 200 mini-grants.
Information Contacts	
Regional Or Local Office:	Program Manager, Office of Community Services (OCS), Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, 5th Floor West, Washington, DC 20447. Contact: Kelly Cowles (202) 260-2583 (office); (202) 401-4839 (fax).
Headquarters Office:	Program Manager, Office of Community Services (OCS), Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, 5th Floor West, Washington, DC 20447. Contact: Kelly Cowles (202) 260-2583 (office); (202) 401-4839 (fax). Email Address: KCowles@acf.hhs.gov
Web Site Address:	
Examples Of Funded Projects:	The CCF Demonstration Program has funded intermediary organizations that serve as a bridge between the Federal government and the faith-based and community organizations that the program is designed to assist. Intermediary organizations provide two services to faith-based and community organizations: training and technical assistance and capacity-building sub-awards. The CCF Targeted Capacity Building Program has funded faith-based and community organizations with one time, \$50,000 awards to increase their capacity to serve targeted social service priority areas.
Criteria For Selecting Proposals:	Criteria used for selecting Intermediary Organizations: Intermediary organizations are evaluated on the following criteria: approach, objectives and need for assistance, organizational profiles, and budget and budget justification. The technical assistance strategy, sub-award strategy, and geographic location are all factors in evaluation the approach of the applicant. The needs of faith-based and community organizations to be served and the needs of communities served are factors for evaluating the objectives and need for assistance of the applicant. The staff and position data and

	<p>past experience are factors used to evaluate the organizational profile of the applicant. Applicants will be evaluated under the budget and budget justification criteria on the extent to which they include a budget that is clear, easy to understand, and provides a detailed justification for the amount requested. Criteria used for selecting targeted capacity building grant recipients: Mini-Grant applications are evaluated on the following criteria: approach, organizational profiles, results or benefits expected, objectives and need for assistance, and budget and budget justification. The factors considered under the approach criterion are the capacity-building strategy and the geographic location. Under the organizational profile criterion, the staff and position data and past experience working in priority social service area(s) are the two factors used for evaluation. Under the results and benefits expected criterion, applicants are evaluated on the extent to which the specific goals of the project and the results and benefits proposed by the applicant are reasonable and likely, quantified, and clearly linked to and supported by the proposed capacity-building approach. Under the objectives and need for assistance criterion, applications are evaluated on the extent to which the objectives of the proposed project are clearly stated and shown to address the needs of the organization. Under the budgets and budget justification criterion, applications are evaluated based on the extent to which they include a budget that is clear, easy to understand, and that provides a detailed justification for the amount requested.</p>
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93.010 COMMUNITY-BASED ABSTINENCE EDUCATION (CBAE)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide funding to public and private institutions for community-based abstinence education project grants. The project grant's objective is to reduce out-of-wedlock childbearing and sexually-transmitted diseases by teaching abstinence to adolescents ages 12 through 18 and by creating an environment within communities that support decisions to postpone sexual activity. To meet these objectives, grantees must incorporate the abstinence education definitions identified in Sections (A) through (H) in Section 510 of the Social Security Act.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	For the purpose of Section 510, the term "Abstinence Education" means an educational or motivational program which (a) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity; (b) teaches abstinence from sexual activity outside marriage as the expected standard for all school age children; (c) teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems; (d) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity; (e) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects; (f) teaches that bearing children out of wedlock is likely to have harmful consequences for that child, the child's parents, and society; (g) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and (h) teaches the importance of attaining self-sufficiency before engaging in sexual activity.
Applicant Eligibility:	Native American Tribal governments (Federally recognized); public housing authorities/Indian housing authorities; Native American Tribal organizations (other than Federally recognized Tribal governments);
Application Procedure:	Application for Federal Assistance, Standard Form 424 must be submitted. Specific instructions are published via the Internet at the following website address: http://www.acf.hhs.gov/grants/index.html .
Award Procedure:	All applications are reviewed by a panel of nonfederal experts that assigns scores according to the published criteria. The panel's scores are factored into the recommendations for funding. Scores and recommendations are reviewed by the Associate Commissioner of the Family and Youth Services Bureau. Recommendations are made to the ACYF Commissioner, who makes the final funding decisions.
Deadlines:	As specified in the announcement or application instructions.
Range Of Approval/ Disapproval Time:	From 60 to 90 days.
Range And Average Of Financial Assistance:	\$250,000 to \$600,000; \$425,000.
Program Accomplishments:	In FY 2005, 143 grants were awarded and in FY 2006, 152 grants were awarded. It is anticipated that 202 grants will be awarded in FY 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Central Office Contacts and Program Contact: Mr. Stanley Koutstaal, U.S. Department of Health and Human Services; Family and Youth Services Bureau; 1250 Maryland Ave., SW, Washington, DC 20024. Grants Management, Financial Management Specialist; U.S. Department of Health and Human Services, Administration for Children and Families, Office of Administration; Office of Grants Management, Division of Discretionary Grants, 370 L'Enfant Promenade, SW, Washington, DC 20447.
Web Site Address:	http://www.acf.hhs.gov/programs/fysb

Examples Of Funded Projects:	Examples of funded projects may be requested through the Family and Youth Services Bureau.
Criteria For Selecting Proposals:	Applications will be evaluated based upon the criteria published in the Funding Opportunity Announcement located on the following website address: http://www.acf.hhs.gov/grants/grants_fysb.html .

93.087 ENHANCE THE SAFETY OF CHILDREN AFFECTED BY PARENTAL METHAMPHETAMINE OR OTHER SUBSTANCE ABUSE

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide, through interagency collaboration and integration of programs activities and services that are designed to increase the well-being of, improve permanency outcomes for, and enhance the safety of children who are in an out-of-home placement or are at risk of being placed in an out-of-home placement as a result of a parent's or caretaker's methamphetamine or other substance abuse.
Types Of Assistance:	Project Grants (Contracts)
Uses And Use Restrictions:	Grants are provided for services or activities that are consistent with the purpose of section 437(f) of Title IV-B of the Social Security Act and may include the following: (1) family-based comprehensive long-term substance abuse treatment services; (2) early intervention and preventative services; (3) children and family counseling; (4) mental health services; (5) parenting skills training; (6) replication of successful models for providing family-based comprehensive long-term substance abuse treatment services. Other suggested activities and services are listed in the program announcement.
Applicant Eligibility:	Indian/Native American Tribal governments (Federally recognized), Indian/Native American Tribal organizations (other than Federally recognized), Indian/Native American Tribally Designated Organizations, Tribally Controlled Colleges and Universities (TCCUs), Alaska Native and Native Hawaiian Serving Institutions. The program announcement lists a variety of non-tribal organizations that are also eligible applicants. The regional partnership MUST include either the State child welfare agency that is responsible for the administration of the State plan under title IV-B or title IV-E of the Social Security Act or if an Indian tribe or tribal consortium, at least one non-tribal entity. The regional partnership may NOT consist of only State entities.
Application Procedure:	Announcement of availability of funds is published in the Federal Register. Eligible applicants submit applications by specified deadlines.
Award Procedure:	Grant applications are reviewed by a panel of non-federal professionals with expertise in the fields of child welfare and substance abuse treatment. Final decisions are made by the Commissioner, Administration for Children, Youth and Families (ACYF).
Deadlines:	Deadlines change from year to year. Each program announcement provides specific deadline information. Contact Headquarters Office for details. This program is a 3-5 year program and will not be announced again until the next reauthorization of Promoting Safe and Stable Families Legislation.
Range of Approval/ Disapproval Time:	From 3 to 6 months.
Range and Average of Financial Assistance:	\$500,000 to \$1,000,000.
Program Accomplishments:	None. New program.
Information Contacts	
Regional or Local Office:	Not applicable.
Headquarters Office:	Catherine Nolan, Director, Office on Child Abuse and Neglect, Children's Bureau, 1250 Maryland Avenue SW., Washington, DC 20024, 8th Floor. Telephone: (202) 260-5140. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/cb
Examples Of Funded Projects:	None. New Program.
Criteria For Selecting Proposals:	Applications are evaluated on the basis of the degree to which proposals meet specific objectives defined in the program announcement including, but not limited to: (1) demonstration of regional impact of methamphetamine or other substance abuse; (2) organizational capacity to collaborate with other service providers; and (3) relevance of proposed services and activities in enhancing the well-being of children in foster care or at risk of foster care due to a parent or caretaker's substance abuse.

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93.550 TRANSITIONAL LIVING FOR HOMELESS YOUTH

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	The overall purpose of the Transitional Living Program (TLP) for Homeless Youth is to establish and operate transitional living projects for homeless youth, including pregnant and parenting youth. This program is structured to help older homeless youth achieve self-sufficiency and avoid long-term dependency on social services. Transitional living projects provide shelter, skills training, and support services to homeless youth, including pregnant and parenting youth, ages 16 through 21 for a continuous period not exceeding 18 months.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Transitional Living Programs are required to provide youth with stable, safe living accommodations and services that help them develop the skills necessary to move to independence. Living accommodations may be host family homes, or "supervised apartments." (Supervised apartments are either agency-owned apartment buildings or "scattered site" apartments, which are single-occupancy apartments rented directly by young people with support from the agency.)
Applicant Eligibility:	Federally recognized Tribes are eligible to apply for grants; non-Federally recognized Tribes and urban Indian organizations are eligible to apply as private, nonprofit agencies
Application Procedure:	Application for Federal Assistance, Standard Form 424 must be submitted. Specific instructions are published via the Internet at the following website address: http://www.acf.hhs.gov/grants/index.html .
Award Procedure:	All applications are reviewed by a panel of nonfederal experts, which assigns scores according to the published criteria. The panel's scores are factored into the recommendations for funding. Scores and recommendations are reviewed by the Associate Commissioner of the Family and Youth Services Bureau, who makes recommendations to the ACYF Commissioner, who makes the final funding decisions.
Deadlines:	As specified in the announcement or application instructions.
Range Of Approval/ Disapproval Time:	From 60 to 90 days.
Range And Average Of Financial Assistance:	\$100,000 to \$200,000; \$150,000
Program Accomplishments:	In fiscal year 2005, 207 grants were awarded. It is estimated that 207 grants will be awarded in fiscal year 2006. It is estimated that 193 grants will be awarded in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Contact: Regional Administrator, Administration for Children and Families, Regional Offices. (See Appendix IV of this Catalog for the addresses of the Regional Offices.)
Headquarters Office:	Associate Commissioner, Family and Youth Services Bureau, Administration for Children and Families, 330 C Street, SW, Washington, DC 20447. Contact: Deborah Yatsko, Tribal Liaison. Telephone: (202) 205-8102.
Web Site Address:	http://www.acf.hhs.gov/programs/fysb .
Examples Of Funded Projects:	In fiscal years 2005, 207 grants were awarded. In fiscal year 2006 it is anticipated that 207 grants will be awarded and 193 grants will be awarded in FY 2006
Criteria For Selecting Proposals:	Applications will be evaluated based upon the criteria published in the Funding Opportunity Announcement located on the following website address: http://www.acf.hhs.gov/grants/grants_fysb.html .

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93.551 ABANDONED INFANTS

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To develop, implement and operate projects that demonstrate how to: (1) Prevent the abandonment of infants and young children exposed to HIV/AIDS and drugs, including the provision of services to family members for any conditions that increased the probability of abandonment of an infant or young child; (2) identify and address the needs of abandoned infants, especially those born with AIDS and those exposed to drugs; (3) assist these children to reside with their natural families, if possible, or in foster care; (4) recruit, train and retain foster parents; (5) carry out residential care programs for abandoned children and children with AIDS; (6) establish programs of respite care for families and foster families; (7) recruit and train health and social services personnel to work with families, foster families and residential care staff; and (8) prevent the abandonment of infants and young children by providing needed resources through model programs. This program also funds technical assistance, including training, with respect to the planning, development and operation of the projects.
Types Of Assistance:	Project Grants (Discretionary).
Uses And Use Restrictions:	Funds may be used to accomplish any of the stated program objectives.
Applicant Eligibility:	federally- recognized Indian Tribal governments;
Application Procedure:	Application procedure can be obtained at: http://www.acf.hhs.gov/grants/index.html or by contacting Headquarters Office, listed below, for application information.
Award Procedure:	Review is conducted by at least three non-federal professionals. Final funding decision will be made by Commissioner, ACYF.
Deadlines:	Application deadlines can be obtained via the web at http://www.ACF.HHS.gov/grants/index.html , or by contacting Headquarters Office, listed below.
Range Of Approval/ Disapproval Time:	From 60 to 180 days.
Range And Average Of Financial Assistance:	The range of award amounts is from \$100,000 to \$475,000; The average award is \$450,000.
Program Accomplishments:	In fiscal year 2005 there were 31 grant awards. In FY 2006 there will be 31 grants awarded. In FY 2007 there will be approximately 31 grants awarded.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Children's Bureau, 1250 Maryland Avenue, SW, Washington, DC 20024, 8th Floor. Contact: Patricia Campiglia. Telephone: (202) 205-8060
Web Site Address:	http://www.acf.hhs.gov/programs/cb .
Examples Of Funded Projects:	Demonstration projects designed to prevent the abandonment of drug-affected and HIV positive infants and young children; to maintain family stability and to reunify and strengthen families impacted by substance abuse and HIV/AIDS; service demonstration projects designed to provide comprehensive, coordinated and community-based social support services to clients in a location accessible to the target population; training projects designed to train a wide range of service providers, including health care, social service and substance abuse treatment professionals, case management and permanency planning staff, hospital, respite care providers, biological parents and caregiving relatives, and foster and adoptive parents; To provide support for family caregivers and provide therapeutic services in a recreational setting for HIV-infected or affected children and young people.
Criteria For Selecting Proposals:	Contact Headquarters Office for specific criteria.

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93.556 PROMOTING SAFE AND STABLE FAMILIES

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	PSSF funds are used to fund four basic programs: 1) family preservation – programs and family support programs that serve families at risk or in crisis including the following services: preplacement/preventive services, follow-up services after return of a child from foster care, respite care, services designed to improve parenting skills; 2) community-based family support services that promote the safety and well-being of children and families, to afford children a safe, stable and supportive family environment, to strengthen parental relationships and promote healthy marriages, and otherwise to enhance child development; 3) time-limited family reunification services to facilitate the reunification of the child safely and appropriately within a timely fashion; 4) adoption promotion and support services designed to encourage more adoptions out of the foster care system, when adoption, promotes the best interests of the child. A small proportion of appropriated funds is reserved for research, evaluation and technical assistance, which may be awarded competitively through contracts or discretionary grants.
Types Of Assistance:	Formula Grants; Project Grants (Discretionary).
Uses And Use Restrictions:	For Formula Grants, a significant portion of funds must be spent on each of the service categories of family preservation, family support services, time-limited family reunification services and adoption promotion and support services. Grantees must limit administrative expenditures to 10 percent of their allotment. Discretionary Grants: Grants are awarded for research, evaluation and technical assistance activities relating to family support, family preservation, time-limited family reunification and adoption promotion support.
Applicant Eligibility:	(1)Formula Grants: States, Territories and certain Indian Tribes and Tribal consortia are eligible applicants. (2)Discretionary Grants: States, local governments, tribes, public agencies or private agencies or organizations (or combinations of such agencies or organizations) with expertise in providing, evaluating and/or providing technical assistance related to family preservation, family support , time-limited family reunification and adoption promotion and support.
Application Procedure:	Application Procedure (1) Formula Grants: A 5-year State plan must be submitted. The plan must be jointly developed by the Secretary and the State or Indian Tribe and written after consultation by the agency with appropriate public and non-profit private agencies and community-based organizations. The plan must coordinate the provision of services under Title IV-B with services under other Federal or federally-assisted programs serving the same populations. (2) Discretionary Grants: Announcement of availability of funds is published in the Federal Register. Eligible applicants submit applications by specified deadlines.
Award Procedure:	(1) Formula Grants: Funds will be approved after the State plan, or annual update is submitted and approved.(2) Discretionary Grants: Grant applications are reviewed by a panel of non-federal professionals with expertise in child and family services, evaluation and related fields. Final decisions are made by the Commissioner, Administration for Children, Youth, and Families (ACYF). Contract proposals are reviewed by a panel of Federal Staff.
Deadlines:	(1) Formula Grants: States, Territories and Indian Tribes are encouraged to submit applications in accordance with Departmental requirements. Contact Headquarters Office listed below for information. (2)Discretionary Grants: Deadlines change from year to year. Each program announcement provides specific deadline information. Contact headquarters Office for details.
Range Of Approval/ Disapproval Time:	Range of Approval/Disapproval Time (1) Formula Grants: The State plan or its annual update is due June 30 of each year. Approval/disapproval is due September 30 of each year. (2) Discretionary Grants: From 3 to 6 months.
Range And Average Of Financial Assistance:	In FY 2005, an allotment to a state ranged from \$437,470 to \$43,424,375; Tribes received from \$10,198 to \$910,697. Discretionary grant awards range from \$100,000 to \$700,000 with the average award being \$250,000 for FY 05, FY 06 and FY 07.
Program	There were 89 grants awarded in fiscal year 2005. It is anticipated that to

Accomplishments:	81 grants will be awarded in fiscal year 2006 and fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Consult Regional Administrators, Administration for Children and Families. (See Appendix IV of the Catalog for listing.)
Headquarters Office:	Headquarters Office: Joseph Bock, Deputy Associate Commissioner, Children's Bureau, 1250 Maryland Avenue, S.W., Washington, DC 20024. Telephone: (202) 205-8618 FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/cb .
Examples Of Funded Projects:	Not applicable for Formula Grants. For Discretionary Grants: Evaluations of Existing Family Support, Family Preservation, Reunification, or Adoption promotion and Support Grants; national Resource Center for Family-Centered Practice and Permanency planning; Projects to Develop Programs to Strengthen Marriages.
Criteria For Selecting Proposals:	Not applicable.

93.557 EDUCATION AND PREVENTION GRANTS TO REDUCE SEXUAL ABUSE OF RUNAWAY, HOMELESS AND STREET YOUTH, (Street Outreach Program - SOP)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	The Street Outreach Program (SOP) makes grants available to nonprofit agencies for the purpose of providing street-based services to runaway, homeless and street youth, who have been subjected to, or are at risk of being subjected to, sexual abuse, prostitution, or sexual exploitation.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions	Provide education and prevention services to runaway, homeless and street youth that have been subjected to or at risk of sexual exploitation or abuse. Establish and build relationships between street youth and program outreach staff to help youth leave the streets.
Applicant Eligibility:	Non-federally recognized Indian Tribes and urban Indian organizations are eligible to apply for grants as private, nonprofit agencies: (Note: Public agencies are not eligible.)
Application Procedure:	Application for Federal Assistance, Standard Form 424 must be submitted. Specific instructions are published via the Internet at the following website address: http://www.acf.hhs.gov/grants/index.html .
Award Procedure:	All applications are reviewed by a panel of nonfederal experts that assigns scores according to the published criteria. The panel's scores are factored into the recommendations for funding. Scores and recommendations are reviewed by the Associate Commissioner of the Family and Youth Services Bureau. Recommendations are made to the ACYF Commissioner, who makes the final funding decisions.
Deadlines:	Application deadlines can be obtained via the Internet at the following website address: http://www.acf.hhs.gov/grants/grants_fysb.html .
Range Of Approval/ Disapproval Time:	From 60 to 90 days.
Range And Average Of Financial Assistance:	\$100,000 per year to a maximum of \$300,000 for a 3-year project.
Program Accomplishments:	In fiscal year 2005, 146 grants were awarded. It is anticipated that 140 grants will be awarded in fiscal years 2006 and 2007.
Information Contacts:	
Regional Or Local Office:	Contact: Regional Administrator, Administration for Children and Family Regional Offices. (See Appendix IV of this Catalog for the addresses of the Regional Offices.)
Headquarters Office:	Associate Commissioner, Family and Youth Services Bureau, Administration for Children and Families, 330 C Street, SW., Washington, DC 20447. Contact: Deborah Yatsko, Tribal Liaison. Telephone: (202) 205-8102.
Web Site Address:	http://www.acf.hhs.gov/programs/fysb
Examples Of Funded Projects:	In fiscal year 2005, 146 projects provided services for street-based education and outreach, emergency shelter, survival aid, individual assessment, treatment and counseling prevention and education activities, information and referral, crisis intervention, and follow-up support. It is anticipated that 140 grants will be awarded in fiscal years 2006 and 2007.

Criteria For Selecting Proposals:

Applications will be evaluated based upon the criteria published in the Funding Opportunity Announcement located on the following website address: http://www.acf.hhs.gov/grants/grants_fysb.html. Organizations with experience in providing services to homeless youth are given priority.

93.558 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide grants to States, Territories, or Tribes to assist needy families with children so that children can be cared for in their own homes; to reduce dependency by promoting job preparation, work, and marriage; to reduce and prevent out-of-wedlock pregnancies; and to encourage the formation and maintenance of two-parent families.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	States, Territories, or Tribes have broad flexibility to use the grant funds in any manner that meets the purposes of the program (including providing low-income households with assistance in meeting home heating and cooling costs) and in ways that the State, Territory and Tribe was authorized to use funds received under the predecessor Aid to Families with Dependent Children (AFDC), Job Opportunities and Basic Skills Training (JOBS) and Emergency Assistance (EA) programs. States and Territories may also transfer a limited portion of their assistance grant funds to the Child Care and Development Block Grant (CCDBG) and Social Services Block Grant (SSBG) Programs. Not more than 15 percent of any State grant may be spent on administrative costs, exclusive of certain computerization and information technology expenses. Cash grants, work opportunities and other services are made directly to needy families with children. For Tribal programs, ACF will negotiate a limitation on administrative costs for the first year of the program's operation not to exceed 35 percent, for the second year of the program's operation not to exceed 30 percent, and for the third and subsequent years of the program's operation not to exceed 25 percent.
Applicant Eligibility:	federally-recognized Tribes in the lower 48 States and 13 specified entities in Alaska are eligible.
Application Procedure:	Each State plan, including the certifications signed by the Executive Officer (Governor), must be submitted to the Secretary of HHS. Tribes should contact the ACF Regional Administrators for Tribal plan submittal procedures. For Contingency Funds, each State must request contingency funds monthly for each month they meet either the unemployment or food stamp triggers.
Award Procedure:	Once a plan is determined complete, or in the case of a Tribe the plan is approved, by the DHHS, Family Assistance Grants are awarded in quarterly payments. Contingency awards will be made monthly.
Deadlines:	A State must have implemented a TANF program by July 1, 1997. Tribal programs do not face a specific application deadline. For contingency funds, requests must be submitted 15 days after eligibility has been determined.
Range Of Approval/ Disapproval Time:	States, Territories and Tribes implement their assistance programs according to their State and Tribal plans. The Secretary does not have authority to approve or disapprove a State plan, only to determine its completeness. Tribal plans are subject to approval by the Secretary. For Contingency funds, approval/disapproval will be from 30 to 60 days after receipt of request for funds.
Range And Average Of Financial Assistance:	State Family Assistance Grants are from \$21,781,446 to \$3,733,817,784. Tribal Family Assistance Grants range from \$77,195 to \$31,174,026.
Program Accomplishments:	Grants were made to 50 States, the District of Columbia, 3 territories, and 55 tribes in fiscal year 2007. While the number of grants to States, the District of Columbia and the territories remains constant, the number of tribal plans has increased each fiscal year. It is estimated that the number of tribal plans will increase to 64 during FY 2008.
Information Contacts	
Regional Or Local Office:	States, Territories and Tribes should contact the Administration for Children and Families (ACF) Regional Offices. (See Appendix IV of the Catalog.)
Headquarters Office:	For all grants: Office of the Director, Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services, 5th Floor, Aerospace Building, 370 L'Enfant Promenade, SW., Washington, DC 20447.
Web Site Address:	State TANF: http://www.acf.dhhs.gov/program/ofa/ ; Tribal TANF: http://www.acf.dhhs.gov/programs/dts .

Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Not applicable.

93.563 CHILD SUPPORT ENFORCEMENT

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To enforce the support obligations owed by absent parents to their children, locate absent parents, establish paternity, and obtain child, spousal and medical support.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	States and some tribes provide support enforcement services directly to individuals who are receiving federally-funded Foster Care Maintenance Payments, Medicaid, Temporary Assistance to Needy Families (TANF) (or those who cease to receive TANF), and to individuals not otherwise eligible for such services. TANF, Medicaid, and certain federally-funded Foster Care applicants or recipients must have assigned support rights to the State. Non-TANF individuals other than those who cease to receive TANF and/or who provide authorization to the IV-D agency to continue support enforcement services, must have signed a written application for support enforcement services. The State must provide services to locate absent parents, establish paternity and enforce support obligations.
Applicant Eligibility:	Tribes are eligible and we currently have twelve tribal child support programs.
Application Procedure:	Applications are made in the form of a State Plan, prepared in the format provided by the Office of Child Support Enforcement. This program is excluded from coverage under OMB Circular No. A-110.
Award Procedure:	States are awarded funds quarterly based on their estimates of funds needed to provide support enforcement services to individuals eligible under an approved Title IV-D State plan.
Deadlines:	State estimates must be submitted 60 days prior to the period of the estimate.
Range Of Approval/ Disapproval Time:	State Plans and amendments submitted as new State Plans, and Plan amendments may require up to 90 days for approval.
Range And Average Of Financial Assistance:	In FY 05, from \$868,222,019 to \$1,707,428; \$75,620,199; FY 06, from \$864,277,713 to \$1,699,671; \$74,804,444; FY 07, from \$861,860,932 to \$1,694,918; \$75,391,889.
Program Accomplishments:	In all fiscal years, 54 grants are expected to be awarded to States. Tribal programs received \$12,502,341 in FY 2005; estimated \$17,000,000 in FY 2006; and estimated \$30,000,000 in FY 2007. Child Support collections were \$23 billion in FY 2005, estimated \$24 billion in FY 2006; and estimated \$25 billion in FY 2007.
Information Contacts	
Regional Or Local Office:	Regional Representative, Department of Health and Human Services. (See Appendix IV of the Catalog for addresses and telephone numbers.)
Headquarters Office:	Lionel J. Adams, Director, Division of Special Support Enforcement, Department of Health and Human Services, 4th Floor, 370 L'Enfant Promenade, SW., Washington, DC 20447. Telephone: (202) 260-1527. FTS is not available.
Web Site Address:	http://www.acf.dhhs.gov/programs/cse .
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Not applicable.

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93.568 LOW-INCOME HOME ENERGY ASSISTANCE

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	Energy Assistance Block Grants: To make Low Income Home Energy Assistance Program (LIHEAP) grants available to States and other jurisdictions to assist eligible households to meet the costs of home energy. Supplemental Leveraging Incentive Funds may be awarded to reward States and other jurisdictions that provide additional benefits and services to LIHEAP-eligible households beyond what could be provided with Federal funds. Up to 25 percent of the leveraging incentive funds may be set aside for LIHEAP grantees that provide services through community-based nonprofit organizations to help LIHEAP-eligible households reduce their energy vulnerability under the Residential Energy Assistance Challenge Option Program (REACH). Training and Technical Assistance: To provide training and technical assistance to States and other jurisdictions administering the LIHEAP block grant program.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Energy Assistance Block Grants: Funds are awarded to States and other jurisdictions, which then make payments directly to an eligible low-income household or, on behalf of such household, to an energy supplier to assist in meeting the cost of home energy. Up to 10 percent of these funds may be used for State and local planning and administration. Up to 15 percent may be used for low-cost residential weatherization. Grantees may request that DHHS grant a waiver for the fiscal year that increases from 15 percent to 25 percent funds that can be allotted for residential weatherization. Depending upon specific appropriations, DHHS may allocate supplemental LIHEAP leveraging incentive funds to grantees that have acquired nonfederal leveraged resources in order to provide additional benefits and services to LIHEAP-eligible households to help them meet their home heating and cooling needs. Up to 25 percent of leveraging incentive funds may be allocated by DHHS to LIHEAP grantees that provide services through community-based nonprofit organizations to LIHEAP-eligible households to reduce their energy vulnerability, under the Residential Energy Assistance Challenge Program (REACH). Up to \$600,000,000 is authorized as emergency contingency funds to be used to meet additional needs arising from a natural disaster or other emergency. Such funds will be made available only after submission to Congress of a formal budget request for all or part of the funds by the President that designates the amount of the request as an emergency under the Balanced Budget and Emergency Deficit Control Act of 1985. Training and Technical Assistance: the Secretary has authority to set aside up to \$300,000 from each year's appropriation for training and technical assistance relating to the Low-Income Home Energy Assistance Program. These T/TA activities are accomplished through: grants, contracts, or jointly financed cooperative or interagency agreements with States, Indian tribes, tribal organizations, public agencies, or private nonprofit organizations; through interagency agreements, including with Federal agencies; or through on-site compliance reviews of LIHEAP grantees. The nature of and amount awarded for training and technical assistance vary from year to year.
Applicant Eligibility:	Energy Assistance Block Grants: federally- and State-recognized Indian Tribal governments which request direct funding, Training and Technical Assistance: Indian tribes or tribal organizations,
Application Procedure:	Energy Assistance Block Grants: Applications are submitted by the chief executive officer of a State, Indian Tribe (recognized by the Federal government or a State government), tribal organization, or Territory, or his designee. Applications contain assurances prescribed by law and a plan describing how certain assurances will be carried out, and other information specified by law. Separate applications are required to qualify for leveraging incentive funds and REACH funds. Instructions will be issued if emergency contingency funds are released. Households wishing to apply for benefits should contact the local welfare agency or community action agency for information regarding the agency administering the program in their jurisdiction. This program is excluded from coverage under OMB Circular Nos. A-102 and A-110. Training and Technical Assistance: Requirements that apply to each

	request for proposals vary and are at www.grants.gov , www.fedbizopps.gov .
Award Procedure:	Energy Assistance Block Grants: Grants are made upon receipt of a complete application by the Office of Community Services Headquarters Office. Leveraging incentive funds and REACH funds will be awarded based on applications submitted by grantees. Instructions will be issued if emergency contingency funds are released. Training and Technical Assistance: Procedures that apply to each request for proposals vary and are at www.grants.gov , www.fedzopps.gov .
Deadlines:	Energy Assistance Block Grants: States and Territories must submit their applications by September 1, prior to the fiscal year for which funds are sought, unless the Department agrees to a later date. Tribal applications must also be submitted by September 1, prior to the fiscal year for which the funds are sought, unless the State in which a tribe is located agrees to a later date. All applications must be completed by December 15, of the fiscal year for which funds are sought, unless the Department (in the case of States and Territories) or the State (in the case of tribal grantees) agrees to a later date. Leveraging incentive fund reports are due by November 30 of each year. Contact Headquarters Office listed below for further information. www.grants.gov , www.fedbizopps.gov .
Range Of Approval/ Disapproval Time:	Energy Assistance Block Grants: The Department reviews plans for completeness and will act on the plans submitted as quickly as possible. Leveraging incentive and REACH applications will be reviewed and acted upon as quickly as possible. Training and Technical Assistance: Range of time varies, depending upon the nature and complexity of a request for proposals.
Range And Average Of Financial Assistance:	In fiscal year 2005, from \$1,123,000,000 to \$ 236,007,613; \$30,352,000.
Program Accomplishments:	Energy Assistance Block Grants were awarded to 50 States, the District of Columbia, five Trust Territories, and numerous federally- and State-recognized Indian Tribal governments in fiscal year 2004. Energy Assistance Block Grants are estimated to be awarded to 50 States, the District of Columbia, five Trust Territories, and numerous federally- and State-recognized Indian Tribal governments in fiscal year 2006 and fiscal year 2006. During fiscal year 2004, States provided regular and crisis heating assistance benefits to approximately 5.0 million households. Additionally, households could have received other energy crisis assistance, assistance with cooling costs, or weatherization assistance. As a result, some households can receive more than one type of LIHEAP assistance. States are expected to serve approximately 5.0 million households in fiscal years 2005 and 2006.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Nick St. Angelo, Director, Division of Energy Assistance, Office of Community Services, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, S.W., Washington, DC 20447. Telephone: (202) 401-9351. FTS is not available. FAX: (202) 401-5661.
Web Site Address:	http://www.acf.hhs.gov/programs/liheap .
Examples Of Funded Projects:	Training and Technical Assistance: Training workshops and clearinghouses have been conducted.
Criteria For Selecting Proposals:	Criteria pertinent to each request for training and technical assistance proposals are published i at www.grants.gov or www.fedzopps.gov .

93.569 COMMUNITY SERVICES BLOCK GRANT

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide assistance to States and local communities, working through a network of community action agencies and other neighborhood-based organizations, for the reduction of poverty, the revitalization of low-income communities, and the empowerment of low-income families and individuals in rural and urban areas to become fully self-sufficient (particularly families who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act) and (1) To provide services and activities having a measurable and potential major impact on causes of poverty in the community or those areas of the community where poverty is a particularly acute problem; (2) to provide activities designed to assist low-income participants, including the elderly poor, to: (a) secure and retain meaningful employment; (b) attain an adequate education; (c) make better use of available income; (d) obtain and maintain adequate housing and a suitable living environment; (e) obtain emergency assistance through loans or grants to meet immediate and urgent individual and family needs, including health services, nutritious food, housing, and employment-related assistance; (f) remove obstacles and solve problems which block the achievement of self-sufficiency; (g) achieve greater participation in the affairs of the community; and (h) make more effective use of other related programs; (3) to provide on an emergency basis for the provision of such supplies and services, nutritious foodstuffs, and related services, as may be necessary to counteract conditions of starvation and malnutrition among the poor; and (4) to coordinate and establish linkages between governmental and other social services programs to assure the effective delivery of such services to low-income individuals.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	(1) States receive block grants to ameliorate the causes of poverty in communities. The block grant approach gives the States flexibility to tailor their programs to the particular services needs in their communities. (2) States are required to use at least 90 percent of their allocations for grants to "eligible entities" as defined in the Community Services Block Grant (CSBG) Act, as amended; this includes primarily locally-based community action agencies and/or organizations that serve seasonal or migrant farm workers. (2) No more than the greater of \$55,000 or 5 percent of each State's allocation may be used for administrative expenses at the State level.
Applicant Eligibility:	The Secretary also provides assistance directly to the governing body of an Indian Tribe or Tribal organization upon application by the tribe. Only State-recognized tribes, as evidenced by a statement to that effect by the Governor, or tribes formally recognized by the Secretary of the Interior, under the procedure for such recognition in 25 CFR 54, are eligible to receive direct grants.
Application Procedure:	Each State desiring to receive an allotment for a fiscal year is required to submit an application to the Secretary of Health and Human Services (HHS). Each application must contain assurances by the appropriate State designee that the State will comply with Section 676 of the Community Services Block Grant Act and also meet conditions enumerated in Sections 678(B-D). The State is required to hold at least one legislative hearing every three years in conjunction with the development of the State Plan (Section 676(a)(3). States are also required to conduct public hearings on the proposed use and distribution of funds to be provided under the Act. The latter sets forth the general purpose for which funds will be used, restrictions on administrative expenses, eligible recipients, board requirements for community action agencies and other nonprofit organizations, fiscal control, monitoring, and Federal investigation provisions, coordination between antipoverty programs in each community and certain prohibitions on political activities. The Chief Executive Officer of each

	State is also required to designate a lead agency to prepare and submit a plan to the Secretary of HHS describing how the State will carry out the assurances in Section 676. This program is excluded from coverage under 45 CFR, Part 1050.
Award Procedure:	HHS determines the amount of funds to be allocated as block grants to each State in accordance with the formula set forth in the Community Services Block Grant Act. The Office of Management and Budget (OMB) has the authority to apportion to the HHS through the course of a year the Congressional appropriation for block grants. Consistent with OMB's apportionment of funds, HHS will assign allotments to the States through individual awards or a series of awards, normally on a quarterly basis.
Deadlines:	The application deadline for States and Indian Tribes and Tribal Organizations is September 1 of each fiscal year.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	82 count 6,195,271; 75 count 6,399,249.
Program Accomplishments:	A total of 231 grants were awarded in fiscal year 2005. It is anticipated that 227 grants will be awarded in fiscal year 2006
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Division of State Assistance, Office of Community Services, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, SW., Washington, DC 20447. Telephone: (202) 401-9343.
Web Site Address:	http://www.acf.hhs.gov/programs/ocs .
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Not applicable.

93.575 CHILD CARE AND DEVELOPMENT BLOCK GRANT (Child Care and Development Fund (CCDF))

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To make grants to States, Territories, Tribes, and tribal organizations for child care assistance for low- income families and to: (1) allow each State maximum flexibility in developing child care programs and policies that best suit the needs of children and parents within such State; (2) promote parental choice to empower working parents to make their own decisions on the child care that best suits their family's needs; (3) encourage States to provide consumer education information to help parents make informed choices about child care; (4) assist States to provide child care to parents trying to achieve independence from public assistance; and (5) assist States in implementing the health, safety, licensing, and registration standards established in State regulations.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	In the Fiscal Year 2007 revised Continuing Resolution, Congress directs that funds appropriated for the Child Care and Development Block Grant (Discretionary Funds) must be used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. Lead Agencies must use Discretionary Funds for child care services on a sliding fee scale basis, activities that improve the quality or availability of such services, and any other activity that a Lead Agency deems appropriate to realize the goals of the Child Care and Development Block Grant Act. Lead Agencies shall assure that a substantial portion of the Discretionary Funds will be used to provide assistance to low-income working families who are not receiving assistance under the Temporary Assistance for Needy Families program, attempting through work activities to transition off of temporary assistance programs, nor at risk of becoming dependent on temporary assistance programs. Certain amounts of Discretionary Funds must be used for specific purposes: quality expansion; infant and toddler quality improvement; and child care resource and referral, including a national toll-free hotline, and school-age child care activities. A portion of the Discretionary Funds is also designated for the U.S. Department of Health & Human Services to carry-out research, demonstration, and evaluation projects. Not more than five percent of the aggregate amount of Discretionary Funds expended by the State or Territory (fifteen percent for Tribes or tribal organizations) may be expended for administrative costs incurred by the State or Territory to carry out all of its functions and duties. The term "administrative costs" does not include the costs of providing direct services. A State or Territory shall use not less than four percent of the Discretionary Funds to improve child care quality and availability including comprehensive consumer education, activities to increase parental choice, and other activities such as resource and referral services, provider grants and loans, monitoring and enforcement of requirements, training and technical assistance, and improved compensation for child care staff. Except for approved construction of child care facilities by tribal grantees, no Discretionary Funds may be used for the purchase or improvement of land, or for the purchase, construction, or permanent improvement of any building or facility (other than for minor remodeling and for upgrading facilities to meet State and local child care standards). No Discretionary Funds provided directly to child care providers through grants or contracts may be expended for any sectarian purpose or activity, including sectarian worship or instruction; however, Grantees must give parents the option of receiving vouchers or certificates to allow parents the choice of faith-based or community child care providers. No Discretionary Funds may be provided for any services provided to students enrolled in grades 1 through 12 during the regular school day; for any services for which such students receive academic credit toward graduation; or for any instructional services which supplant or duplicate the academic program of any public or private school.
Applicant Eligibility:	All states, the District of Columbia, Territories (Guam, American Samoa, Puerto Rico, U.S. Virgin Islands and Commonwealth of the Northern Mariana Islands), federally recognized Tribal Governments, and tribal organizations, including Alaska Native organizations and Native Hawaiian organizations.

Application Procedure:	A Lead Agency desiring to receive an allotment for a fiscal year is required to submit a two-year CCDF plan to the Administration for Children and Families, as well as, financial and other information necessary for the grants process. Each plan must contain certifications and assurances by the Lead Agency that it will comply with the requirements of the Child Care and Development Block Grant Act. The plan must also include: the designation of a Lead Agency; the provision of assurances regarding policies and procedures as stated in Section 658E(c)(2) of the Child Care and Development Block Grant Act; an outline of the intended use of block grant funds in compliance with Section 658E(c)(3) of the Child Care and Development Block Grant Act; the provision of certification regarding payment rates as stated in Section 658E(c)(4) of the Child Care and Development Block Grant Act; and the establishment of a sliding fee scale. Additional requirements are specified by 45 CFR Parts 98 and 99. This program is excluded from coverage under OMB Circular No. A- 110.
Award Procedure:	Grants are awarded after the receipt and approval of the plan by the Administration for Children and Families.
Deadlines:	Contact Headquarters Office listed below for deadline dates.
Range Of Approval/ Disapproval Time:	The Administration for Children and Families will review the plans for approval and will act on the plans within 90 days.
Range And Average Of Financial Assistance:	For States, including the District of Columbia and Puerto Rico, the range of grants in FY 07 is: \$8,033,868 to \$539,616,259; average grant is approximately \$93,191,121. For 260 Tribal grantees, the range of grants in FY 07 is: \$22,608 to \$9,833,577; average grant is approximately \$389,380. For four Territories, the range of grants in FY 07 is \$ 1,799,139 to \$ 4,047,582; average grant is approximately \$ 2,577,601. (These figures are inclusive of funds received through 93.575 and 93.596.)
Program Accomplishments:	In fiscal year 2006, 312 grants were awarded. In fiscal year 2007, 313 grants were awarded. It is anticipated that 313 grants will be awarded in fiscal year 2008.
Information Contacts	
Regional Or Local Office:	Persons are encouraged to communicate with the Regional Offices. (See Appendix IV of Catalog for addresses of Regional Offices.) Contact: Child Care Bureau, Office of Family Assistance. Telephone: (202) 690-6782, Fax (202) 690-5600.
Headquarters Office:	Child Care Bureau, Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, SW, 5th Floor East, Washington, D.C. 20447. Telephone: (202) 690-6782. Use same number for FTS.
Web Site Address:	http://www.acf.dhhs.gov/programs/ccb .
Examples Of Funded Projects:	Discretionary Funds are awarded to States via a block-grant which, through their appointed Lead Agencies, make many of the decisions about priorities, policies, and expenditures in achieving goals related to improved family access to quality child care. States are required to commit at least four percent of their Discretionary Funds to activities such as consumer education, resource and referral services, provider training, and caregiver recruitment designed to improve child care availability and quality. Targeted funds designated for quality, infant and toddler care, resource and referral, and school-age care further support State efforts to improve child care access and quality.
Criteria For Selecting Proposals:	Not applicable

93.581 IMPROVING THE CAPABILITY OF INDIAN TRIBAL GOVERNMENTS TO REGULATE ENVIRONMENTAL QUALITY

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide financial assistance to advance tribal capacity and capability to plan for, develop, and implement enhancements to the tribal environmental regulatory infrastructure required to support a tribe's environmental goals.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds may be used for planning, developing and implementing tribal environmental regulatory programs through competitive grants. Types of allowable activities are: to regulate and enforce environmental activities on Indian lands; to develop regulations, ordinances and laws to protect the environment; to develop the technical and program capacity to carry out a comprehensive tribal environmental program and perform essential environmental program functions; to promote training and education of tribal employees; to develop technical and program capability to meet tribal and Federal regulatory requirements; to develop technical and program capability to monitor compliance and enforcement of tribal environmental regulations, ordinances, and laws; and to ensure the tribal court system enforcement requirements are developed in concert with and support the tribe's comprehensive environmental program.
Applicant Eligibility:	The following organizations are eligible to apply: Federally-recognized Indian tribes; consortia of Indian tribes; incorporated non-federally-recognized Tribes; Alaska Native villages as defined in the Alaska Native Claims Settlement Act (ANCSA) and/or nonprofit village consortia; and tribal governing bodies (IRA or traditional councils) as recognized by the Bureau of Indian Affairs.
Application Procedure:	Information regarding the availability for grant funds will be published from time to time in the Federal Register as Program Announcements, which will provide details on program objectives for which applications are being solicited and other application requirements. The Administration for Native Americans will provide each applicant with the appropriate forms for the application for Federal Assistance and instructions for applying for grants from Administration for Native Americans programs. Applications should be submitted to Administration for Children and Families, Office of Grants Management, Division of Discretionary Grants, 370 L'Enfant Promenade, SW., Washington, DC 20447.
Award Procedure:	All funds are awarded directly to the grantees.
Deadlines:	Each program announcement specifies the due dates for submission of applications.
Range Of Approval/ Disapproval Time:	Applicants will receive notice of approval/disapproval approximately 120 days after receipt of application.
Range And Average Of Financial Assistance:	(Grants) \$50,000 to \$250,000.
Program Accomplishments:	In fiscal year 2004, 10 new grants were awarded to support projects to assist tribal governments in planning, developing and implementing tribal environmental programs which are consistent with tribal culture including: development and implementation of procedures related to land use permits and plans; strengthening the capacity of tribal governance to adjudicate environmental cases in tribal court; development of tribal environmental codes or policies; development of tribal capacity to monitor compliance with EPA regulations. It is anticipated that 15 grants will be awarded in fiscal year 2005 and 16 grants in fiscal year 2006.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Administration for Native Americans, Department of Health and Human Services, 370 L'Enfant Promenade, SW., Washington, DC 20447. Contact: Commissioner Quanah Stamps Telephone: (202) 401-5590. FTS is not available.
Web Site Address:	http://www.acf.dhhs.gov/programs/ana .
Examples Of Funded Projects:	None are available at this time.
Criteria For Selecting	Specific criteria for selecting proposals for funding are stated in each program

Proposals:	announcement. In general, proposals are judged on the basis of relevance to program objectives as stated in the program announcement, project viability, community support, reasonable cost estimates, and qualifications of applicant organization and personnel.
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93.582 MITIGATION OF ENVIRONMENTAL IMPACTS TO INDIAN LANDS DUE TO DEPARTMENT OF DEFENSE ACTIVITIES

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide financial assistance to American Indian tribes and Alaska Native villages to mitigate environmental impacts to their lands due to Department of Defense activities by assisting the tribes and villages in the planning, development and implementation of projects for such mitigation.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	The purpose of Environmental Mitigation projects is to conduct the research and planning needed to identify environmental impacts caused by DOD activities on or near Indian lands and to plan for remedial investigations to determine and carry out a preliminary assessment of these problems. Mitigation projects should result in adequately detailed documentation of the problems and sources of help their resolution to provide a useful basis for examining alternative mitigation approaches. Program Areas of Interest are: Projects that identify the disruption of subsistence activities due to contamination of the food chain and/or the development of a remediation plan to address subsistence contamination; Projects to conduct a comprehensive environmental assessment; Projects to conduct site inspections and remedial investigation to identify problems and causes related to DOD activities; Projects that identify approaches and methodologies to be undertaken in mitigation activities; Projects to develop a mitigation strategy plan to address problem areas identified such as: land use restoration; clean-up processes; and the resources necessary to implement clean-up actions. The plan should include: technical assistance and management expertise required; protocols for environmental assessments; cost estimates of short and long-term mitigation activities; estimate of impacts of short-term and/or long-term approaches; and, cultural, economic and human health-risk impacts.
Applicant Eligibility:	The following organizations are eligible to apply: Federally-recognized Indian tribes; incorporated non- Federally-recognized and State-recognized Indian tribes; Alaska Native villages, tribes or tribal governing bodies (IRA or traditional councils) as recognized by the Bureau of Indian Affairs in the Federal Register Not ice dated October 21, 1993; nonprofit Alaska Native Regional Associations and/or Corporations with village-specific projects; nonprofit Native organizations in Alaska with village-specific projects; other tribal or village organizations or consortia of Indian tribes.
Application Procedure:	Application Procedure: Information regarding the availability of grants funds will be posted in Grants.gov and the ACF Funding Opportunities website as Programs Announcements, which will provide details on programs objectives for which applications are being solicited and other applications requirements. The Administration for Native Americans will provide each applicant with the appropriate forms for the application for Federal Assistance and instructions for applying for grants from Administration for Native Americans programs. Hard copy applications should be submitted to Administration for Children and Families, Division of Discretionary Grants, 370 L'Enfant Promenade, SW., Washington, DC 20447. Electronic submissions are submitted through Grants.gov.
Award Procedure:	All funds are awarded directly to the grantees.
Deadlines:	Each program announcement specifies the due date for submission of application
Range Of Approval/ Disapproval Time:	Applicants will receive notice of approval/disapproval approximately 120 days after receipt of application.
Range And Average Of Financial Assistance:	\$50,000 to \$150,000
Program Accomplishments:	In fiscal year 2005, ANA awarded 2 new grants for projects which cover a wide range of mitigation efforts to assist Indian tribes and Alaska Native villages in the planning, development and implementation of environmental mitigation programs.1 grant eas awarded in fiscal year 2006 and 1 grant was awarded in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable
Headquarters Office:	Administration for Native Americans, Department of Health and Human Services, 370

	L'Enfant Promenade, SW., Washington, DC 20447. Contact: ANA Help Desk. Telephone: (877) 922-9262. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/ana .
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	Specific criteria for selecting proposals for funding are stated in each program announcement. In general, proposals are judged on the basis of relevance to program objectives as stated in the program announcement, projects viability, community support, reasonable cost estimates, and qualifications of applicant organization and personnel.

93.587 PROMOTE THE SURVIVAL AND CONTINUING VITALITY OF NATIVE AMERICAN LANGUAGES

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide financial assistance to eligible applicants for the purpose of assuring the survival and continued vitality of native languages. This program area is divided into two categories: Category I Assessment Grants are 12-month projects to be used to conduct an assessment of the current status of the native language; and Category II Design and/or Implementation Grants are 12 to 36-month projects and allow for the development and implementation of language projects that support the community's long-term language preservation goals.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds may be used for language preservation and enhancement.
Applicant Eligibility:	The following organizations are eligible to apply; Federally-recognized Indian Tribes (as listed by the Bureau of Indian Affairs in an October 21, 1993 Federal Register notice); Incorporated Non-Federally recognized Indian Tribes; Alaska Native villages as defined in the Alaska Native Claims Settlement Act (ANSCA) and/or nonprofit village consortia; Nonprofit Alaska Native Regional Associations with village specific projects; Nonprofit Native organizations in Alaska with village specific projects; Incorporated nonprofit multi-purpose community-based Indian organizations; Urban Indian Centers; Public and nonprofit private agencies serving Native Hawaiians; National or regional incorporated nonprofit Native American organizations with Native American community-specific objectives; Public and nonprofit private agencies serving native peoples from Guam, American Samoa, or the commonwealth of the Northern Mariana Islands (The populations served may be located on these islands or in the United States.); and Tribally Controlled Community Colleges, Tribally Controlled Post Secondary Vocational Institutions, and colleges and universities located in Hawaii, Guam, American Samoa, or the commonwealth of the Northern Mariana Islands which serves Native American Pacific Islanders.
Application Procedure:	Information regarding the availability of grant funds will be posted in Grants.gov and the ACF Funding Opportunities websites as Program Announcements, which will provide details on program objectives for which applications are being solicited and other application requirements. The Administration for Native Americans will provide each applicant with the appropriate forms for the application for Federal Assistance and instructions for applying for grants from Administration for Native Americans programs. Hard copy applications should be submitted to Administration for Children and Families, Office of Grants Management, Division of Discretionary Grants, 370 L'Enfant Promenade, SW., Washington, DC 20447. Electronic submissions are submitted through Grants.gov.
Award Procedure:	All funds are awarded directly to the grantees.
Deadlines:	Each program announcement specifies the due date for submission of applications.
Range Of Approval/ Disapproval Time:	Applicants will receive notice of approval/Disapproval approximately 120 days after receipt of application.
Range And Average Of Financial Assistance:	Category I: \$50,000 to \$100,000; Category II \$50,000 to \$175,000 per budget period.
Program Accomplishments:	In fiscal year 2005, 28 new grants supported a wide range of activities including, but not limited to: collection of data on current language use; development of long-range language goals/strategies; development of specialized curricula; development and or expansion of language training programs; development of master/apprentice training programs; establishment of language immersion camps; compilation and transcription of oral narratives for uses such as development or revision of dictionaries and curriculum; and incorporation of language learning into tribal Head Start programs. It is anticipated that 25 grants will be awarded in fiscal year 2006 and 25 grants in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Administration for Native Americans, Department of Health and Human Services, 370 L'Enfant Promenade, SW., Washington, DC 20447. Contact: Sheila Cooper,

	Program Operations Division. Telephone: (202) 690-5787. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/ana .
Examples Of Funded Projects:	http://www.acf.hhs.gov/programs/ana .
Criteria For Selecting Proposals:	Specific criteria for selecting proposals for funding are stated in each program announcement. In general, proposals are judged on the basis of relevance to program objectives as stated in the program announcement, project viability, community support, reasonable cost estimates, and qualifications of applicant organization and personnel.

**93.592 FAMILY VIOLENCE PREVENTION AND SERVICES/GRANTS FOR BATTERED WOMEN'S SHELTERS
DISCRETIONARY GRANTS**

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To improve the effectiveness and efficiency of services through the development of new techniques and approaches to deal with priority-area issues related to domestic violence. Specific sections in the Act authorize funding for such discretionary projects as the National Resource Centers; a national domestic violence hotline; public education and information activities; and research into the most effective programs for the prevention, identification, and treatment of family violence.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	To fund a wide range of discretionary activities for the purpose of preventing family violence; protecting victims and their dependents; improving the design, delivery and coordination of services to address family violence; gathering information on the incidences of family violence; and increasing knowledge and understanding of issues through research, demonstration and evaluation projects.
Applicant Eligibility:	A federally-recognized Indian tribe, an Alaska Native Village, or a nonprofit Alaska Native Regional Corporation.
Application Procedure:	Awards are granted on a competitive basis. All applications must contain standard forms 424 and 424A and all required certifications. Specific instructions are published via the Internet at the following website: http://www.acf.hhs.gov/grants/grants_fysb.html .
Award Procedure:	The Commissioner, Administration on Children, Youth and Families, will make the final decision on all awards. Selection of applicants will be determined based on the review criteria published on the following website: http://www.acf.hhs.gov/grants/grants_fysb.html . Funds are awarded directly to grantees.
Deadlines:	Contact Headquarters Office listed below for further information.
Range Of Approval/ Disapproval Time:	Approximately 120 days.
Range And Average Of Financial Assistance:	\$50,000 to \$400,000; \$150,000.
Program Accomplishments:	During fiscal year 2005, 44 grant awards were made to domestic violence advocacy organizations, States, Tribes and Universities. It is anticipated that the same amount of grants will be awarded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	William Riley, Family and Youth Services Bureau, Administration on Children, Youth and Families, 330 C Street, SW, Room 2220, Washington, DC 20447. Telephone: (202) 401-5529.
Web Site Address:	http://www.acf.hhs.gov/programs/ocs
Examples Of Funded Projects:	Funded projects include one National Resource Center on Domestic Violence and four Special Issue Resource Centers, the National Domestic Violence Hotline, public information and education campaigns, and outreach activities to underserved and diverse populations.
Criteria For Selecting Proposals:	Applications will be evaluated based on the criteria published in the Funding Opportunity Announcement located on the following website: http://www.acf.hhs.gov/grants or www.Grants.gov

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93.593 JOB OPPORTUNITIES FOR LOW-INCOME INDIVIDUALS (JOLI Program)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	The purpose of the JOLI program is to award funds to organizations that will create new permanent employment opportunities for individuals receiving Temporary Assistance for Needy Families (TANF) benefits and other individuals. Program funds are awarded in four project designs priority areas: (1) expansion of existing businesses through technical and financial assistance; (2) self-employment/microenterprise; (3) new business ventures; (4) non-traditional employment initiatives that lead to economic self-sufficiency for eligible participants. Priority areas one, two and three require business plans.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funded projects must: (1) create new employment and/or business opportunities for TANF recipients and other low-income individuals; (2) enter into a cooperative agreement with the local TANF agency involving client referrals to the applicant project and supportive services for clients, and applicants are encouraged to establish a formal partnership with the local Child Support Enforcement (CSE) agency involving referrals of noncustodial parents to the applicant; (3) develop a comprehensive project design that describes: the work program and strategy; the participant training design; supportive services and counseling; technical assistance and financial assistance plan; access to business capital; and, follow-up participant support services; and, (4) include an independent, methodologically sound evaluation of the effectiveness of the activities in creating new jobs and/or business opportunities. Funds awarded under this program cannot be used for new construction or the purchase of real property. Grantee's applicable costs and administrative procedures will be determined in accordance with 45 CFR Part 74.
Applicant Eligibility:	Only nonprofit organizations (including tribal organizations) that are tax-exempt under section 501(a) of the Internal Revenue Code of 1986, by reason of paragraph (3) or (4) of section 501(c) of such Code are eligible to apply. Tribal organizations that are published in the Federal Register and www.grants.gov as a "Federally Recognized Tribe" are eligible to apply.
Application Procedure:	All information and forms required to prepare a grant are published in the Federal Register and www.grants.gov website.
Award Procedure:	Official notice of approved grant applications is made through issuance of a Financial Assistance Award. Official notice of an accepted application proposal is made through award of a grant.
Deadlines:	Deadlines for grants are announced in the Federal Register and www.grants.gov as part of the solicitation of applicants. Closing Date for the Fiscal Year 2005 will be published in the Federal Register and www.grants.gov , anticipated in May 2005.
Range Of Approval/ Disapproval Time:	Generally, solicited grants will be acted upon within 180 days.
Range And Average Of Financial Assistance:	Maximum award is \$500,000, Twelve grants were awarded in Fiscal Year 2004. Ten grant awards are anticipated for Fiscal Year 2005.
Program Accomplishments:	Ten grants were awarded in FY 2005 and it is anticipated that the same number of grants will be awarded in FY 06. JOLI projects are awarded funds to: create new jobs for TANF recipients and other low-income individuals that will move them toward economic self-sufficiency through: self-employment/microenterprise business employment initiatives, new business ventures, or expansion of existing businesses through technical and financial assistance, and through non-traditional employment initiatives for women and minorities in the industries and businesses that currently represent twenty-five percent or less of that workforce.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Thomas Campbell, Team Leader, Division of Community Discretionary Programs, Office of Community Services, Administration for Children and Families, U.S. Department of Health and Human Services, 370 L'Enfant Promenade, SW, Washington, DC 20447. Telephone: 202/401-5483, tcampbell@acf.hhs.gov .
Web Site Address:	http://www.acf.hhs.gov/programs/ocs/index.html

Examples Of Funded Projects:	Microenterprise business development, self-employment business training, specialized job training related to new businesses and/or a specific business expansion project that is designed to create full-time permanent jobs for eligible TANF and other low-income individuals to move them toward economic self-sufficiency, and non-traditional employment opportunities for women and minorities in the industries and businesses that currently represent twenty-five percent or less of that workforce.
Criteria For Selecting Proposals:	Selecting factors include: (1) organizational experience in program area and staff responsibilities; (2) analysis of need; (3) work program; (4) significant and beneficial impact; (5) third party evaluation; (6) public-private partnerships; and, (7) budget appropriateness and reasonableness.

93.594 TRIBAL WORK GRANTS (Native Employment Works; NEW)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To allow eligible Indian Tribes and Alaska Native organizations to operate a program to make work activities available.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Tribes have broad flexibility to use the grant for the purpose of making work activities available.
Applicant Eligibility:	An Indian Tribe or Alaska Native organization that conducted a Tribal JOBS (Job Opportunities and Basic Skills Training) Program in fiscal year 1995.
Application Procedure:	Each eligible Indian Tribe or Alaska Native organization must submit a NEW plan to the Secretary for approval.
Award Procedure:	The Administration for Children and Families (ACF) will issue grant awards.
Deadlines:	Plans generally are effective for three program years, subject to program reauthorization.
Range Of Approval/ Disapproval Time:	Approximately 45 days.
Range And Average Of Financial Assistance:	From \$5,187 to \$1,752,666. \$97,862. Nine percent of NEW grants are \$10,000 or less; 36 percent of the grants are \$10,000 to \$50,000; 29 percent of the grants are \$50,000 to \$100,000; and 26 percent are over \$100,000.
Program Accomplishments:	In fiscal year 2005, 78 grants were awarded, which represented 100 percent of the total eligible grantee population. Identical awards are estimated to be granted in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Tribes should contact ACF Regional Offices. (See Appendix IV of the Catalog.)
Headquarters Office:	Ann Bowker, Division of Tribal TANF Management, Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services, 5th Floor, Aerospace Building, 370 L'Enfant Promenade, SW, Washington, DC 20447. Telephone: (202) 401- 5308.
Web Site Address:	http://www.acf.hhs.gov/programs/
Examples Of Funded Projects:	Currently, 78 tribal grantees operate work activity programs under NEW.
Criteria For Selecting Proposals:	Not applicable.

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93.596 CHILD CARE MANDATORY AND MATCHING FUNDS OF THE CHILD CARE AND DEVELOPMENT FUND
 (Child Care and Development Fund (CCDF))

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To make grants to States, Tribes, and tribal organizations for child care assistance for low-income families and to: (1) allow each State maximum flexibility in developing child care programs and policies that best suit the needs of children and parents within such State; (2) promote parental choice to empower working parents to make their own decisions on the child care that best suits their family's needs; (3) encourage States to provide consumer education information to help parents make informed choices about child care; (4) assist States to provide child care to parents trying to achieve independence from public assistance; and (5) assist States in implementing the health, safety, licensing, and registration standards established in State regulations.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Subchapter IV of the Social Security Act appropriates funds (Mandatory and Matching Funds) for the purpose of providing child care assistance. Lead Agencies must use Mandatory and Matching Funds for child care services on a sliding fee scale basis, activities that improve the quality or availability of such services, and any other activity that a Lead Agency deems appropriate to realize the goals of the Child Care and Development Block Grant Act. Lead Agencies must ensure that not less than 70 percent of the total amount of Mandatory and Matching Funds are used to provide child care assistance to families who are receiving assistance under the Temporary Assistance for Needy Families program, families who are attempting through work activities to transition off of temporary assistance programs, and families who are at risk of becoming dependent on temporary assistance programs. Not more than five percent of the aggregate amount of Mandatory and Matching Funds expended by the State (fifteen percent for Tribes or tribal organizations) may be expended for administrative costs incurred by the State to carry out all of its functions and duties. The term "administrative costs" does not include the costs of providing direct services. A State shall use not less than four percent of the Mandatory and Matching funds to improve child care quality and availability including comprehensive consumer education, activities to increase parental choice, and other activities such as resource and referral services, provider grants and loans, monitoring and enforcement of requirements, training and technical assistance, and improved compensation for child care staff. Except for approved construction of child care facilities by tribal grantees, no Mandatory or Matching Funds may be used for the purchase or improvement of land, or for the purchase, construction, or permanent improvement of any building or facility (other than for minor remodeling and for upgrading of facilities to meet State and local child care standards.) No Mandatory or Matching Funds provided directly to child care providers through grants or contracts may be expended for any sectarian purpose or activity, including sectarian worship or instruction; however, Grantees must give parents the option of receiving vouchers or certificates to allow parents the choice of faith-based or community child care providers. No Mandatory or Matching Funds may be provided for any services provided to students enrolled in grades 1 through 12 during the regular school day; for any services for which such students receive academic credit toward graduation; or for any instructional services which supplant or duplicate the academic program of any public or private school.
Applicant Eligibility:	All States, the District of Columbia, Federally recognized Tribal Governments, and tribal organizations, including Alaskan Native Corporations.
Application Procedure:	A Lead Agency desiring to receive an allotment for a fiscal year is required to submit a two-year CCDF plan to the Administration for Children and Families, as well as, financial and other information necessary for the grants process. Each plan must contain certifications and assurances by the Lead Agency that it will comply with the requirements of the Child Care and Development Block Grant Act. The plan must also include: the designation of a Lead Agency; the provision of assurances regarding policies and procedures as stated in Section 658E(c)(2) of the amended Child Care and Development Block Grant Act; an outline of the proposed use of

	block grant funds in compliance with Section 658E(c)(3) of the Child Care and Development Block Grant Act; the provision of certification regarding payment rates as stated in Section 658E(c)(4) of the Child Care and Development Block Grant Act; and the establishment of a sliding fee scale. Additional requirements are specified by 45 CFR Parts 98 and 99. This program is excluded from coverage under OMB Circular No. A-110.
Award Procedure:	Grants are awarded after the receipt and approval of an application and plan by the Administration for Children and Families.
Deadlines:	Contact Headquarters Office listed below for deadline dates.
Range Of Approval/ Disapproval Time:	The Administration for Children and Families will review the plans for approval and will act on the plans within 90 days.
Range And Average Of Financial Assistance:	For States, including the District of Columbia and Puerto Rico, the range of grants in FY 07 is: \$ 8,033,868 to \$539,616,259; average grant is approximately \$93,191,121. For 260 Tribal grantees, the range of grants in FY 07 is: \$ \$22,608 to \$9,833,577; average grant is approximately \$389,380. For four Territories, the range of grants in FY 07 is \$1,799,139 to \$4,047,582; average grant is approximately \$2,577,601. (These figures are inclusive of funds received through 93.575 and 93.596.)
Program Accomplishments:	In fiscal year 2006, 312 grants were awarded. In fiscal year 2007, 313 grants were awarded. It is estimated that 313 grants will be awarded in fiscal year 2008.
Information Contacts	
Regional Or Local Office:	Persons are encouraged to communicate with the Regional Offices. (See Appendix IV of Catalog for addresses of Regional Offices.) Contact: Child Care Bureau, Office of Family Assistance. Telephone: (202) 690-6782, Fax (202) 690-5600.
Headquarters Office:	Child Care Bureau, Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, SW, 5th Floor East, Washington, DC 20447. Telephone: (202) 690-6782, Fax (202) 690-5600. Use same number for FTS.
Web Site Address:	http://www.acf.dhhs.gov/programs/ccb .
Examples Of Funded Projects:	Mandatory and Matching Funds are awarded to States via a block-grant which, through their appointed Lead Agencies, make many of the decisions about priorities, policies, and expenditures in achieving goals related to improved family access to quality child care. States are required to commit at least four percent of their Mandatory and Matching funds to activities such as consumer education, resource and referral services, provider training, and caregiver recruitment designed to improve child care availability and quality.
Criteria For Selecting Proposals:	Not applicable.

93.600 HEAD START

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To promote school readiness by enhancing the social and cognitive development of low-income children, including children on federally recognized reservations and children of migratory farm workers, through the provision of comprehensive health, educational, nutritional, social and other services; and to involve parents in their children's learning and to help parents make progress toward their educational, literacy and employment goals. Head Start also emphasizes the significant involvement of parents in the administration of their local Head Start programs.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	At least 90 percent of the enrollees in a program must come from families whose income is below the poverty guidelines as established by the Office of Management and Budget or from families receiving public assistance. Training and technical assistance grants are available to Head Start programs and to agencies, competitively chosen, which provide services to Head Start programs.
Applicant Eligibility:	federally-recognized Indian tribe
Application Procedure:	The Administration for Children, and Families regional representative will provide each applicant agency with a completed check list form showing exactly which items must be completed by each applicant and delegate agency.
Award Procedure:	All funds are awarded directly to the grantees. Funds for local Head Start/Early Head Start programs, including a portion of training and technical assistance funds are awarded by the Regional Offices. Funds for the following are awarded by the Administration for Children and Families, Headquarters: Indian programs (reservation only); Migrant programs; research, demonstration and evaluation efforts and some training and technical assistance efforts.
Deadlines:	Applications for new projects may be submitted at any time or at times specified by announcement published via the Internet at the following website: http://www.acf.hhs.gov/grants/grants_hsb.html . Applications for continuation grants must be received at least 90 days prior to the start of the new budget period.
Range Of Approval/ Disapproval Time:	This, depending on the nature of the proposal, can vary considerably from 90 days to as much as several months.
Range And Average Of Financial Assistance:	\$133,000 to \$199,043,000; \$4,120,000.
Program Accomplishments:	Since 1965, Head Start has served more than 23 million children from low-income families in 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, and the Outer Pacific. The program has provided education, health, nutrition and social services to the target population. In fiscal year 2005, there were 1,604 Head Start grantees. We estimate the same number of grantees in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Regional Staff report directly to the Office of Head Start.
Headquarters Office:	Office of Head Start, 1250 Maryland Avenue, SW; 8 th floor; Washington DC 20024. Telephone: (202) 205-8572.
Web Site Address:	http://www.acf.hhs.gov/programs/ohs
Examples Of Funded Projects:	(1) Full-Year and Full-Day Head Start Programs; (2) Full-Year and Part-Day Head Start Programs; and (3) Part-Year and Part-Day Head Start Programs.
Criteria For Selecting Proposals:	The degree to which the proposed project will meet the Head Start Program Performance Standards and other program objectives as specified in a program announcement.

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93.601 CHILD SUPPORT ENFORCEMENT DEMONSTRATIONS AND SPECIAL PROJECTS

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To design and carry out special projects of regional and national significance relating to the improvement of child support enforcement efforts.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grants and contracts are awarded for creative special improvement projects and demonstrations that improve the effectiveness of the child support enforcement program on the regional and national levels. These activities must be consistent with the goals of the national child support mission to ensure all children receive financial and medical support from both parents and must advance the requirements of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).
Applicant Eligibility:	Tribes and Tribal organizations and nonprofit organizations.
Application Procedure:	This program is subject to the provisions of OMB Circular Nos. A-102 and No. A-110, as appropriate. The standard application forms, as furnished by DHHS and required by OMB Circular No. A-102, must be used for this program. Application forms and supplemental descriptive information on the priority projects are available from: Administration for Children and Families, Child Support Enforcement Program, 4th floor, 370 L'Enfant Promenade, SW., Washington, DC 20447. The application shall be executed by an individual authorized to act for the applicant agency or organization and to assume for the agency or organization the obligations imposed by the terms and conditions of the grant. As part of the project title the applicant must clearly indicate whether the application submitted is in response to a program announcement (e.g. CFDA 93.601) and must reference the priority area for which the application is to compete. Relevant applications are reviewed and evaluated by a review panel of not less than three knowledgeable people. Written assessment of each application is made. This program is exempt from E.O. 12372.
Award Procedure:	Official notice of approved grant applications is made through issuance of a Notice of Grant Award. This provides the amount of funds awarded, the purpose of the award, the term and conditions of the award, the budget period for which support is given, the total project period for which support is contemplated, and the total grantee participation.
Deadlines:	Closing dates are established and published in the program announcement. Unsolicited applications, may be submitted any time, but must be so unique that they cannot fit under a general announcement.
Range Of Approval/ Disapproval Time:	From 60 to 120 days. Generally, solicited grants and contracts will be acted upon within 90 days.
Renewals:	Generally, project and budget periods vary according to priority area (up to three years). Projects of a longer duration will be considered if unique circumstances warrant. If projects are approved for a period longer than 12 months, funding will be provided in discrete 12-month increments, or "budget periods." Funding beyond the first 12- month budget period is not guaranteed. Future funding will depend on the grantee's satisfactory performance and the availability of future appropriations.
Range And Average Of Financial Assistance:	\$100,000 to \$200,000; \$150,000.
Program Accomplishments:	Fourteen grants were awarded in fiscal year 2005. An estimated six grants will be awarded in fiscal year 2006, and six grants in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Contact Regional Administrators.
Headquarters Office:	Susan Greenblatt, Deputy Director, Division of State, Tribal, and Local Assistance, Office of Child Support Enforcement, Department of Health and Human Services, 4th Floor, 370 L'Enfant Promenade, SW., Washington, DC 20447. Telephone: (202) 401-4849.
Web Site Address:	http://www.acf.dhhs.gov/programs/cse .
Examples Of Funded Projects:	Special improvement projects intended to improve the operation and management of the child support enforcement program.

Criteria For Selecting Proposals:	(1) Objectives and need for assistance; (2) approach; (project management and staffing plan); (3) evaluation and how success will be measured; (4) reasonableness of project costs; and (5) cooperation of CSE agency.
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93.602 ASSETS FOR INDEPENDENCE DEMONSTRATION PROGRAM (Assets for Independence)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Authorization:	Assets for Independence Act, Title IV; Community Opportunities, Accountability, Training, and Educational Services Act of 1998, Public Law 105-285, 42 U.S.C. 604, as amended.
Objectives:	The purpose of the Assets for Independence Program is to demonstrate and evaluate the effectiveness of asset-building projects that assist low-income people in becoming economically self-sufficient by teaching them about economic and consumer issues and enabling them to established matched savings accounts called Individual Development Accounts (IDAs). The program is demonstrating and evaluating the effects of AFI Projects and IDAs in terms of increasing the economic self-sufficiency of low-income families; promoting savings for first-time homeownership, postsecondary education; and small business or micro-enterprise development; and stabilizing and improving families and communities.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grants for five-year project and budget periods. Grantees must allocate at least 85% of the grant funds for matching participants' IDA savings and 2% of the grant funds for data collection and evaluation. Grantees may use the remaining 13% to support other project activities and related matters. Grantees are required to provide or secure nonfederal cash contributions equal to or greater than the grant amount.
Applicant Eligibility:	Tribal governments submitting applications jointly with tax exempt organizations;
Application Procedure:	Competitive applications must be submitted on Standard Forms 424, 424A, and 424B, and include a project narrative as described in the program announcement issued by the Office of Community Services and published in the Federal Register and www.grants.gov website. Required forms are attached to the published announcement. No State plan is required.
Award Procedure:	The Director, Office of Community Services makes funding decisions based on recommendations of a panel of experts who review funding proposals. The panel review is based on criteria set forth in the program announcement.
Deadlines:	Application deadlines are posted on Grants.gov (www.grants.gov)
Range Of Approval/ Disapproval Time:	Applications will normally be approved/disapproved and grant awards made within 90 days of application receipt.
Range And Average Of Financial Assistance:	The Office of Community Services (OCS) awards grants for this program ranging up to \$1,000,000. The average grant is approximately \$350,000. OCS expects to fund approximately 55 grants per year. Eligible entities may apply for new grants up to the statutory limit of \$1,000,000 in each funding cycle.
Program Accomplishments:	In fiscal year 2005, OCS awarded 44 grants. It is estimated that OCS will award approximately 62 in FY 06 and 62 in FY 07.
Information Contacts	
Regional Or Local Office:	None.
Headquarters Office:	James Gatz, Office of Community Services, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, SW., Washington, DC 20447. Telephone: (202) 401-4626 or e-mail address: AFIPProgram@ACF.HHS.GOV.
Web Site Address:	http://www.acf.hhs.gov/assetbuilding
Related Programs:	None.
Examples Of Funded Projects:	List of funded projects is available on request to Information Contact and on the website listed above.
Criteria For Selecting Proposals:	(1) Organization experience and administrative capability; (2) sufficiency of the project theory, design, and plan: The degree to which the project described in the application appears likely to aid project participants in achieving economic self-sufficiency through activities requiring one or more of the qualified expenses (postsecondary education, first home purchase, or business capitalization); (3) adequacy of plan for providing information for evaluation; (4) commitment of nonfederal funds and additional resources; (5) results or benefits expected; and (6) significant and beneficial impacts.

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93.612 NATIVE AMERICAN PROGRAMS

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To provide financial assistance to American Indian and Alaska Native Tribes and villages, and for Native Hawaiians and Native American Pacific Islander organizations for the development and implementation of social and economic development strategies that promote self-sufficiency. These project are expected to result in improved social and economic conditions in Native American communities and to increase the effectiveness of Tribes and Native Organizations in meeting their social and economic goals.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grants may be used for such purposes as, but not limited to: (1) Governance Projects which assist Tribal and village governments to exercise local control and decision-making over their resources; (2) Economic Development Projects, which promote the long term mobilization and management of economic resources necessary to achieve a diversified economy; and (3) Social Development Projects which support local access to, control of, and coordination of services and programs for the social benefit of community members.
Applicant Eligibility:	Public and private nonprofit agencies, including but not limited to, governing bodies of Indian Tribes on Federal and State reservations, Alaska Native villages and regional corporations established by the Alaska Native Claims Settlement Act, such public and nonprofit private agencies serving Native Hawaiians, Indian and Alaska Native organizations in urban or rural nonreservation areas, and Native American Pacific Islanders (American Samoan Natives, and indigenous peoples of Guam, the Commonwealth of the Northern Mariana).
Application Procedure:	Information regarding the availability of grant funds will be posted on Grants.gov and the ACF Funding Opportunities websites as Program Announcements. Program Announcements will provide details on program objectives for which applications are being solicited and other application requirements. The Administration for Native Americans will provide each applicant with the appropriate forms for the application for Federal assistance and instructions for applying for grants from the Administration for Native Americans programs. Hard copy applications should be submitted to U. S. Department of Health and Human Services, Administration for Children and Families, Office of Grants Management, Mail Stop Aerospace Center 8th Floor-West, 370 L'Enfant Promenade, SW., Washington, DC 20447. Electronic submissions are submitted through Grants.gov.
Award Procedure:	All funds are awarded directly to the grantees.
Deadlines:	Each program announcement specifies the due date for submission of applications.
Range Of Approval/ Disapproval Time:	Applicants will receive notice of approval/ disapproval approximately 120 days after receipt of application.
Range And Average Of Financial Assistance:	(Tribal Grants) \$50,000 to \$500,000; \$125,000. (Urban Grants) \$50,000 to \$500,000. (NAHMI Grants) \$50,000 to \$200,000.
Program Accomplishments:	In fiscal year 2005, 82 new grants were awarded, 70 grants were awarded in fiscal year 2006 and 64 grants were awarded in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Administration for Native Americans, Department of Health and Human Services, Mail Stop Aerospace Center 8th Floor-West, 370 L'Enfant Promenade, SW., Washington, DC 20447. Contact: Sheila Cooper, Director of Program Operations. Telephone: (202) 690-5787. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/ana
Examples Of Funded Projects:	(1) Improved Governance Capabilities; (2) Native American social development projects; and (3) Native American economic development projects.
Criteria For Selecting Proposals:	Specific criteria for selecting proposals for funding are stated in each program announcement. In general, proposals are judged on the basis of relevance to program objectives as stated in the program announcement, project viability, community support, reasonable cost estimates, and qualifications of applicant organization and personnel.

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93.616 MENTORING CHILDREN OF PRISONERS (MCP)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To make competitive grants to applicants in areas with significant numbers of children of prisoners to support the establishment and operation of programs using a network of public and private entities to provide mentoring services for these children.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Provide mentoring and support services to urban and/or suburban populations with substantial numbers of children with incarcerated parents.
Applicant Eligibility:	Those eligible to apply for funding under this grant competition include applicants in areas where there are substantial numbers of children of prisoners. Applicants must establish or expand and operate programs using a network of public and private entities to provide this mentoring. This includes any Tribe and Tribal organizations.
Application Procedure:	Application for Federal Assistance, Standard Form 424 must be submitted. Specific instructions are published via the Internet at the following website address: http://www.acf.hhs.gov/grants/index.html .
Award Procedure:	All applicants are reviewed by a panel of nonfederal experts which assigns scores according to published criteria. The panel's scores are factored into the recommendations for funding. Scores and recommendations are reviewed by the Associate Commissioner of the Family and Youth Services Bureau, who makes the recommendations to the ACYF Commissioner, who makes the final funding decision.
Deadlines:	As specified in the announcement or application instructions.
Range Of Approval/ Disapproval Time:	From 60 to 90 days.
Range And Average Of Financial Assistance:	Grants will range from \$100,000 to \$1,000,000 depending on the scope of the project.
Program Accomplishments:	In fiscal year 2005, 218 grants were awarded to Urban/Suburban and Rural/Tribal grantees. It is anticipated that 218 grants will be awarded in fiscal years 2006 and 185 grants will be awarded in 2007.
Information Contacts	
Regional Or Local Office:	Associate Commissioner, Family and Youth Services Bureau, Administration for Children and Families, Department of Health and Human Services, 1250 Maryland Avenue, SW., Washington, DC 20447. Contact: Harry Wilson. Telephone: (202) 205-8102. FTS is not available.
Headquarters Office:	Associate Commissioner, Family and Youth Services Bureau, Administration for Children and Families, Department of Health and Human Services, 1250 Maryland Avenue, SW., Washington, DC 20447. Contact: Harry Wilson. Telephone: (202) 205-8102. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/fysb
Examples Of Funded Projects:	In fiscal year 2005, 218 grants were awarded to Urban/Suburban and Rural/Tribal grantees. It is anticipated that 218 grants will be awarded in fiscal years 2006 and 185 grants will be awarded in 2007.
Criteria For Selecting Proposals:	Applications will be evaluated based upon the criteria published in the Funding Opportunity Announcement located on the following website address: http://www.acf.hhs.gov/grants_fysb.html .

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93.623 BASIC CENTER GRANT (BCP)

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	The purpose of Part A of the RHY Act (Runaway and Homeless Youth Grant Program) is to establish or strengthen locally controlled community-based programs that address the immediate needs of runaway and homeless youth and their families. Services must be delivered outside of the law enforcement, child welfare, mental health and juvenile justice systems. The goals and objectives of the Basic Center Program are to: 1) Alleviate problems of runaway and homeless youth; 2) reunite youth with their families and encourage the resolution of intrafamily problems through counseling and other services; 3) strengthen family relationships and encourage stable living conditions for youth; and 4) help youth decide upon constructive courses of action.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Each Basic Center program is required to provide outreach to runaway and homeless youth; temporary shelter for up to fifteen (15) days; food; clothing; individual, group and family counseling; aftercare and referrals, as appropriate. Basic Center programs are required to provide their services in residential settings for at no more than twenty (20) youth unless a state or local law or regulation requires a higher maximum to comply with licensure requirements for facilities serving child and youth. Some programs also provide part or all of their shelter services through host homes (usually private homes under contract to the centers), with counseling and referrals being provided from a central location. Basic Center programs offer shelter to youth who are less than 18 years of age and who are at risk of separation from their family.
Applicant Eligibility:	Federally recognized Indian organizations are also eligible to apply for grants as private, non-profit agencies.
Application Procedure:	Application for Federal Assistance, Standard Form 424 must be submitted. Specific instructions are published via the Internet at the following website address: http://www.acf.hhs.gov/grants/index.html .
Award Procedure:	All applications are reviewed by a panel of nonfederal experts which assigns scores according to the published criteria. The panel's scores are factored into the recommendations for funding. Scores and recommendations are reviewed by the Associate Commissioner of the Family and Youth Services Bureau, who makes recommendations to the ACYF Commissioner, who makes the final funding decisions.
Deadlines:	As specified in the announcement or application instructions.
Range Of Approval/ Disapproval Time:	From 60 to 90 days.
Range And Average Of Financial Assistance:	\$100,000 to \$200,000 per budget period; \$128,000.
Program Accomplishments:	In fiscal year 2005, 342 grants were awarded. It is anticipated that 328 grants will be awarded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Contact: Regional Administrator, Administration for Children and Families, Regional Offices. (See Appendix IV of this Catalog for the addresses of the Regional Offices.)
Headquarters Office:	Associate Commissioner, Family and Youth Services Bureau, Administration for Children and Families, Department of Health and Human Services, 1250 Maryland Avenue, SW., Washington, DC 20447. Contact: Harry Wilson. Telephone: (202) 205-8102. Use the same number for FTS.
Web Site Address:	http://www.acf.hhs.gov/programs/fysb .
Examples Of Funded Projects:	Funded projects include local centers for runaway and homeless youth, Youth Development State Collaboration Programs, Training and Technical Assistance grants, and a toll-free National Communications System.
Criteria For Selecting Proposals:	An assessment is made on the basis of the degree to which: (1) The likelihood that the proposal will provide necessary services including shelter, counseling, and aftercare to runaway and other homeless youth and their families; (2) reasonableness of cost of these services; and (3) qualifications of staff. Applications will be evaluated based upon the criteria published in the Funding Opportunity Announcement located on the following website address: http://www.acf.hhs.gov/grants .

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93.670 CHILD ABUSE AND NEGLECT DISCRETIONARY ACTIVITIES

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To improve the national, State, community and family activities for the prevention, assessment, identification, and treatment of child abuse and neglect through research, demonstration service improvement, evaluation of best practices, dissemination of information, and technical assistance.
Types Of Assistance:	Project Grants (Contracts).
Uses And Use Restrictions:	Grants or Contracts are provided for: (1) Technical assistance to public and private nonprofit agencies; (2) research and service demonstration projects to identify, assess, prevent, and treat child abuse and neglect; (3) research into the incidence, consequences, and prevalence of child abuse and neglect; and (4) for the dissemination of information on the incidence, causes, prevention and treatment of child abuse and neglect.
Applicant Eligibility:	Tribes engaged in activities related to the prevention, identification, and treatment of child abuse and neglect
Application Procedure:	Announcement of availability of funds is published in the Federal Register. Eligible applicants submit applications by specified deadlines.
Award Procedure:	Grant applications are reviewed by a panel of non-federal professionals with expertise in the child abuse and neglect field. Final decisions are made by the Commissioner, Administration for Children, Youth and Families (ACYF). Contract proposals are reviewed by a panel of Federal staff.
Deadlines:	Deadlines change from year to year. Each program announcement provides specific deadline information. Contact Headquarters Office for details.
Range Of Approval/ Disapproval Time:	From 3 to 6 months.
Range And Average Of Financial Assistance:	\$80,000 to \$1,988,200; \$300,000.
Program Accomplishments:	70 grants were awarded in fiscal year 2005 and 41 grants are anticipated for fiscal year 2006 and an estimated 56 grants in FY 07.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Jan Shafer, Director, Research and Innovation Division, Children's Bureau, 1250 Maryland Avenue SW., Washington, DC 20024, 8th Floor. Telephone: (202) 205-8172. FTS is not available.
Web Site Address:	http://www.acf.hhs.gov/programs/cb .
Examples Of Funded Projects:	National Resource Center for Community Based Child Abuse Prevention Programs; National Resource Center on Child Protective Services; Systems of Care grants to improve child welfare outcomes; Replications of Demonstrated Effective Practices in the Prevention of Child Abuse and Neglect; Longitudinal Research on Child Abuse and Neglect.
Criteria For Selecting Proposals:	Applications are evaluated on the basis of the degree to which proposals meet specific objectives defined in the annual program announcement including, but not limited to: (1) Reasonableness of cost; (2) qualifications of staff; and (3) relevance to stated areas of interest.

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93.671 FAMILY VIOLENCE PREVENTION AND SERVICES/GRANTS FOR BATTERED WOMEN'S SHELTERS GRANTS TO STATES AND INDIAN TRIBES

Federal Agency:	ADMINISTRATION FOR CHILDREN AND FAMILIES
Objectives:	To assist States and Indian Tribes in the prevention of family violence and the provision of immediate shelter and related assistance for victims of family violence and their dependents.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Federal funds are used by States for grants to local public agencies and nonprofit private organizations to prevent incidents of family violence and to provide immediate shelter and related assistance to victims of family violence. States must give special emphasis to the support of community-based projects of demonstrated effectiveness carried out by nonprofit private organizations, particularly those projects where the primary purpose is to operate shelters for victims of family violence, and those which provide counseling, advocacy, and self-help services to victims and their children. States and Indian Tribes may not impose an income eligibility standard on individuals receiving services supported by funds appropriated under this Act and Federal funds may not be used as direct payment to any victim of family violence. No less than 70 percent of the funds distributed must be used for immediate shelter and related assistance, and no less than 25 percent for related assistance.
Applicant Eligibility:	Federally recognized Indian Tribes.
Application Procedure:	Applications must be submitted to the Administration on Children, Youth and Families. No standard application forms are required. Contact Headquarters Office listed below for further information.
Award Procedure:	Formula grants are awarded directly to States, U.S. territories and insular areas, and eligible Indian Tribes.
Deadlines:	For deadlines please contact Headquarters Office listed below for further information.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	States: \$718,710 to \$7,204,366; Indian Tribes: \$24,710 to \$2,162,087.
Program Accomplishments:	During fiscal year 2005, 225 grants were made to States and Indian Tribes for immediate shelter and related assistance. Support continued for shelters in rural and underserved areas, special programs for children of victims of family violence, support for public awareness programs to break the cycle of violence, and demonstration of service models that address elder abuse. The same services will be provided in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Shena Williams (Tribes), Family and Youth Services Bureau, Administration on Children, Youth and Families, 330 C Street, SW, Room 2113, Washington, DC, 20447. Telephone: (202) 205-5932.
Web Site Address:	http://www.acf.hhs.gov/programs/ocs
Examples Of Funded Projects:	States determine the sub-State services and activities to be funded. These may include funding for shelters for victims of family violence, counseling and self-help services, and projects to address elder abuse.
Criteria For Selecting Proposals:	Each State and eligible jurisdiction, including eligible federally-recognized Indian Tribes, will receive its respective share of funds if the application submitted meets the necessary requirements.

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FUNDING OPPORTUNITIES

- 93.047 SPECIAL PROGRAMS FOR THE AGING-TITLE VI, PART A, GRANTS TO INDIAN TRIBES;
PART B, GRANTS TO NATIVE HAWAIIANS
- 93.052 NATIONAL FAMILY CAREGIVER SUPPORT
- 93.053 NUTRITION SERVICES INCENTIVE PROGRAM

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93.047 SPECIAL PROGRAMS FOR THE AGING-TITLE VI, PART A, GRANTS TO INDIAN TRIBES-PART B, GRANTS TO NATIVE HAWAIIANS

Federal Agency:	ADMINISTRATION ON AGING
Objectives:	To promote the delivery of supportive services, including nutrition services, to older Indians, Alaskan Natives, and Native Hawaiians and to enable tribal organizations to provide multifaceted systems of support services to family caregivers . Services are comparable to services provided under Title III of the Older Americans Act of 1965, as amended.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds are available through grants to eligible Indian Tribal Organizations for services comparable to those provided under Title III. Services must include nutrition services and information and referral, and may include transportation and other services authorized under Title III. Funds may be used for staffing the center. Indian Tribes receive funds based on a formula that considers the number of eligible elder Indians represented by the tribal organizations with population ranges from 50-100; 101-200; 201-300; 301-400; 401-500; and 501 to 1,500 and 1,501 over. Grants also are available to private or nonprofit organizations having the capacity to provide services to older Native Hawaiians.
Applicant Eligibility:	Tribal organizations of Indian tribes eligible for assistance under Section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b). Applicants must demonstrate that they have the ability to deliver supportive and nutrition services.
Application Procedure:	An award document issued by the Administration on Aging.
Award Procedure:	An award document issued by the Administration on Aging.
Deadlines:	Established when grant application instructions are issued. Contact Headquarters Office for further information.
Range Of Approval/ Disapproval Time:	Usually within 30 to 60 days.
Range And Average Of Financial Assistance:	Grants to Indian Tribes, Part A range from \$73,620 to \$180,467; average \$99,963. Grants to Native Hawaiians, Part B range from \$47,430 to \$852,005; average \$449,718.
Program Accomplishments:	In fiscal year 2005, grants were awarded to 237 <u>tribal organizations</u> and two Native Hawaiian Organizations for nutrition and supportive services to Native American, Alaskan Native, and Native Hawaiian elders. A similar number of grants are expected to be awarded in fiscal year 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Regional Administrator, Administration on Aging, Department of Health and Human Services Regional Offices (See Appendix IV of the Catalog).
Headquarters Office:	Dr. Yvonne Jackson, Director, Office of American Indian, Alaskan Native, and Native Hawaiian Programs, Administration on Aging, Department of Health and Human Services, Washington, DC 20201. Telephone: (202) 357-3500. Use the same number for FTS.
Web Site Address:	http://www.aoa.gov .
Examples Of Funded Projects:	(1) Supportive and Nutrition Services for Older Indian Persons Passamaquoddy Tribe, Perry, Maine; (2) Supportive and Nutrition Services to Older Indian Persons -San Carlos Apache Tribe; (3) Supportive and Nutrition Services to Older Indian Persons - Yakima Indian Nation; (4) Supportive and Nutrition Services to Older Indian Persons - St. Croix Tribal Council, Wisconsin; (5) Supportive and Nutrition Services to Older Indians - Ute Mountain Ute Tribe.
Criteria For Selecting Proposals:	Judgment is based upon the extent to which the project meets the requirements of the law and regulations.

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93.052 NATIONAL FAMILY CAREGIVER SUPPORT

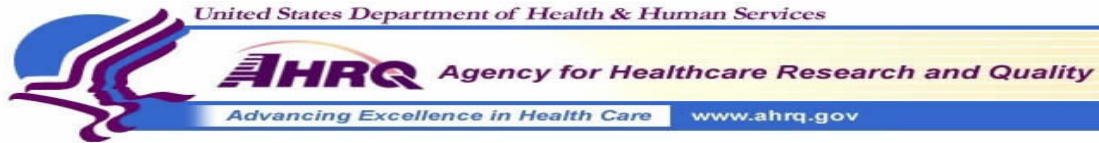
Federal Agency:	ADMINISTRATION ON AGING
Objectives:	To assist States, Territories and Indian Tribal Organizations in providing multifaceted systems of support services for: (1) Family caregivers; and (2) grandparents or older individuals who are relative caregivers. Services to be provided include: information to caregivers about available services; assistance to caregivers in gaining access to the services; individual counseling, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their caregiving roles; respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and supplemental services, on a limited basis, to complement the care provided by caregivers.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	These two authorities are for making grants to States and Territories under Title III-E and to Indian Tribal Organizations under Title VI-C to enable the provision of multifaceted systems of support services for family caregivers; and for grandparents or older individuals who are relative caregivers.
Applicant Eligibility:	Project (Title VI-C) grants: Indian Tribal Organizations
Application Procedure:	Formula Grants - Application Procedures: Consult with the appropriate Regional Office for State application instruction. Project Grants (Title VI-C) - Grant applications are in accordance with program announcements developed by the Administration on Aging (AoA) and will be published in the Federal Register. As specified in the program announcement, application forms and instructions may be obtained by writing to the Administration on Aging, Grants Management Division, 330 Independence Avenue, SW., Cohen Building, 4th Floor, Washington, DC 20201.
Award Procedure:	Formula Grants - The Administration on Aging awards funds through a statutory formula to State Agencies on Aging. State agencies approve and award funds to substate level organizations, that they have designated. Project Grants (Title VI-C). After review and approval, notification of award will be issued to the grantee, along with appropriate notification to the public.
Deadlines:	Formula Grants - Funds are awarded to State Agencies on Aging based on the Federal fiscal year. Project Grants (Title VI-C) are as specified in guidelines published in the Federal Register.
Range Of Approval/ Disapproval Time:	Formula Grants - States are entitled to these grants by statute. Project Grants (Title VI-C) - Approximately 60 to 90 days from closing date or receipt of application.
Range And Average Of Financial Assistance:	\$14,720 to \$15,532,999; \$633,253
Program Accomplishments:	In fiscal year 2005, funds were provided to enable 56 States to provide multifaceted systems of support services for family caregivers and for grandparents or older individuals who are relative caregivers. In fiscal years 2006 and 2007, it is estimated that a similar number of grants will be made to states, area agencies on aging, and Tribal Organizations. Project Grants (Title VI-C): Funds are provided to Indian Tribal Organizations and Native Hawaiian organizations to provide multifaceted systems or support services for family caregivers and for grandparents or older individuals who are relative caregivers.
Information Contacts	
Regional Or Local Office:	Administration on Aging Regional Administrator, Administration on Aging, Department of Health and Human Services, located at all HHS Federal Regional Offices. (See Appendix IV of the Catalog for listings.)
Headquarters Office:	Formula Grants: Rick Greene, Center for Wellness and Community-Based Services, Administration on Aging, Department of Health and Human Services, Washington, DC 20201. Telephone: (202) 357-3586. E-mail:

	Rick.Greene@aoa.gov. Project Grants (Title VI-C): Yvonne Jackson, Office for American Indian, Alaskan Natives and Native Hawaiian Programs, Administration on Aging, Washington, DC 20201. Telephone: (202) 357-3501. E-mail: Yvonne.Jackson@aoa.gov.
Web Site Address:	http://www.aoa.gov .
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	Project Grants (Title VI-C) are as published in the Federal Register.

93.053 NUTRITION SERVICES INCENTIVE PROGRAM

Federal Agency:	ADMINISTRATION ON AGING
Objectives:	The purpose of the Nutrition Services Incentive Program (NSIP) is to reward effective performance by States and Tribes in the efficient delivery of nutritious meals to older adults through the use of cash or commodities.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Funds are made available to State agencies on aging and Indian Tribal Organizations to purchase foods of United States origin or to purchase commodities from the United States Department of Agriculture (USDA). These foods are to be used in the preparation of congregate and home-delivered meals by nutrition services programs. Nutrition service providers may solicit voluntary contributions for meals furnished in accordance with the requirements of Section 315 the Older Americans Act. Commodities available from the USDA may not be sold, exchanged, or otherwise disposed of (authorized distribution excepted) without prior, specific approval of USDA.
Applicant Eligibility:	Indian Tribal Organizations (ITO) that receive funding through Titles III and VI of the OAA may receive grants of cash from the Administration on Aging (AoA) or commodities from the USDA.
Application Procedure:	All States and Indian Tribal Organizations are eligible, no applications required.
Award Procedure:	Not applicable.
Deadlines:	None.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	\$324 to \$14,224,141; \$507,774.
Program Accomplishments:	During fiscal year 2004, about 248 million meals were served to program participants.
Information Contacts	
Regional Or Local Office:	Regional Administrators, Administration on Aging, Department of Health and Human Services, Region Offices. (See Appendix IV of the Catalog).
Headquarters Office:	Judy Minor, Office for Community-Based Services, Administration on Aging, Department of Health and Human Services, Washington, DC 20201. Telephone: (202) 357-3546. Use the same number for FTS.
Web Site Address:	http://www.aoa.gov
Examples Of Funded Projects:	Programs 93.045 and 93.047, Special Programs for the Aging relating to nutrition services and Indian programs respectively are examples of projects that have been funded under this program. Both of these programs supply supportive services including nutrition services to older Americans.
Criteria For Selecting Proposals:	Not available at this time.

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FUNDING OPPORTUNITIES

93.226 RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES

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93.226 RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES

Federal Agency:	AGENCY FOR HEALTHCARE RESEARCH AND QUALITY
Objectives:	To support research and evaluations, demonstration projects, research networks, and multidisciplinary centers and to disseminate information on health care and on systems for the delivery of such care involving: (1) The quality, effectiveness, efficiency, appropriateness and value of health care services; (2) quality measurement and improvement; (3) the outcomes, cost, cost-effectiveness, and use of health care services and access to such services; (4) clinical practice, including primary care and practice-oriented research; (5) health care technologies, facilities and equipment; (6) health care costs, productivity, organization, and market forces; (7) health promotion and disease prevention, including clinical preventive services; (8) health statistics, surveys, database development, and epidemiology; and (9) medical liability. In support of this research, the Agency has a special interest in health care and its delivery in the inner city, in rural areas, and for priority populations (low-income groups, minority groups, women, children, the elderly, and individuals with special health care needs).
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	The research should contribute to the health services knowledge base from which empirically based information can be derived by policymakers, both immediately and over the coming decades. Grants include funds for direct costs (such as personnel, travel, equipment, or supplies) necessary to carry out an approved project as well as funds for the reimbursement of applicable facilities and administrative costs. Unallowable costs, as well as those for which prior written approval is required, are indicated in the PHS Grants Policy Statement. Discretionary funds are available.
Applicant Eligibility:	federally-recognized Indian Tribal Governments
Application Procedure:	For nongovernmental applicants, Form PHS-398 (Rev. September 2004), should be submitted. For State and local governments, the standard application forms, as furnished by PHS and required by 45 CFR Part 92, may be used. For State agencies, no State Plan is required. Applications are reviewed and evaluated by a group composed primarily of nonfederal scientists. The review is conducted by a panel of experts in the specific study area proposed. This program is subject to the provisions of 45 CFR Part 92 for State and local governments and OMB Circular No. A-110 for nonprofit organizations.
Award Procedure:	Following review for scientific merit by a group composed primarily of nonfederal scientists, grant applications may be reviewed by the National Advisory Council for Healthcare Research and Quality, after which AHRQ makes final decisions to support approved applications. When such decisions are made, applicants are notified directly by AHRQ staff and all required steps are taken to issue the Notice of Grant Award.
Deadlines:	New grants (except R03 mechanism): February 1, June 1, October 1. Competing continuations and competing supplements: March 1, July 1, November 1. New AIDS grants: May 1, September 1, January 2. R03 grants: March 24, July 24, November 24.
Range Of Approval/ Disapproval Time:	From 6 to 9 months from receipt of application.
Range And Average Of Financial Assistance:	\$5,000 to \$2,800,000; \$310,000. These are total cost figures (direct plus associated facilities and administrative costs if appropriate).
Program Accomplishments:	In fiscal year 2005, 320 grants were provided to universities, hospitals, nonprofit private agencies, State agencies, local government agencies and individuals to conduct health services research and demonstration projects. In fiscal year 2006, it is estimated that approximately 325 grants will be provided to similar organizations and individuals for the support of extramural health services research and demonstration and dissemination projects. In fiscal year 2007, it is estimated that approximately 304 grants will be provided to similar organizations and individuals.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Agency for Healthcare Research and Quality, Department of Health and Human Services, 540 Gaither Road, Rockville, MD 20850. Program Contacts: Improving Health Outcomes and Evidence-based Practice and Technology Assessment, Jean Slutsky, Director, Center for Outcomes and Evidence (Telephone: 301 427-1600); Quality of Care, William Munier, MD, Acting Director, Center for Quality Improvement and Patient Safety (Telephone: 301 427-1349); Primary Care, Helen Burstin, MD, MPH, Director, Center for Primary Care

	Prevention and Clinical Partnerships (Telephone: 301 427-1500); Cost and Financing, Steven Cohen, PhD, Director, Center for Financing, Access, and Cost Trends (Telephone: 301 427-1406); Organization, Delivery, and Markets, Irene Fraser, PhD, Director, Center for Delivery, Organization, and Markets (Telephone: 301 427-1410); Grants Management Contact: Mable Lam, Grants Management Officer (Telephone: 301 427-1447). Use the same number for FTS.
Web Site Address:	http://www.ahrq.gov .
Examples Of Funded Projects:	(1) Centers for Education and Research on Therapeutics; (2) Primary and Secondary Prevention of CHD and Stroke; (3) Improving Pain Management in Nursing Homes; (4) Optimizing Antibiotic Use in Long-Term Care; (5) Improving the Delivery of Effective Care to Minorities; (6) Risk-Adjustment of 1-Year Health Status Outcomes in CAD; (7) Impact of Early Discharge Following Bypass Surgery; (8) Smoking Control in MCH Clinics: Dissemination Strategies; (9) Benefits of Regionalizing Surgery for Medicare Patients.
Criteria For Selecting Proposals:	The proposals must first be reviewed by review groups of peers and recommended for approval on the basis of scientific and technical merit. This includes consideration of the qualifications of the principal investigator and staff to conduct the research using appropriate methodology and budget. Applications may be reviewed for program relevance by the National Advisory Council for Healthcare Research and Quality. Those approved proposals which are most relevant to the identified program priority issues of the AHRQ are funded to the extent that funds are available.

FUNDING OPPORTUNITIES

- 93.161 HEALTH PROGRAM FOR TOXIC SUBSTANCES AND DISEASE REGISTRY**
- 93.202 CAPACITY BUILDING AMONG AMERICAN INDIAN TRIBES**
- 93.204 SURVEILLANCE OF HAZARDOUS SUBSTANCE EMERGENCY EVENTS**
- 93.206 HUMAN HEALTH STUDIES -APPLIED RESEARCH AND DEVELOPMENT**
- 93.208 GREAT LAKES HUMAN HEALTH EFFECTS RESEARCH**
- 93.240 STATE CAPACITY BUILDING (Site Specific Activities Cooperative Agreement Program)**

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93.161 HEALTH PROGRAM FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To work closely with State, local, and other Federal agencies to reduce or eliminate illness, disability, and death resulting from exposure of the public and workers to toxic substances at spill and waste disposal sites.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	To strengthen State and local environmental health programs. Services may include: (1) Health assessments; (2) health effects studies; (3) exposure and disease registries; (4) technical assistance; (5) consultation; (6) dissemination of technical information; (7) provision of specialized services and assistance, including responses to public health emergencies; (8) training State and other health professionals in broad areas related to environmental health; and (9) research of chemical toxicity.
Applicant Eligibility:	Federally-recognized Indian tribal governments, public and private non-profit universities and colleges.
Application Procedure:	Information on the submission of applications may be obtained from the Grants Management Officer, Acquisition and Assistance Branch A, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. This program is subject to the provisions of 45 CFR, Part 92 for State and local governments. The standard application forms, as furnished by PHS and required by 45 CFR 92 for State and local governments, must be used for this program. This program is subject to the provisions of OMB Circular No. A-110. By formal agreement, the CDC Grants Management Branch acts on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR has final authority to approve funding of applications. When an application is approved for funding, the Grants Management Officer, Centers for Disease Control and Prevention (CDC), acting as agent for ATSDR, will prepare a Notice of Grant Award.
Deadlines:	Contact the Headquarters Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$130,000 to \$300,000; \$200,000.
Program Accomplishments:	Approximately 14 grantees have been funded and will continue to be funded.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Mrs. Caroline McDonald, Agency for Toxic Substances and Disease Registry, Office of Financial and Administrative Services, 1600 Clifton Road, NE., Mail Stop E-28, Atlanta, GA 30333. Telephone: 404498-0272. Fax: 404-498-0059. E-mail address: JFlesner@cdc.gov. Grants Management Contact: Mildred Garner, Grants Management Officer, Procurement and Grants Office, Centers for Disease Control and Prevention, Department of Health and Human Services, 2920 Brandywine Road, Atlanta, GA 30341. Telephone: (770) 488-2745, FAX: (770) 4882777.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	(1) A cooperative agreement for educating physicians and other health professionals in the areas of environmental health, site characterizations, and health assessment; (2) a study to address and recommend effective implementation strategies for the integration of environmental medicine into medical school curricula; and (3) conference grants on disease prevention, health promotion, and information/education projects related to preventing exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous substances from waste sites, unplanned releases, and other sources of pollution present in the environment.

<p>Criteria For Selecting Proposals:</p>	<p>(1) Relevance of the proposal to the objective of this program. (2) Demonstrated experience in evaluating human health effects from exposures to hazardous substances in the environment through multimedia exposure pathways. (3) Training and experience of staff to be assigned to and/or hired for the project. (4) Suitability of facilities and equipment available or to be purchased for the project. (5) Appropriateness of the requested budget relative to the work proposed. (6) Capability of the applicant and its consultants to carry out the tasks involved in the project. (7) Soundness and innovation of the proposed approach to the range of activities presented in the project. (8) Capability of the applicant's administrative structure to foster successful scientific and administrative management of the program or study as described in the application. (9) Adequacy of the proposed time frame for completion of programs or studies.</p>
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93.202 CAPACITY BUILDING AMONG AMERICAN INDIAN TRIBES

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To address the Tribal public health issues that result from hazardous substances in the environment by: 1) building Tribal environmental health capacity 2) addressing health issues from releases of hazardous substances into the environment, and 3) develop culturally appropriate health education materials and/or vehicles to engage Tribal community members in public health activities.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	To enhance the Tribes ability to collaborate with Agency for Toxic Substance and Disease Registry (ATSDR) in conducting public health activities related to potential human exposures from the Hanford Nuclear Reservation.
Applicant Eligibility:	Federally Recognized American Indian Tribal Governments: Coeur d'Alene Tribe; Colville Confederated Tribes; Confederated Tribes of the Umatilla Indian Reservation; Kalispel Tribe; Kootenai Tribe of Idaho; Nez Perce Tribe; Spokane Tribe; Confederated Tribes of the Warm Springs Reservation of Oregon; and Yakama Indian Nation.
Application Procedure:	Applicants must use application Form PHS 5161-1. Application packets are available from: Ms. Edna Green, Grants Management Branch, Procurement and Grants Office, Center for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. By formal agreement, the CDC Grants Management Branch will act on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR has final authority to approve funding of applications. When an application is approved for funding, the Grants Management Officer, CDC, acting as agent for ATSDR will prepare a Notice of Grant Award.
Deadlines:	Contact the Headquarters Office identified below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$40,000 to \$60,000; \$50,000.
Program Accomplishments:	In fiscal year 2001, 9 awards were made. It is estimated that 9 continuation awards will be made in fiscal year 2002 and fiscal year 2003. No new awards are anticipated.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program contact Dean Seneca, Division of Health Assessment and Consultation, Agency for Toxic Substances and Disease Registry; 1600 Clifton Road, N.E., Mailstop E32, Atlanta, GA 30333. Telephone: 404498-0457. E-mail address: zkg8@cdc.gov. Grants Management Contact: Ms. Edna Green, Acquisition & Assistance Branch A, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road., Room 3000, Atlanta, GA 30341. Telephone: 770-4882743. Fax: 770-488-2777. ECG4@cdc.gov.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	Funded projects include grants to American Indian Tribal governments to conduct public health activities related to potential human exposures from the Hanford Nuclear reservations. Examples of funded projects are: Health assessments, health consultations, community involvement and health education.
Criteria For Selecting Proposals:	All applications will be reviewed and evaluated based on the following criteria: 1) Develop and administered effective culturally competent measures to engage community members in environmental public health activities: 2) Describe how the environmental health needs assessment will be used for environmental health: 3) Outlined the activities to develop a 10-year Environmental Health Plan (EHP): 4) Described the Tribes capability (or inability) to carry out the proposed EHP: 5) Describe how the Tribe will resolve current problems of exposures: 6) and Budget justification.

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93.204 SURVEILLANCE OF HAZARDOUS SUBSTANCE EMERGENCY EVENTS

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To assist State health departments in developing a State-based surveillance system for monitoring hazardous substance emergency events. This surveillance system will allow the State health department to better understand the public health impact of hazardous substance emergencies by developing, implementing, and evaluating a State-based surveillance system.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	The participant State health agencies will use the information collected to assess the burden of adverse health effects created by these unexpected, sudden releases of hazardous substances, describe the situations and persons most likely impacted, define the risk factors for adverse health effects, and work with other agencies to implement prevention activities. Funds may be expended for reasonable program purposes, such as personnel, travel, supplies, and services. Equipment may be purchased with cooperative agreement funds; however, justification must be provided which should include a cost comparison of purchase versus lease options. All purchased equipment must be compatible with ATSDR's equipment and shall be returned to ATSDR at the completion of the project.
Applicant Eligibility:	Eligible applicants include federally-recognized Indian Tribal Governments.
Application Procedure:	Applicants must use application Form PHS 5161-1. Application packets are available from: Edna Green, Grants Management Specialist, Acquisition & Assistance Branch A, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Rd., Room 3000, Atlanta, GA 30341. By formal agreement, the CDC Grants Management Branch will act on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR has final authority to approve funding of applications. When an application is approved for funding, the Grants Management Officer, CDC, acting as agent for ATSDR, will prepare a Notice of Grant Award.
Deadlines:	Contact the Headquarters Office identified below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$60,000 to \$80,000; \$79,000.
Program Accomplishments:	In fiscal year 2001, 16 noncompeting continuation awards were made. In fiscal years 2002 and 2003, it is anticipated that 16 noncompeting continuation awards will be made in each fiscal year.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Nelda Godfrey, Division of Health Studies, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mail Stop E-31, Atlanta, Georgia 30333 or by calling (404) 498-0268. Fax: 404498-0058. E-mail address: MMF2@cdc.gov. Grants Management Contact: Mildred Garner, Grants Management Officer, Acquisition & Assistance Branch A, Procurement and Grants Office, Center for Disease Control and Prevention, 2920 Brandywine Rd., Room 3000, Mail stop E-75, Atlanta, Georgia 30341. Telephone: (770) 488-2745. Fax: (770) 488-2745.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	Funded projects are cooperative agreements to State governments to develop, implement, and maintain an emergency event surveillance system. All projects have as their overall objectives: A. Describe the type and cause of morbidity experienced by employees, first responders and the general public as a result of selected hazardous substance emergencies; B. Develop and propose strategies to reduce subsequent morbidity and mortality when comparable events occur in the future; C. Evaluate the public health impact of hazardous material releases, expand the access to databases with relevant hazardous material events and provide annual summaries of public health impacts; and D. Continue formal and informal interactions with State programs and local emergency responders, as well as private industry, to yield new resources and more complete information on emergency

	events.
Criteria For Selecting Proposals:	Applications will be reviewed and evaluated according to the following criteria: 1. Appropriateness and knowledge of surveillance systems; 2. Proposed methodology; 3. Capability and coordination efforts; 4. Quality of information collection; 5. Program personnel; and 6. Program budget (not scored).

93.206 HUMAN HEALTH STUDIES -APPLIED RESEARCH AND DEVELOPMENT

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To solicit scientific proposals designed to answer public health questions arising from situations commonly encountered at hazardous waste sites. The objective of this research program is to fill gaps in knowledge regarding human health effects of hazardous substances identified during the conduct of ATSDR's health assessments, consultations, toxicological profiles, and health studies, including but not limited to those health conditions prioritized by ATSDR. The ATSDR Priority Health Conditions are (in alphabetical order): (1) Birth defects and reproductive disorders; (2) cancers (selected anatomic sites); (3) immune function disorders; (4) kidney dysfunction; (5) Liver Dysfunction; (6) Lung and Respiratory Diseases; and (7) neurotoxin disorders.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	To strengthen the State governments, State colleges, State universities, State research institutions, federally-recognized Indian tribal governments, U.S. Territories and possessions to fill the gap in knowledge regarding the occurrence and risk factors for the Priority Health Conditions.
Applicant Eligibility:	Eligible applicants are State health departments or their bona fide agents or instrumentalities. This includes federally-recognized Indian tribal governments.
Application Procedure:	Applicants must use application Form PHS 5161-1. Application packets are available from: Ms. Edna Green, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. By formal agreement, the CDC Grants Management Branch will act on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR has final authority to approve funding of applications. When an application is approved for funding, the Grants Management Officer, CDC, acting as agent for ATSDR, will prepare a Notice of Grant Award.
Deadlines:	Contact the Headquarters Office identified below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$50,000 to \$500,000; \$100,000.
Program Accomplishments:	In fiscal year 2001, there were 8 new competitive awards and 3 noncompetitive continuation awards. In fiscal year 2002, it is estimated there will be 12 new competitive awards and 11 non-competitive continuation awards. In fiscal year 2003, it is estimated there will be 20 non-competing continuation awards. In FY 2004 and FY 2005 efforts continued to support approximately 20 non-competing awards.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Mrs. Caroline McDonald, Office of Financial and Administrative Services, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mail Stop E-28, Atlanta, GA 30333. Telephone: (404) 498-0270. Fax: 404-498-0059. E-mail address: COS4@cdc.gov. Programmatic Technical Assistance: David Williamson, Director, Division of Health Studies, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mail Stop E-31, Atlanta, GA 30333. Telephone: (404) 498-0105. Fax: 404-498-0077. E-mail address: DXW2@cdc.gov. Grants Management Contact: Mildred Garner, Acquisition & Assistance Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2743. Fax: (770) 488-2745.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	Funded projects include grants to State health departments and universities to conduct health studies that relate to hazardous substances and investigate health conditions prioritized by ATSDR. Examples of funded projects are: 1. A study to examine residential exposure to specific urban air toxicants through multiple pathways and indoor allergens in an urban area and their relationship to asthma

	prevalence and immune function using nested case-control study. 2. A study to probe the possible synergistic relationships between exposure to chemicals commonly found at hazardous waste sites and likely to contaminate the border area and maternal infections suspected to be risk factors for NTDs.
Criteria For Selecting Proposals:	All applications will be reviewed and evaluated based on the following criteria: 1. Appropriateness and knowledge of study design; 2. Proposed study; 3. Relationship to initiative; 4. Quality of data collection; 5. Program personnel; and 6. Program budget (not scored).

93.208 GREAT LAKES HUMAN HEALTH EFFECTS RESEARCH

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To: (1) Build upon and amplify the results from past and on-going research in the Great Lakes basin; (2) develop information, databases and research methodology that will provide long-term benefit to human health effects research in the Great Lakes basin; (3) develop direction for future health effects research; (4) provide state local health officials: the concerned public and their medical health care professionals; (5) in concert with State and local health offices increase the public awareness regarding the potential health implications of the toxic pollution problem in the Great Lakes basin; and (6) coordinate as necessary with relevant Public Health Service (PHS) research programs and activities, including those of the Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), and the Indian Health Service (IHS), as well as the Environmental Environment Protection Agency (EPA) and State and local health departments, to ameliorate adverse public health impacts of persistent toxic substances in the Great Lakes basin.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	To conduct research on the impact on human health of fish consumption in the Great Lakes region. This Program of Research will focus on populations which have been identified to have a higher risk of long-term adverse health effects from exposure to contaminants in Great Lakes fish, i.e., Native Americans, sport anglers, urban poor, the elderly, Asian Americans, racial/ethnic minority populations, fetuses, and nursing infants of mothers who consume contaminated Great Lakes fish. Priority areas of research for this program include: 1. Characterizing exposure and determining the profiles and levels of Great Lakes contaminants in biological tissues and fluids in high-risk populations; 2. Identifying sensitive and specific human health endpoints, i.e., reproductive/developmental, behavioral, endocrinologic, and immunologic effects and correlating them to exposure to Great Lakes contaminants; and 3. Determining the short- and long-term risk(s) of adverse health effects in children which result from parental exposure to Great Lakes contaminants. Proposed projects covering these priority areas should include strategies (risk communication) to inform susceptible populations about the potential human health impact of consuming contaminated fish from the Great Lakes. Based upon research findings, longer term priority areas may include, but are not limited to: 1. Investigating the feasibility of, or establishing, registries and/or surveillance cohorts in the Great Lakes region; and 2. Establishing a chemical mixtures database with emphasis on tissue and blood levels to identify new cohorts, conduct surveillance and health effects studies, and establish registries and/or surveillance cohorts.
Applicant Eligibility:	Eligible applicants are the official public health agencies or their bona fide agents or instrumentalities and political subdivisions thereof, which may include federally-recognized Indian tribal governments located in the Great Lakes States.
Application Procedure:	Applicants must use application Form 5161-1. Application packets are available from: Acquisition and Assistance Branch A, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. By formal agreement, the CDC Grants Management Branch will act on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR, has final authority to approve funding of applications. When an application is approved for funding, the Grants Management Officer, CDC, acting as agent for ATSDR, will prepare a Notice of Grant Award.
Deadlines:	Contact the Headquarters Office identified below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$72,000 to \$175,000; \$119,000
Program Accomplishments:	In fiscal year 2003, funding was provided for ten competing awards. It is anticipated that there will be ten non-competing continuation awards in fiscal years 2004 and 2005.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Dr. Heraline E. Hicks, Division of Toxicology, Agency for Toxic

	Substances and Disease Registry, 1600 Clifton Road, NE, Mail Stop E-29, Atlanta, Georgia 30333. Telephone: (404) 489-0717. Fax: 404-498-0094. E-mail address: HEH2@cdc.gov. Grants Management Contact: Mildred Garner, Acquisition and Assistance Branch A, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2745. Fax: (770) 488-2777.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	(1) The New York State Angler Cohort Study: Exposure Characterization and Reproductive and Developmental Effects; (2) Great Lakes Fish as a Source of Maternal and Fetal Exposure to Chlorinated Hydrocarbons; (3) An Assessment of a Human Population at Risk: The Impact of Consuming Contaminated Great Lakes Fish on Native American Communities; (4) Cognitive and Motor Effects of PCB Exposure in Older People from the Michigan Fish Eaters Cohort: Emphasis on the Role of Ortho-Substituted Congeners; (5) Contribution of Nursing to Behavioral Changes in Offspring of Mothers Who Consumed Lake Ontario Fish: Two Methodological Approaches; (6) Health Risks from Consumption of Great Lakes Fish; and (7) Assessing Effects of Human Reproductive Health of PCB Exposure via Consumption of Great Lakes Fish. Three grants were awarded to State Health Departments for the following projects: (1) PCB and DDE Exposure among Native American Men from Contaminated Great Lakes Fish and Wildlife; (2) Consortium for the Health Assessment of Great Lakes Sport Fish Consumption; and (3) Michigan Great Lakes Health Studies.
Criteria For Selecting Proposals:	Applications will be reviewed and evaluated according to the following criteria: Proposed Program; Program Personnel; Applicant Capability; and Program Budget (Not Scored).

93.240 STATE CAPACITY BUILDING (Site Specific Activities Cooperative Agreement Program)

Federal Agency:	AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
Objectives:	To fulfill the mandated objectives of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA) and the Superfund Amendments and Reauthorization Act (SARA) of 1986, as amended, in coordination with Agency for Toxic Substances and Disease Registry (ATSDR), by assisting public health agencies to build capacity to conduct (1) Health consultations, (2) public health assessments, (3) exposure investigations, (4) community involvement, (5) health education, and (6) public health studies.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	The uses are to strengthen State health agency environmental health programs. Services include public health assessments, consultations, exposure investigations, health education, and follow-up health investigations/studies. Funds may be expended for reasonable program purposes, such as personnel, travel, supplies and services. Funds for contractual services may be requested. However, the awardee, as the direct and primary recipient of PHS grant funds, must perform a substantive role in carrying out project activities and not merely serve as a conduit for an award to another party or provide funds to an ineligible party. Equipment may be purchased with cooperative agreement funds; however, the equipment must meet applicable Federal requirements. These funds may not be used by the recipient to conduct activities at any Federal site where the State is a party to litigation at the site.
Applicant Eligibility:	Eligible applicants are the official public health agencies or bona fide agents or instrumentalities, to include Federally- recognized Indian tribal governments.
Application Procedure:	Applicants must use application Form PHS 5161-1. Application packets are available from: Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Rd., Room 3000, Mailstop K-75, Atlanta, GA 30341. By formal agreement, the CDC Procurement and Grants Office will act for and on behalf of ATSDR on this matter.
Award Procedure:	The Assistant Administrator, ATSDR, determines applications to be approved and the priorities for funding. When an application is approved for funding, the Grants Management Officer, CDC, acting as the agent for ATSDR, will prepare a Notice of Award.
Deadlines:	Contact the Headquarters Office identified below for application deadlines.
Range Of Approval/ Disapproval Time:	Approximately 60 to 90 days.
Range And Average Of Financial Assistance:	\$150,627 to \$700,000; \$350,000.
Program Accomplishments:	In fiscal year 2003, there were a total of 33 new competitive awards. It is anticipated that there will be 33 noncompetitive continuation awards in fiscal year 2004 and 2005.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Ms. Stephanie Rubin, Funding Resource Specialist, Office of Financial and Administrative Services, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mailstop E-28, Atlanta, Georgia 30333. Telephone: (404) 498-0624 Fax: (404) 498-0059. E-mail address: SAW3@cdc.gov. Grants Management Contact: Mildred Garner, Grants Management Officer, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2745. Fax: (770) 488-2777.
Web Site Address:	http://www.atsdr.cdc.gov .
Examples Of Funded Projects:	States conduct public health evaluations on National Priorities List (NPL) sites, sites that ATSDR have been petitioned to assess, Superfund Accelerated Cleanup Model (SACM) sites, and other Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) sites.
Criteria For Selecting Proposals:	Applications for core activities only were reviewed and evaluated based on the following criteria: (1) Proposed Program: (a) Merit scientific and technical merit of

	<p>the proposed project to perform public health assessments, consultations, exposure investigations, health education and public health studies consistent with ATSDR guidance and in a timely manner. Applicant's ability to evaluate the public health impact of hazardous waste sites using health, environmental, and demographic data, and health-related concerns from the local community. (b) Requirements Applicant's understanding of the requirements, objectives, and complexities of the interactions required for a successful program. c) Collaboration Applicant's plan to collaborate with political and private subdivisions of Federal, State, and local health and environmental agencies and community groups to obtain information needed for evaluating the public health impact of hazardous waste sites, disseminate results of findings, and prevent exposure if identified. (2) Program Personnel: The principal investigator or project director and his/her ability to devote time and effort to provide effective leadership, and the qualifications of the support staff. (3) Applicant Capability: Adequacy and commitment of institutional resources, facilities, space, and equipment necessary for conducting the project are available and sufficient. (4) Program Budget: Extent to which the budget is reasonable, clearly justified, and consistent with intended use of funds. The priority order for funding cooperative agreements was as follows: (a) Number of proposed and/or listed National Priority List (NPL) sites (Federal and nonfederal) based on the most current EPA list, (b) number of Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) sites (Federal and nonfederal) based on the most current EPA list; (c) applicants who applied for both Core Activities and optional Activities; and (d) geographic distribution across the United States. (5) Human Subjects: Applicant's plan for adequate protection of human subjects. Applications for conducting Core Plus Optional Activities were reviewed and evaluated based on the following criteria: Proposed Program: In addition to the criteria outlined above for Core Activities, the applicant had to indicate an understanding of and capability for conducting human health studies as contained in the proposed site-specific protocol which had to include: (a) The approach, feasibility, adequacy, and rationale for the proposed study design, (b) the technical merit of the proposed study, (c) the proposed timeline, including measurable objectives, (d) proposed method for disseminating the results of the study.</p>
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FUNDING OPPORTUNITIES

- 93.118 **ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) ACTIVITY**
- 93.197 **CHILDHOOD LEAD POISONING PREVENTION PROJECTS-STATE AND LOCAL CHILDHOOD LEAD POISONING PREVENTION AND SURVEILLANCE OF BLOOD LEAD LEVELS IN CHILDREN** (Childhood Lead Poisoning Prevention Program (CLPPP))
- 93.262 **OCCUPATIONAL SAFETY AND HEALTH PROGRAM**
- 93.919 **COOPERATIVE AGREEMENTS FOR STATE-BASED COMPREHENSIVE BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAMS**
- 93.946 **COOPERATIVE AGREEMENTS TO SUPPORT STATEBASED SAFE MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS** (Infant Health and pre-term delivery Initiative; PRAMS; MCHPEP; ART; VAW; Maternal Health Research)
- 93.991 **PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT** (PHHS Block Grants)

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93.118 ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) ACTIVITY

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	To develop and implement HIV prevention programs of public information and education.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Support for cooperative agreements for HIV activities.
Application Procedure:	Applications are made in the form of an application, PHS-5161-1 or PHS 398, to the Centers for Disease Control and Prevention (CDC). The standard application forms, as furnished by CDC and required by 45 CFR, Parts 74 or 92, must be used for this program. This program is subject to the provisions of 45 CFR, Parts 74 or 92, as appropriate.
Applicant Eligibility:	small and minority businesses,
Award Procedure:	After review and approval, a notice of award is prepared and processed, along with appropriate notification to the public. Initial award provides funds for first budget period (12 months) and Notice of Award indicates support recommended for the remainder of project period, allocation of Federal funds by budget categories, and special conditions, if any.
Deadlines:	Contact Headquarters Office for application deadlines.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	Range is approximately \$130,560 to \$1,000,000; average is \$153,650.
Program Accomplishments:	In FY 2005, 5 awards were funded. It is anticipated that in FY 2006 and 2007 approximately 23 awards will be funded.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Amy Coppeto, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road, NE., Mailstop A-43, Atlanta, GA 30333. Telephone: (404) 639-6285. Grants Management Contact: Cheryl Maddux, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 498-1911.
Web Site Address:	http://www.cdc.gov .
Examples Of Funded Projects:	Activities for the prevention of HIV, including cooperative agreement awards for epidemiologic research.
Criteria For Selecting Proposals:	Based on the evaluation, criteria as stated in the Program Announcements.

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93.197 CHILDHOOD LEAD POISONING PREVENTION PROJECTS-STATE AND LOCAL CHILDHOOD LEAD POISONING PREVENTION AND SURVEILLANCE OF BLOOD LEAD LEVELS IN CHILDREN (Childhood Lead Poisoning Prevention Program (CLPPP))

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	To (1) Develop and/or enhance a surveillance system that monitors all blood lead levels; (2) assure that children who are potentially exposed to lead receive follow up care; (3) assure awareness and action among the general public and affected professionals in relation to preventing childhood lead poisoning in high risk areas in collaboration with other government and community based organizations.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Awards are to be used by State and local government agencies to develop, improve, and expand their capacity to address the problem of childhood lead poisoning in communities with demonstrated high-risk populations. Recipients of awards are expected to: (a) write, implement and evaluate a jurisdiction-wide childhood lead poisoning elimination plan; (b) write, implement and evaluate screening plans to target resources to children at the highest risk for lead poisoning; (c) maintain a jurisdiction-wide childhood lead surveillance program, with an analysis plan for collected data, (d) conduct primary prevention activities for pregnant women and/or families with children at high risk for lead poisoning, (e) develop an assurance plan for timely and appropriate case management of children with elevated blood lead levels, (f) demonstrate strategic partnering with community organizations and with other state/local agencies involved in environmental and child health activities, (g) coordinate with organizations and agencies involved in lead-based paint hazard reduction activities and development of protective policy; and (h) evaluate programmatic impact on childhood lead poisoning within the applicant's jurisdiction. Awards cannot supplant existing funding for childhood lead poisoning prevention programs or activities. Grant awards may not be expended for medical care and treatment, or for environmental remediation of lead sources, however, there must be an acceptable plan to ensure that these program activities are appropriately carried out. The surveillance component of this grant is intended to assist State health departments in implementing or enhancing a complete surveillance system to track all PbB levels in children. This is essential for grant recipients to target interventions to high-risk populations and to track progress toward eliminating childhood lead poisoning.
Applicant Eligibility:	Also eligible are health departments or other official organizational authorities of Federally recognized Indian tribal governments.
Application Procedure:	Application forms are both available from and submitted to the Grants Management Branch, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Standard application forms, as furnished by CDC and required by 45 CFR 92 must be used for this program. This program is subject to the provisions set forth in 45 CFR 92 for State and local governments.
Award Procedure:	Approved grants are funded based on a priority score ranking from an objective review process coordinated by the Centers for Disease Control and Prevention. CDC will give funding preference to state programs with significant estimated numbers of children with elevated blood lead levels that direct federal funds to localities with high concentrations of children at risk for childhood lead poisoning. CDC will also give funding preference to the five local jurisdictions with the highest estimated number of children with elevated blood lead levels. Awards are made based on availability of funds and other significant factors as deemed necessary and appropriate by the agency. Funds are awarded for a one-year (12 month period). A Notice of Grant Award (Form PHS 5161-1) is provided which indicates the current award as well as support recommendations for the remainder of the project period (up to three years). The Notice of Grant Award indicates allocations for Federal funds by budget categories and any special conditions, if applicable.
Deadlines:	For fiscal year 2005, the due date was February 28, 2005.
Range Of Approval/	From two to three months.

Disapproval Time:	
Range And Average Of Financial Assistance:	\$75,000 to \$1,700,000.
Program Accomplishments:	In fiscal year 2002, 61 grantees representing 44 States, the District of Columbia and 17 city or county health departments received funding to conduct childhood lead poisoning prevention programs. CDC program staff provided technical assistance to State and local health officials and others interested in childhood lead poisoning prevention. In fiscal year 2001, emphasis was placed on carrying out lead poisoning prevention activities related to implementing statewide screening plans, emphasizing screening Medicaid-eligible children, implementing Medicaid data matching, and establishing childhood blood lead surveillance systems with the capability to report data to CDC. These programs will also utilize funds to facilitate referral of children identified with elevated blood lead levels for medical and environmental intervention, and provide education for parents and health professionals. All 61 funded programs were awarded for fiscal year 2002 to continue lead poisoning prevention activities. In fiscal year 2003, it is anticipated that 42 programs will be funded representing 36 States, the District of Columbia and 5 city or county health departments. Additional performance criteria, including an emphasis toward primary prevention interventions, will be the focus of the program in fiscal year 2003. In FY 04 it is anticipated that all funded programs will continue lead poisoning prevention activities.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Rob Henry, Program Services Team Leader, Lead Poisoning Prevention Branch, National Center for Environmental Health, U.S. Centers for Disease Control and Prevention, 4770 Buford Highway, MS F-30, Atlanta, GA 30341. Telephone: (770) 488-7493. Fax Number: (770) 488-3635. Email: zjn9@cdc.gov. Grants Management Contact: Ms. Mildred Garner, Grants Management Branch, U.S. Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2745. Fax Number: (770) 488-2777.
Web Site Address:	http://www.cdc.gov .
Examples Of Funded Projects:	The first projects to receive financial assistance under this grant program were made late in fiscal year 1990. The awards will continue to State and city/county agencies to develop, expand, or improve childhood lead poisoning prevention programs and statewide surveillance. The awards will be used to strengthen grantees' capacity to perform the three core public health functions (assessment, policy development, and assurance) as they relate to childhood lead poisoning prevention and surveillance. Specifically, these programs will ensure the screening of children at risk of lead exposure; facilitate appropriate referral of children with elevated blood lead levels for medical and environmental interventions; and provide for the education of parents, health care providers, and others concerned about childhood lead poisoning prevention. In addition, programs will develop and implement childhood lead poisoning elimination plans, implement jurisdiction-wide targeted screening plans and establish childhood blood lead surveillance systems.
Criteria For Selecting Proposals:	Applications will be evaluated based upon the applicant's ability to identify populations and communities at high risk and the overall balance of the program's design to address the childhood lead poisoning problem. This requires the development of specific and measurable objectives and a sound operational plan that includes screening of high risk populations, medical and environmental management, lead hazard remediation, and health education and risk reduction activities to appropriately address the problem. Applications also will be evaluated on the ability of the program to carry out childhood lead poisoning prevention program activities utilizing the core public health functions as well as establishing working relations or partnerships with other agencies, organizations or groups that have interest in the prevention of childhood lead poisoning.

93.262 OCCUPATIONAL SAFETY AND HEALTH PROGRAM

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	To (1) recognize new hazards; (2) define the magnitude of the problem; (3) follow trends in incidence; (4) target exceptional hazardous workplaces for intervention; and (5) evaluate the effectiveness of prevention efforts. The goal of this program is to increase worker safety and health. To develop specialized professional and paraprofessional personnel in the occupational safety and health field with training in occupational medicine, occupational health nursing, industrial hygiene, occupational safety, and other priority training areas.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Research Grants: Research grants and cooperative agreements are intended to support the direct costs of a project, in accordance with an approved budget, plus an appropriate amount for indirect costs. Training grants: Funds may be used for long term training programs and/or education and research centers. Support is provided for the direct costs of the program, plus certain indirect costs determined by Public Health Service policy on training programs. Amounts of stipends and other details are in accordance with Public Health Service policy. SBIR Phase I grants (of approximately 6-months' duration) are to establish the technical merit and feasibility of a proposed research effort that may lead to a commercial product or process. Phase II grants are for the continuation of the research initiated in Phase I and that are likely to result in commercial products or processes. Only Phase I awardees are eligible to apply for Phase II support.
Applicant Eligibility:	Indian Tribes, Tribal Government,
Application Procedure:	NIOSH publishes announcements of funding opportunities in the NIH Guide for Grants and Contracts and Grants.gov. The Guide is found on the Internet at: http://grants1.nih.gov/grants/guide/index.html . Research and training programs utilize the PHS 398 application form and instructions which are available on the Internet at: http://grants1.nih.gov/grants/forms.htm . Applications should be submitted to: Center for Scientific Review (CSR), National Institutes of Health, 6701 Rockledge Drive, Room 1040, MSC7710, Bethesda, MD 20892-7910. For express/courier service: Bethesda, MD 20817. Some research programs are now available at Grants.gov. Both announcements, applications from and instructions can be found at Grants.gov. SBIR Grant Solicitations may be obtained electronically through the NIH's "Small Business Funding Opportunities" home page at: www.nih.gov/grants/funding/sbir.htm . A limited number of hard copies of these publications are produced. Subject to availability, they may be obtained by contacting the NIH support services contractor: Telephone: (301) 206-9385; fax: (301) 206-9722; e- mail: a2y@cu.nih.gov . The Solicitations include submission procedures, review considerations, and grant application or contract proposal forms. SBIR and STTR grant applications should be submitted to the Center for Scientific Review, 6701 Rockledge Drive, Room 1040 - MSC 7710, Bethesda, MD 20892-7710.
Award Procedure:	Awards are made on the basis of a two step review of an investigator-prepared application. The initial review is performed by a peer review study section for scientific merit. The second level of review is performed by the NIOSH Secondary Review Committee for program relevance. Final approval of these recommendations and decisions concerning funding are made by the Director, NIOSH. Formal award notices are sent to successful applicants.
Deadlines:	Application deadlines are posted in the published funding opportunity announcements. In addition, certain program deadlines follow a standard schedule: New investigator initiated research: February 1, June 1, and October 1. Supplemental applications and all competing renewal applications: March 1, July 1, and November 1. Conference grant applications and SBIR applications: April 15, August 15, and December 15.
Range Of Approval/ Disapproval Time:	Research Grants and Awards: 7-9 months. Training Grants: 9-10 months. SBIR: 7-8 months.
Range And Average Of	Research Grants: \$50,000 to \$5,000,000. Training Grants: \$28,000\$1,500,000.

Financial Assistance:	SBIR Grants: Phase I -\$100,000; Phase II - up to \$750,000.
Program Accomplishments:	In FY2005, 196 research grant awards, 55 training awards, and 7 SBIR awards were made. Estimated number of awards for FY 2006 is 250.
Information Contacts	
Regional Or Local Office:	Program Contact: Office of Extramural Programs, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Public Health Service, Department of Health and Human Services, 1600 Clifton Road, NE., MS-E74, Atlanta, GA 30333. Telephone: (404) 498-2530. Grants Management Contact: Mr. Larry Guess, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Acquisition and Assistance Branch, Centers for Disease Control and Prevention, Department of Health and Human Services, 626 Cochran's Mill Road, P.O. Box 18070, Pittsburgh, PA 15236. Telephone: (412) 386-6826.
Headquarters Office:	Program Contact: Office of Extramural Programs, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Public Health Service, Department of Health and Human Services, 1600 Clifton Road, NE., MS-E74, Atlanta, GA 30333. Telephone: (404) 498-2530. Grants Management Contact: Mr. Larry Guess, Grants Management Officer, Grants Management Branch, Centers for Disease Control and Prevention, Department of Health and Human Services, 261 Cochran's Mill road, P.O. Box 18070. Telephone: (412) 3866826.
Web Site Address:	http://www.cdc.gov/niosh/oep
Examples Of Funded Projects:	(1) Pacific Northwest Agricultural Safety and Health Center; (2) Biomarkers of Pesticide Toxicity Among Teen Farmworkers; (3) Economic Impact of Injury and Illness in Career Roofers; (4) Textile Industry Exposures and Breast Cancer in Women; (5) From Nanoparticles to Novel Protective Garments; (6) Pesticide Dose Monitoring in Turf Applications; (7) Hearing Hazard Associated with Industrial Noise Exposure; (8) Blood Borne Pathogen Risk in Home Healthcare Workers; (9) Longitudinal Study of Isocyanate Asthma in Body Shops; (10) Physiology of Cumulative Low Back Disorders; (11) Integrated Stability Mapping System for Mines; (12) Effects of Extended Work Hours on Intern Health and Safety; (13) Reproductive Outcomes Due to Past Exposure to Dioxins; (14) State Occupational Safety and Health Surveillance Programs; (15) Bioelectric Telemetry System for Fire Fighter Safety; (16) Education and Research Centers; (17) Graduate and Undergraduate Training Project Grants.
Criteria For Selecting Proposals:	Research Grants: The major elements in evaluating proposals include assessments of: (1) the scientific merit and general significance of the proposed study and its objectives; (2) the technical adequacy of the experimental design and approach; (3) the competency of the proposed investigator or group to successfully pursue the project; (4) the adequacy of the available and proposed facilities and resources; (5) the necessity of the budget components requested in relation to the proposed project; and (6) the relevance and importance to stated program objectives. Training Grants: Criteria used in evaluating training proposals include: (1) Overall potential contribution of the project toward meeting program objectives; (2) the need for training in the areas outlined in the application; (3) curriculum content and design; (4) previous record of training; (5) evaluation methods; (6) experience and training of the project director and staff; (7) institutional commitment; (8) academic and physical environment; (9) past performance; and (10) appropriateness of budget. The following criteria will be used in considering the scientific and technical merit of SBIR Phase I grant applications: (1) The soundness and technical merit of the proposed approach; (2) the qualifications of the proposed principal investigator, supporting staff, and consultants; (3) the technological innovation of the proposed research; (4) the potential of the proposed research for commercial application; (5) the appropriateness of the budget requested; (6) the adequacy and suitability of the facilities and research environment; and (7) where applicable, the adequacy of assurances detailing the proposed means for (a) safeguarding human or animal subjects, and/or (b) protecting against or minimizing any adverse effect on the environment. Phase II grant applications will be reviewed based upon the following

	criteria: (1) The degree to which the Phase I objectives were met and feasibility demonstrated; (2) the scientific and technical merit of the proposed approach for achieving the Phase II objectives; (3) the qualifications of the proposed principal investigator, supporting staff, and consultants; (4) the technological innovation, originality, or societal importance of the proposed research; (5) the potential of the proposed research for commercial application; (6) the reasonableness of the budget requested for the work proposed; (7) the adequacy and suitability of the facilities and research environment; and (8) where applicable, the adequacy of assurances detailing the proposed means for (a) safeguarding human or animal subjects, and/or (b) protecting against or minimizing any adverse effect on the environment.
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93.919 COOPERATIVE AGREEMENTS FOR STATE-BASED COMPREHENSIVE BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAMS

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	To work with official State and territorial health agencies or their designees, and tribal health agencies in developing comprehensive breast and cervical cancer early detection programs. To the extent possible, increase screening and follow-up among all groups of women in the State, tribe or territory, with special to reach those women who are of low income, uninsured, underinsured and minority, and Native Americans.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Cooperative agreements funds may be used to assure screening of women for breast and cervical cancer as an early detection preventive measure; assure appropriate referrals for follow-up services for women with abnormal screening tests and routine rescreening; develop and disseminate public education and outreach programs for the early detection and control of breast and cervical cancers; improve the education, training and skills of health professionals (including allied health professionals) in the early detection and control of breast and cervical cancers; establish mechanisms through which the States, tribes and territories can monitor the quality of breast and cervical cancer screening procedures in the State, including the interpretation of such procedures; and evaluate program activities through appropriate surveillance and monitoring. Cooperative agreement funds may not be expended for screening and follow-up services to the extent that payment has been made, or can reasonably be expected to be made, with respect to such items or services: (1) under any State compensation program, under any insurance policy or under any Federal or State health benefits program; or (2) by any entity that provides health services on a prepaid basis. Cooperative agreement funds shall not be used for treatment or treatment services. States, tribes and territories are required to make available nonfederal contributions in cash or in-kind toward such cost in an amount equal to not less than \$1 for each \$3 of Federal funds provided. Such contributions may be made directly or through donations from public or private entities. The payment for treatment services or the donation of treatment service may not be used for nonfederal contributions. States, tribes and territories may include only nonfederal contributions in excess of the average amount of nonfederal contributions made by the State, tribe or territory for the two year period preceding the first fiscal year for which the State, tribe or territory is applying to receive a cooperative agreement for a comprehensive breast and cervical cancer early detection program. In making a determination of the amount of nonfederal contributions for purposes of matching fund requirements, applicants may include any nonfederal amounts expended pursuant to Title XIX of the Social Security Act for the purpose of screening and follow- up for women at-risk for breast and cervical cancers.
Applicant Eligibility:	Eligible applicants are American Indian and Alaska Native tribes and tribal organizations as defined in Section 4 of the Indian Self-Determination and Education Assistance Act.
Application Procedure:	Information on the submission of applications may be obtained from Mr. Carlos Smiley in the Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, Atlanta, Georgia 30341. Telephone: (770) 488-2754. This program is subject to the provisions of 45 CFR, 92 for State and local governments. The standard application forms, as furnished by PHS and required by 45 CFR 92 must be used for this program.
Award Procedure:	After review and approval, a notice of award is prepared and processed, along with appropriate notification to the public.
Deadlines:	Contact Headquarters Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	From three to four months.
Range And Average Of Financial Assistance:	\$145,000 to \$8,400,000; \$2,100,000.
Program	In fiscal year 2005, the Centers for Disease Control and Prevention (CDC) entered

Accomplishments:	into the fifteenth year of the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). This landmark program brings critical breast and cervical cancer screening services to underserved women, including older women, women with low income, and women of racial and ethnic minority groups. CDC supports early detection programs in all 50 States, 4 U.S. territories, the District of Columbia, and 13 American Indian/Alaska Native organizations. Similar activity is anticipated in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Susan True, MEd, Chief, Program Services Branch, Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, Public Health Service, 4770 Buford Highway, NE., Mailstop K57, Atlanta, Georgia 30341. Telephone: (770) 488-4880. Grants Management Contact: Nealean Austin, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2722.
Web Site Address:	http://www.cdc.gov/cancer .
Examples Of Funded Projects:	In addition to providing screening and follow up for low income women, State health agencies incorporate into their health care system: (1) Public Education: (a) population targeted for screening and follow up services; (b) for women (other than low income) requiring periodic screening and follow up services; (2) Professional Education: (a) practitioners providing screening and follow up services for targeted low income women; (b) for all practitioners who will provide or refer women (other than low income) for required periodic screening and follow up services; (3) quality assurance: (a) mammography; (b) cervical cytology; (4) surveillance: (a) breast and cervical cancer incidence registry; (b) tracking and follow up system; (5) evaluation: (a) implementation of all program components; (b) Effectiveness of all program components; and (6) breast and cervical cancer control plan and coalition.
Criteria For Selecting Proposals:	(1) Extent of disease burden and need; (2) feasibility and appropriateness of operational plan to meet the purpose of the cooperative agreement; (3) the extent of collaboration and community involvement; (4) the extent to which the applicant appears likely to succeed in implementing proposed objectives; (5) the appropriateness of nonfederal contributions; and (6) the extent to which the budget is reasonable, consistent with the intended use of cooperative agreement funds, and includes evidence of the State's commitment to the program application of financial and/or in-kind contributions from nonfederal sources to activities of the proposed program.

93.946 COOPERATIVE AGREEMENTS TO SUPPORT STATEBASED SAFE MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS (Infant Health and pre-term delivery Initiative; PRAMS; MCHPEP; ART; VAW; Maternal Health Research)

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	PRAMS: To work with official public health agencies of States to: (1) establish and maintain State-specific, population-based surveillance of selected maternal behaviors that occur during pregnancy and the child's early infancy; and (2) generate State-specific data for planning and assessing perinatal health programs. MCHPEP: To work with official public health agencies of States and localities to develop a multidisciplinary team of individuals dedicated to building the recipient's analytic capacity to use epidemiologic and surveillance data to address the health problems that affect its women, infants, and children. Prevention research activities related to women's health related to pregnancy, in vitro fertilization, violence around pregnancy, pre-term delivery, and other reproductive health complications.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	PRAMS: Cooperative Agreement funds may be used to develop a surveillance system that will identify behavioral risk factors during pregnancy and early infancy, and will identify problems in health care delivery. Funds may be used to support the following activities: (1) Obtaining a commitment of participation from the Maternal and Child Health, Vital Statistics, and Data Processing units; (2) assuring that the State PRAMS program will have access to needed vital records information; (3) forming a Steering Committee to promote user involvement; (4) developing a surveillance protocol; (5) preparing a questionnaire, including State-specific questions; (6) obtaining Institutional Review Board review and approval; (7) implementing surveillance operations, such as sampling, data collection, data management, database development, and data analysis; and (8) planning for data dissemination and use. MCHPEP: Cooperative agreement funds may be used by grantees to build their analytic capacity to use epidemiologic and surveillance data to address health problems affecting women, infants and children. Grantees in States, D.C., cities, and U.S. territories will develop a multidisciplinary team to identify populations at increased risk of infant mortality and to help direct programs to reduce this risk. Funds may be used to: (1) Establish a risk-oriented approach to the reduction of infant mortality; (2) substantially build State and local surveillance and epidemiologic capabilities; (3) enhance capacity in States to use surveillance and epidemiologic findings in program and policy development, implementation, and evaluation; (4) disseminate such analytic capabilities to other States by providing information, direct technical assistance, and a pool of knowledgeable and experienced individuals for collaboration; (5) coordinate State programs in database development and intervention research; and (6) develop stronger interactive partnerships among State, territorial, and Federal. To carry out other types of surveillance, prevention research, and demonstrations projects as authorized under the Safe Motherhood authorization.
Applicant Eligibility:	For PRAMS and MCHPEP: Category B, eligible applicants are Federally-recognized Indian tribal governments.
Application Procedure:	Information on the submission of applications may be obtained from the Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. This program is subject to the provisions of 45 CFR 92. The standard application forms, as furnished by CDC and required by 45 CFR 92 for State and local governments, must be used for this program.
Award Procedure:	After review and approval, a notice of award is prepared and processed, along with appropriate notification to the public.
Deadlines:	Contact Headquarters Office listed below for application deadlines. Grants Management Officer, Ms. Nealean Austin, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2754.
Range Of Approval/ Disapproval Time:	From three to four months.

Range And Average Of Financial Assistance:	PRAMS: \$100,000 to \$150,000; \$125,000.
Program Accomplishments:	PRAMS data collection is ongoing in 29 states and New York City. Expansion to 38 states and New York City is expected in FY06. Data from PRAMS are used by states to identify service gaps which are addressed through a variety of programs, many funded by the Maternal and Child Health Block Grant.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Contact: Director, Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, Public Health Service, Department of Health and Human Services; 770 488 5200. Grants Management Contact: Ms. Nealean Austin, Grants Management Officer, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341. Telephone: (770) 488-2754.
Web Site Address:	http://www.cdc.gov
Examples Of Funded Projects:	MCHEP provides epidemiologic and surveillance technical assistance to participating States. Many States participating in PRAMS have developed and implemented an ongoing population-based surveillance of State residents who have recently delivered a live-born infant. Questionnaires have been developed to collect information from new mothers on selected experiences occurring before, during, and after their pregnancies. Using birth certificates, a sample of mothers is selected monthly and they are mailed a self-administered questionnaire. Non-responders are contacted by telephone.
Criteria For Selecting Proposals:	All programs: (1) The extent to which the application describes and presents appropriate data indicating an understanding of the problem, the program for which assistance is requested, and the purpose of the cooperative agreement; (2) the degree to which the workplan addresses the stated needs, is likely to achieve the purposes of the cooperative agreement, and describes the specific roles and responsibilities of participating personnel; (3) the degree to which the application provides a complete and achievable timetable of appropriate events; (4) the adequacy of the plan to monitor progress toward the stated objectives; (5) the extent to which the budget is reasonable, consistent with the problems identified and the scope of the program proposed to address these problems, and the intended use of cooperative agreement funds, and clearly reflects the applicant's intent to commit nonfederal resources to support the operational costs of these programs. PRAMS only: The degree to which the application describes the process for registering births in the State.

93.991 PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT (PHHS Block Grants)

Federal Agency:	CENTERS FOR DISEASE CONTROL AND PREVENTION
Objectives:	To provide States with the resources to improve the health status of the population of each grantee through: (A) activities leading to the accomplishment of the year 2000/2010 objectives for the nation; (B) rodent control and community-school fluoridation activities; (C) specified emergency medical services excluding most equipment purchases; (D) services for sex offense victims including prevention activities; and (E) for related administration, education, monitoring and evaluation activities.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Except as described below, Block Grant funds may be used for preventive health service programs for: (A) Activities to achieve improvements in the health status of populations through achievement of the year 2000/2010 health objectives for the nation; (B) preventive health service programs for the control of rodents and for community and school-based fluoridation programs; (C) feasibility studies and planning for emergency medical services systems and the establishment, expansion, and improvement of such systems; Funds may not be used to operate emergency medical services systems or to purchase more than 50 percent of the cost of communications equipment for such systems.(D) providing services to victims of sex offenses and prevention of sex offenses; (E) the establishment, operation, and coordination of effective and cost-efficient systems to reduce the prevalence of asthma and asthma related illnesses, especially among children; (F) related planning, administration, and educational activities; and (G) monitoring and evaluation activities related to (A) through (F).
Applicant Eligibility:	Only State and U.S. Pacific Territorial governments, the District of Columbia, the Kickapoo Tribe of Kansas and the Sante Sioux Tribe of Nebraska are eligible for Preventive Health and Health Services Block Grants.
Application Procedure:	Each State shall submit an application to the funding agency. Specific format is required, and forms are provided.
Award Procedure:	Applications are reviewed for completeness and for compliance with legislative requirements. Award is made to the applicant by the Centers for Disease Control and Prevention.
Deadlines:	Applications will be accepted beginning on October 1 of the eligible fiscal year.
Range Of Approval/ Disapproval Time:	About 3 weeks.
Range And Average Of Financial Assistance:	\$29,046 to \$9,429,807; \$2,117,686. (Note: A formula based on fiscal year 1981 allocations to States is used for the annual basic grant allocation.)
Program Accomplishments:	All 51 State, Territories, Compacts of Free Associations, the District of Columbia, and two Indian Tribes which applied for block grants received grant funds in fiscal year 2001. Similar activity is anticipated in fiscal years 2002 and 2003.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Patricia L. Brindley, Project Officer, National Center for Chronic Disease Prevention and Health Promotion (K30), Centers for Disease Control and Prevention, Department of Health and Human Services, 4770 Buford Highway, NE Atlanta, GA 30341-3724. Telephone: (770) 488-5282. Grants Management Contact: Carlos Smiley, Grants Management Officer/Contracting Officer, Branch B, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 2306, Atlanta, Georgia 30341. Telephone: (770) 488-2754.
Web Site Address:	http://www.cdc.gov .
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Compliance with requirements of application procedure.

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FUNDING OPPORTUNITIES

93.784 FEDERAL REIMBURSEMENT OF EMERGENCY HEALTH SERVICES FURNISHED TO UNDOCUMENTED ALIENS

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93.784 FEDERAL REIMBURSEMENT OF EMERGENCY HEALTH SERVICES FURNISHED TO UNDOCUMENTED ALIENS

Federal Agency:	CENTERS FOR MEDICARE AND MEDICAID SERVICES
Objectives:	To reimburse eligible providers for their otherwise un-reimbursed costs associated with furnishing emergency health services to undocumented and certain other aliens.
Types Of Assistance:	Direct Payments for Specified Use.
Uses And Use Restrictions:	Sections 1866(a)(1)(I), 1866 (a)(1)(N), and 1867 of the Social Security Act (the Act) impose specific obligations on Medicare-participating hospitals that offer emergency services. These obligations concern individuals who come to a hospital emergency department and request examination or treatment for medical conditions, and apply to all of these individuals, regardless of whether or not they are beneficiaries of any program under the Act. Section 1867 of the Act sets forth requirements for medical screening examinations of medical conditions, as well as necessary stabilizing treatment or appropriate transfer. In addition, section 1867(h) of the Act specifically prohibits a delay in providing required screening or stabilization services in order to inquire about the individual's payment method or insurance status.
Applicant Eligibility:	An eligible provider defined under the statute is a hospital, physician, or provider of ambulance services (including an Indian Health Service (IHS) facility whether operated by the IHS or by an Indian tribal or tribal organization).
Application Procedure:	On September 1, 2004, the Secretary established a provider enrollment application.
Award Procedure:	Official notice of approved claims for emergency health care services will be transmitted to eligible providers pursuant to procedures established prior to September 1, 2004 and published in the Federal Register.
Deadlines:	Established when program announcements are published in the Federal Register.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	Not applicable. This is a new project under the MMA.
Program Accomplishments:	May 9, 2005: The Section 1011 Final Policy Notice was published in the Federal Register. July 1, 2005: CMS awarded the national contract for implementation of the Section 1011 program to TrailBlazer Health Enterprises, LLC. September 27 through October 12, 2005: TrailBlazer conducted seven Section 1011 national outreach and education sessions in seven States (CA, AZ, TX, IL, NY, NM and FL). October 13, 2005: TrailBlazer implemented the Section 1011 payment request (claims) processing system. February 27, 2006: The first Section 1011 payments were made for payment requests received for the period May 10 through June 30, 2005.
Information Contacts	
Regional Or Local Office:	None.
Headquarters Office:	Program Contact: James Bossenmeyer, CMS, Center for Medicare, Management, Hospital and Ambulatory Group, 7500 Security Boulevard, Mail Stop C5-01-14, Baltimore, MD 21244. Telephone (410) 786-9317.
Web Site Address:	Not applicable.
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Not applicable.

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FUNDING OPPORTUNITIES

93.448 **FOOD SAFETY AND SECURITY MONITORING PROJECT**
93.449 **RUMINANT FEED BAN SUPPORT PROJECT**

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93.448 FOOD SAFETY AND SECURITY MONITORING PROJECT

Federal Agency:	FOOD AND DRUG ADMINISTRATION
Objectives:	To complement, develop and improve State, Indian Tribal, and local food safety and security testing programs through the provision of supplies, personnel, facility upgrades, training in current food testing methodologies and participation in proficiency testing to establish additional reliable laboratory sample analysis capacity and analysis of surveillance samples. A new program will be included to complement, develop and improve State, Indian Tribal, and local food safety and security analyses of foods and food products related to radiological terrorism or other emergency situations through the provision of supplies, personnel, facility upgrades, training in current food testing methodologies, participation in proficiency testing to establish additional reliable laboratory sample analysis capacity, participation in method enhancement activities to extend analysis capability, and analysis of surveillance samples in the event of a large-scale radiological terrorism event affecting foods or food products.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	These cooperative agreements are intended to expand participation in networks to enhance Federal, State, local and tribal food safety and security efforts. These cooperative agreements are also for the promotion of a continuing, reliable capability and capacity for laboratory sample analyses of foods and food products for the rapid detection and identification of toxic chemicals, toxins or radiological terrorism affecting foods or food products. These cooperative agreement funds cannot be used to fund or conduct food inspections for food safety regulatory agencies. They may not be used for new building construction, however remodeling of existing facilities is allowed, provided that remodeling costs do not exceed 25% of the grant.
Applicant Eligibility:	These cooperative agreement programs are only available to State, Local and Tribal government Food Emergency Response (FERN) laboratories.
Application Procedure:	An original and 2 copies of the completed Grant Application form PHS 5161-1 with copies of the appendices for each of the copies should be submitted to Usha Ganti, Chief Grants Management Officer, Food and Drug Administration, 5600 Fishers Lane, HFA-500, Rm 2107, Rockville, MD. 20857; for commercial carrier or hand delivery the address is 5630 Fishers Lane, HFA500, Rm 2107 Rockville, MD 20852. The outside of the mailing package should be labeled "Response to RFA-FDA-ORA-2006-3" for the Food Safety and Security Monitoring Project for Chemical Analysis, and "Response to RFA-FDA-2006-4" for the Food Safety and Security Monitoring Project for Radiological Analysis. If submission is electronic, the application packages are posted under the "APPLY" section of this announcement under http://www.grants.gov . The required application PHS 424 pages can be completed and submitted on-line.
Award Procedure:	All accepted applications receive a scientific review for technical merit and a recommendation for approval by an appropriate initial ad hoc review group. All approved and scored applications compete for available funds on the basis of score, scientific merit and program analysis. Geographic distribution will be a consideration in the award selection process.
Deadlines:	Applications will be due 30 days after publication in the Federal Register. All awards will be made by September 30, 2006.
Range Of Approval/ Disapproval Time:	90-120 days.
Range And Average Of Financial Assistance:	Up to \$350,000 total per award per year(direct plus indirect combined) for up to 3 years.
Program Accomplishments:	For Food Safety and Security Monitoring Program for Chemical Analysis: award of 8 cooperative agreements and supply of necessary equipment and training to begin the analysis. For the Food Safety and Security Monitoring program for Radiological Analysis: None. New program.
Information Contacts	
Regional Or Local Office:	Regional and Local Office information will be provided in the application packet, if

	applicable.
Headquarters Office:	Grants Management Contact: Usha Ganti, Division of Contracts & Grants Management, Food and Drug Administration, 5600 Fishers Lane, HFA500, Rm 2107, Rockville, MD. 20857, phone 301-827-7182, email usha.ganti@fda.hhs.gov . Program Contact: Alexandra Cossi, Division of Federal-State Relations,, Office of Regulatory Affairs (ORA), Food and Drug Administration, HFC-140, 5600 Fishers Lane, Rm 1207, Rockville, MD 20857, phone 301-827-2899, email alexandra.cossi@fda.hhs.gov .
Web Site Address:	http://www.fda.gov/ora/fed_state/default.htm ; or http://www.grants.gov
Examples Of Funded Projects:	For Food Safety and Security Monitoring Project for Chemical Analysis: Virginia Food Safety & Security Monitoring Project; Minnesota Food Safety & Security Monitoring Project; Arizona Food Safety & Security Monitoring Project. For Food Safety and Security Monitoring Project for Radiological Analysis: none.
Criteria For Selecting Proposals:	All applications will be reviewed for responsiveness by the Grants Management staff and the Office of Regulatory Affairs (ORA). To be responsive, the application must be submitted in accordance with the requirements of the Federal Register Notice and must bear the original signature of the applicant institution's/organization's authorized official. Non-responsive applications will be returned to the applicant without further consideration. If submitted electronically the signature requirement does not apply. All responsive applications will be reviewed by an ad hoc committee. Each application will be scored and ranked based on the following criteria: a) adequacy of facilities, expertise of project staff, equipment, support services, commitment to analyze surveillance samples, and quality management practices needed for the project; b) expertise in the use of gas chromatography/mass spectrometry for the analysis of foods or animal tissues; c) expertise in the use of liquid chromatography/mass spectrometry for the analysis of foods or animal tissues; d) expertise in the use of inductively coupled plasma/mass spectrometry for the analysis of foods or animal tissues; e) expertise in the use of ELISA and other antibody based analyses for the identification of toxins in foods or animal tissues; f) current food or animal tissue analysis programs; g) the rationale and design to meet the goals of the cooperative agreement; h) quality control and quality assurance procedures and practices; i) abilities and procedures in place to recall personnel, establish extended work-weeks. All funding decisions will be made by the Commissioner of Food and Drugs or his designee.

93.449 RUMINANT FEED BAN SUPPORT PROJECT

Federal Agency:	FOOD AND DRUG ADMINISTRATION
Objectives:	To assist in an increased surveillance presence throughout the commercial feed channels to prevent the introduction or amplification of BSE in the United States.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Project grants are awarded to eligible institutions in the name of the principal investigator for a discrete project. Funds are to be used for location and visitation of firms involved in the manufacture, distribution and transportation of animal feed, and operations feeding ruminant animals in their jurisdiction, to verify compliance with the ruminant feed ban. Visitations could include annual inspections of renderers, protein blenders and feed mills that manufacture animal feeds and feed ingredients utilizing materials prohibited under the ruminant feed ban that are not covered under existing FDA contracts and other agreements. Funds can be used for inspections of salvagers of food and feed, and transporters of animal feed and feed ingredients, supplies, training, laboratory equipment for feed sample testing, and as a supplement to the annual State program appropriations. Funds may not be used to replace annual State program funds for these purposes.
Applicant Eligibility:	This cooperative agreement program is only available to State and Tribal Feed/BSE regulatory programs.
Application Procedure:	Consultation of Program Staff is available by contacting the Headquarters Office listed below. The standard application forms as furnished by FDA and required by 45 CFR 92 must be used for this program. The applicant must complete PHS-5161-1 (Rev 7/00) for new and competing project grants. The application kit may be obtained by writing the Grants Management Office, 5600 Fishers Lane HFA-500, Rm 2107, Rockville, MD 20857. Telephone: 301-827-7182; email usha.ganti@fda.hhs.gov . Applicants are encouraged to apply through http://www.grants.gov/ . If applying through grants.gov the original signature requirement does not apply.
Award Procedure:	All applications are reviewed by grants management and program staff for responsiveness. Responsiveness is defined as a complete application with an original signature of the institution's authorized official. Responsive applications will be reviewed and scored by an ad hoc committee of experts for technical merit. All approved applications compete for available funds on the basis of scientific merit, program analysis and geographic consistency.
Deadlines:	Applications will be due 30 days after publication in the Federal Register.
Range Of Approval/ Disapproval Time:	Approximately 90 to 120 days.
Range And Average Of Financial Assistance:	\$250,000.
Program Accomplishments:	None. New Program.
Information Contacts	
Regional Or Local Office:	Regional office information will be provided in the application packet, if applicable.
Headquarters Office:	Alexandra Cossi, Division of Federal-State Relations, Office of Regulatory Affairs, HFC-140, 5600 Fishers Lane, room 1207, Rockville, MD 20857. Phone: 301-827-2899; email: alexandra.cossi@fda.hhs.gov .
Web Site Address:	http://www.grants.gov/ . or http://www.fda.gov/ora/fed_state/default.htm
Examples Of Funded Projects:	Florida Ruminant Feed Ban Enhancement Project; Nebraska Ruminant Feed Ban Support Project; Office of the Texas State Chemist BSE Prevention Program.
Criteria For Selecting Proposals:	The major elements in evaluating proposals include the assessment of: 1) availability of adequately trained staff; 2) detailed description of current feed regulatory program; 3) properly detailed budget that is intended to supplement State or Tribal appropriations; 4) accurate count of all feed facilities, etc., in the State or Tribal nation; 5) detailed description of how inspections are to be performed; 6) detailed descriptions of how current, non-inspected facilities will be identified and added to the State's inspection responsibilities; 7) ability to satisfy the reporting requirements; 8) provision of current

	funding level certification; 9) detailed methodology for program improvement; 10) justification for hiring new staff; and 11) detailed description of the enforcement of violative facilities; under the cooperative agreement.
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HRSA

U.S. Department of Health and Human Services
Health Resources and Services Administration

FUNDING OPPORTUNITIES

- 93.191 **ALLIED HEALTH SPECIAL PROJECTS**
- 93.192 **QUENTIN N. BURDICK PROGRAM FOR RURAL INTERDISCIPLINARY TRAINING**
Interdisciplinary Training for Health Care for Rural Areas)
- 93.224 **CONSOLIDATED HEALTH CENTERS (COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, HEALTH CARE FOR THE HOMELESS, PUBLIC HOUSING PRIMARY CARE, AND SCHOOL BASED HEALTH CENTERS)**
- 93.257 **GRANTS FOR EDUCATION, PREVENTION, AND EARLY DETECTION OF RADIOGENIC CANCERS AND DISEASES** (Radiation Exposure Screening and Education Program)
- 93.301 **SMALL RURAL HOSPITAL IMPROVEMENT GRANT PROGRAM**
- 93.359 **NURSE EDUCATION, PRACTICE AND RETENTION GRANTS** (NEPR)
- 93.912 **RURAL HEALTH CARE SERVICES OUTREACH AND RURAL HEALTH NETWORK DEVELOPMENT PROGRAM**
- 93.926 **HEALTHY START INITIATIVE** (Healthy Start)

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93.191 ALLIED HEALTH SPECIAL PROJECTS

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	Grants are awarded to assist eligible entities in meeting the costs associated with expanding or establishing programs that will: (1) expand enrollments in allied health disciplines that are in short supply or whose services are most needed by the elderly; (2) provide rapid transition training programs in allied health fields to individuals who have baccalaureate degrees in health-related sciences; (3) establish community-based training programs that link academic centers to rural clinical settings; (4) provide career advancement training for practicing allied health professionals; (5) expand or establish clinical training sites for allied health professionals in medically underserved or rural communities in order to increase the number of individuals trained; (6) develop curriculum that will emphasize knowledge and practice in the areas of prevention and health promotion, geriatrics, long-term care, home health and hospice care, and ethics; (7) expand or establish interdisciplinary training programs that promote the effectiveness of allied health practitioners in geriatric assessment and the rehabilitation of the elderly; (8) expand or establish demonstration centers to emphasize innovative models to link allied health, clinical practice, education, and research; and (9) meet the costs of projects to plan, develop, and operate or maintain graduate programs in behavioral and mental health practice.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grant funds may be used for personnel, equipment, supplies, domestic travel, consultants and guest lectures, rental of space, renovation and other costs directly related to the project as described in the approved application. Grant funds may not be used for construction of facilities, acquisition of land, foreign travel or support of students, including fellowships, stipends, tuition, fees, or travel allowances.
Applicant Eligibility:	Indian or Tribal organizations,
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Bureau of Health Professions. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Notification is made in writing by a Notice of Grant Award issued from the Headquarters Office.
Deadlines:	www.hrsa.gov
Range Of Approval/ Disapproval Time:	From 4 to 6 months after receipt of applications.
Range And Average Of Financial Assistance:	\$92,799 to \$214,390; \$155,238.
Program Accomplishments:	In FY 2005, the Allied Health Projects funded twenty-seven (27) projects nationwide. Eighteen (18) projects were awarded continuation grants and nine (9) projects were awarded new grants.
Information Contacts	
Regional Or Local Office:	Bureau of Health Professions, Health Resources and Services Administration, Room 8-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-5794.
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: (301-443-2385); Research and Training Branch: (301) 443-3099; Government and Special Focus Branch: (301) 443-3288.
Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	Multi-Tiered Geriatric Education and Training Projects; Recruitment and Development of Allied Health Professionals; Enhancement and Expansion of

	Existing Allied Health Training Programs; Enhancement of Faculty, Curriculum and Student Recruitment; Interdisciplinary Training Programs; Video Disc and Computer-Based Instructional Technologies Development; Development of auto-tutorial teaching materials; distance learning project using satellite technologies; outcomes assessment projects; and Model geriatric clinical education in Allied Health, Rural Health Education Projects.
Criteria For Selecting Proposals:	<p>The Allied Health Projects Grant Program has following seven (7) review criteria: 1. NEED (10 points) Introduction and Needs Assessment: The extent to which the application describes the problem(s), the need for and impact of Interdisciplinary collaboration, education, and training of the allied health workforce in the addressing the identified problem(s), and associated contributing factors to the problem. 2. RESPONSE (20 points) Objectives, Methodology, and Work Plan: The extent to which the proposed project responds to the Purpose included in the program description. The clarity of the proposed goals and objectives and their relationship to the identified project especially as it relates to interdisciplinary collaboration, education, and training of the allied health workforce. The extent to which the activities (scientific or other) described in the application is capable of addressing the problem and attaining the project objectives. 3. EVALUATIVE MEASURES (20 points) Project and Program Evaluation: The effectiveness of the method proposed to monitor and evaluate the project results. Evaluative measures must be able to assess 1) to what extent the program objectives have been met, 2) to what extent these can be attributed to the project, 3) to what extent the project objectives address the interdisciplinary aspects of the project including interdisciplinary collaboration, education, training, and its effect on patient-centered clinical practice, and to what extent the project objectives address the direct impact of interdisciplinary collaboration, education, and training on patient health status outcomes. 4. IMPACT (10 points) Dissemination of Outcomes and Self-Sufficiency: The extent and effectiveness of plans for dissemination of project results and/or the extent to which project results may be national in scope and/or degree to which the project activities are replicable, and/or the sustainability of the program beyond the Federal Funding. 5. RESOURCES/CAPABILITIES (10 points) Resolution of Challenges, Evaluation and Technical Support Capacity, and Organization Information: The extent to which project personnel are qualified by training and/or experience to implement and carry out the projects. The plan for project management describes a well qualified project director with a minimum of five years of experience in the education and training of allied health professionals, preferably a history of funded research, and a minimum of 10% of his/her time to the Allied Health Project Grant Program grant activities. The capabilities of the applicant organization, and quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project. For competing continuations, past performance will also be considered. 6. SUPPORT REQUESTED (5 points) Budget: The reasonableness of the proposed budget in relation to the objectives, the complexity of the activities, and the anticipated results. 7. INTERDISCIPLINARY COLLABORATION, EDUCATION, AND TRAINING (25 points) The extent to which the application addresses; 1) the interdisciplinary collaboration, education, and training of two or more separate and distinct allied health disciplines, 2) interdisciplinary collaboration, education, and training and its effect on patient-centered clinical practice, 3) the direct impact of interdisciplinary collaboration, education, and training on patient health status outcomes, and 4) the improvement of the allied health workforce as it relates to interdisciplinary practice and its effect on the target population(s). In making awards of grants under this section, preference will be given to any qualified applicant that (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings. Preference will also be given to any qualified applicant that meets four (4) or more of the following seven (7) new program criteria: (1) The mission statement of the program identifies</p>

	<p>a specific purpose of preparing health professionals to serve underserved populations; (2) The curriculum includes content that will help to prepare practitioners to serve underserved populations; (3) Substantial clinical training experience is required in medically underserved communities; (4) A minimum of <u>twenty</u> (20) percent of the faculty spend at least fifty (50) percent of their time providing/supervising care in medically underserved communities; (5) The entire program or a substantial portion of the program, (i.e., the primary, ambulatory education training sites) is physically located in a medically underserved community; (6) Student assistance, which is linked to service in medically underserved communities following graduation, is available to the students in the program; (7) The program provides a placement mechanism for deploying graduates to medically underserved communities. Preference will be given only for applications ranked above the 20th percentile of applications that have been recommended for approval by the appropriate peer review group. Based on Presidential Executive Orders 12876, 12900, 13021, and 13125, a funding priority will be given to approved applicants who devote significant resources to provide community-based training experiences designed to improve access to health care services in underserved areas; these applicants include Asian-American and Pacific Islander Serving Institutions, Hispanic Serving Institutions, Historically Black Colleges and Universities, Tribal Colleges and Universities serving <u>American Indians</u> and Alaska Natives, or an institution that collaborates with one or more of the above listed institutions.</p>
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93.192 QUENTIN N. BURDICK PROGRAM FOR RURAL INTERDISCIPLINARY TRAINING Interdisciplinary Training for Health Care for Rural Areas)

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	The goal of this program is to provide or improve access to health care in rural areas. Specifically, projects funded under this authority shall be designed to: (a) Use new and innovative methods to train health care practitioners to provide services in rural areas; (b) demonstrate and evaluate innovative interdisciplinary methods and models designed to provide access to cost-effective comprehensive health care; (c) deliver health care services to individuals residing in rural areas; (d) enhance the amount of relevant research conducted concerning health care issues in rural areas; and (e) increase the recruitment and retention of health care practitioners from rural areas and make rural practice a more attractive career choice for health care practitioners.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grant funds are awarded to eligible applicants to carry out their interdisciplinary training projects using various methods, including student stipends, post-doctoral fellowships, faculty training, and the purchase or rental of transportation and telecommunication equipment where appropriate to the rural area.
Applicant Eligibility:	Indian Tribes or Tribal organizations, or other appropriate public or private nonprofit entities, including community-based organizations.
Application Procedure:	Applications are generally solicited by a program announcement in the HRSA Preview. Applications and required forms for this program can be obtained from the HRSA Application Center, The Legin Group, Inc. 901 Russell Avenue, Suite 450, Gaithersburg, MD 20879 Telephone: 877-4772123, HRSAGAC@hrsa.gov or by visiting www.hrsa.gov/grant . Application information may also be found by visiting www.grants.gov . All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Bureau of Health Professions. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Notification in writing. A Notice of Grant Award will be issued from Headquarters Office.
Deadlines:	www.hrsa.gov .
Range Of Approval/ Disapproval Time:	From 5 to 6 months from receipt of application.
Range And Average Of Financial Assistance:	\$133,709 to \$344,077; \$250,107.
Program Accomplishments:	In FY 05, 18 noncompeting continuation awards and 5 new awards were made.
Information Contacts	
Regional Or Local Office:	Ms. Marcia Starbecker, Program Officer, Division of State, Community, and Public Health, Bureau of Health Professions, Health Resources and Services Administration, Public Health Service, Room 8A-09, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 4436867.
Headquarters Office:	Grants Management Office: Lawrence Poole, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-4433099; Government and Special Focus Branch: 301-443-3288.
Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	Funded programs were jointly sponsored, usually by academic and rural health care entities; several programs had health fairs. Emphasis was on opportunities for providing clinical services in rural areas and efforts to promote rural practice options.
Criteria For Selecting Proposals:	All applications will be evaluated by peer reviewers to determine the extent to which the applicant documents the following criteria: (1) the need for the proposed project; (2) the potential effectiveness of the proposed project in carrying out the education; (3) the potential effectiveness of the proposed project and expected outcomes; (4) the methodology includes a clearly articulated project plan; (5) the curriculum adequately addresses interdisciplinary training of health care practitioners from two

	or more disciplines; (6) the plan to recruit and select qualified trainees with a significant interest or background in rural health care; (7) the plan for project management describes as well qualified faculty, institutional and community support; (8) the fiscal plan for assuring effective use of grant funds.
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93.224 CONSOLIDATED HEALTH CENTERS (COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, HEALTH CARE FOR THE HOMELESS, PUBLIC HOUSING PRIMARY CARE, AND SCHOOL BASED HEALTH CENTERS)

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	Grants are awarded to increase access to comprehensive primary and preventive health care and improve the health status of underserved and vulnerable populations in the area to be served. Individual health center grant mechanisms include: (1) Community Health Centers; (2) Migrant Health Centers; (3) Health Care for the Homeless; (4) Public Housing Primary Care Program; and (5) School Based Health Centers.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Applications should be designed to improve the availability, accessibility and provision of primary health care services. Funds may not be used for inpatient services, or to make cash payments to intended recipients of services.
Applicant Eligibility:	Eligible applicants are public and non-profit private entities, including tribal and community-based organizations that have the capacity to effectively administer the grant .
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Bureau of Primary Health Care. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Each applicant will receive written notification of the outcome of the objective review process, including summary of the expert committee's assessment of the application's merits and weaknesses, and whether the application was selected for funding. Applicants who are selected for funding may be required to respond in a satisfactory manner to Conditions placed on their application before funding can proceed. Letters of notification do not provide authorization to begin performance. The Notice of Grant Award, which is signed by the Grants Management Officer and is sent to the applicant agency's Authorized Representative, is the authorizing document.
Deadlines:	www.hrsa.gov .
Range Of Approval/ Disapproval Time:	From 90 to 120 days
Range And Average Of Financial Assistance:	\$200,000 to \$11,000,000
Program Accomplishments:	In FY 05, it is projected that the Consolidated Health Centers programs served approximately 13.9 million patients.
Information Contacts	
Regional Or Local Office:	Director, Division Of Health Center Management, Bureau Of Primary Health Care, HRSA, 5600 Fishers Lane, Room 16C-26, Rockville, MD 20857. Telephone: (301) 594-4420
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division Of Grants Management, Health Resources And Services Administration, Department Of Health And Human Services, 5600 Fishers Lane, Room 11a-16. Health Services Branch: 301-443-2385; Research And Training Branch: 301-443-3099; Government And Special Focus Branch: 301-443-3288.
Web Site Address:	Www.Hrsa.Gov
Examples Of Funded Projects:	Community Health Centers; County Health Departments, And Other Community-Based Organizations.
Criteria For Selecting Proposals:	Criteria for selecting proposals is expected to be available in the program information notice issued in http://www.bphc.hrsa.gov/pinspals/pins.htm). All applicants are expected to demonstrate compliance with applicable requirements including the health center program expectations. In addition to these general requirements, there are specific requirements and expectations for applicants requesting funding under each of the section 330 programs. Applicants are strongly encouraged to demonstrate

	compliance with these requirements and expectations in the application. Applicants requesting funding under multiple programs are expected to demonstrate compliance with the expectations and requirements of all of those programs.
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93.257 GRANTS FOR EDUCATION, PREVENTION, AND EARLY DETECTION OF RADIOGENIC CANCERS AND DISEASES (Radiation Exposure Screening and Education Program)

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	To award grants for the purpose of enabling grantees to carry out programs for: (1) screening individuals described under section 4 (a)(1)(A)(i) or 5(a)(1)(A) of the Radiation Exposure Compensation Act (42 U.S.C. 2210 note) for cancer as a preventative health measure; (2) providing appropriate referrals for medical treatment of individuals screened under paragraph (1) and to ensure, to the extent practicable, the provision of appropriate follow-up services; (3) developing and disseminating public information and education programs for the detection, prevention, and treatment of radiogenic cancers and diseases; and (4) facilitating putative applicants in the documentation of claims as described in section 5(a) of the Radiation Exposure Compensation Act (42 U.S.C. 2210 note).
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grants are awarded to organizations that develop new or expand existing capacity to provide screening, referrals for medical treatment, education, and eligibility assistance for eligible individuals. Restrictions on the Use of Grant Funds: (1) grant funds may not be used to pay for inpatient services; (2) grant funds may not be used to make cash payments to intended recipients of primary health care services or specialty care; (3) grant funds may not be used to supplant other provider/third party coverage payments available to the patient; (4) grant funds may not be used to purchase or improve real property (other than minor remodeling of existing improvements to real property) or to purchase major medical equipment without the approval of the HRSA Grants Management Office; and, (5) not more than 10 percent of any grantee's funds shall be used for legal services to assist users in obtaining benefits under the Radiation Exposure Compensation Program.
Applicant Eligibility:	The following entities, (located within the approved States of Arizona, Colorado, Idaho, Nevada, New Mexico, North Dakota, Oregon, South Dakota, Texas, Utah, Washington or Wyoming) are eligible to apply for the funds: (4) IHS health care facilities, including programs provided through tribal contracts, compacts, grants, or cooperative agreements with the HIS and which are determined appropriate to raising the health status of Indians;
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Bureau of Primary Health Care. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Each applicant will receive written notification of the outcome of the objective review process, including summary of the expert committee's assessment of the application's merits and weaknesses, and whether the application was selected for funding. Applicants who are selected for funding may be required to respond in a satisfactory manner to conditions placed on their application before funding can proceed. Letters of notification do not provide authorization to begin performance. The Notice of Grant Award, which is signed by the Grants Management Officer and is sent to the applicant agency's authorized representative, is the authorizing document.
Deadlines:	www.hrsa.gov .
Range Of Approval/ Disapproval Time:	Approximately 180 days.
Range And Average Of Financial Assistance:	\$300,000.
Program Accomplishments:	In FY 05, BPHC awarded 7 grants, and BPHC expects to award 7 grants in FY 06 and FY 07.
Information Contacts	
Regional Or Local Office:	Division of Health Center Management, Bureau of Primary Health Care, Health Resources and Services Administration, Department of Health and Human Services,

	5600 Fishers Lane, Room 16C-26, Rockville, MD 20857. Telephone: (301) 594-4420.
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-4433099; Government and Special Focus Branch: 301-443-3288.
Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	(1) A statewide program of Radiation Exposure Screening and Education Program clinics with coordination and assistance from the State health department; and (2) an area-wide system of clinical and educational services in a rural area for Radiation Exposure victims administered by a secondary referral hospital through linkage arrangements with other provider agencies.
Criteria For Selecting Proposals:	(1) Need and Readiness -- the extent to which the applicant can demonstrate a need for these services in their area and their readiness to provide them; (2) administration -- the extent to which the applicant demonstrates that it has the administrative experience and capacity to successfully implement this program; (3) health care services -- the extent to which the applicant has the capacity to provide or arrange for the required services; (4) collaborative arrangements -- the extent to which the applicant has developed and documented collaborative arrangements with other local providers to conduct outreach, provide services and make referrals; and, (5) appropriateness of budget -- the extent to which the applicant's budget for the scope of the proposed activities.

93.301 SMALL RURAL HOSPITAL IMPROVEMENT GRANT PROGRAM

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	To help small rural hospitals: (1) pay for costs related to implementation of PPS; (2) comply with provisions of HIPAA; and (3) reduce medical errors and support quality improvement.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	All funds awarded are to be expended solely for carrying out the approved projects.
Applicant Eligibility:	All small rural hospitals located in the 50 States and Territories.
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Office of Rural Health Policy. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Applications are evaluated by Federal and Nonfederal experts. All approved applications will be funded. Final decisions on level of funding are made by the Director, Office of Rural Health Policy.
Deadlines:	www.hrsa.gov .
Range Of Approval/ Disapproval Time:	From one month to two months.
Range And Average Of Financial Assistance:	\$38,720 to \$909,920; \$319,840.
Program Accomplishments:	Approximately 1600 hospitals received awards of approximately \$9,300 each in FY 05 through 46 State Offices of Rural Health.
Information Contacts	
Regional Or Local Office:	Keith Midberry, Office of Rural Health Policy, Parklawn Building, Room 9A-55, 5600 Fishers Lane, Rockville, MD, 20857, 301-443-0835, 301-443-2669 (fax).
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-4433099; Government and Special Focus Branch: 301-443-3288.
Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	None.
Criteria For Selecting Proposals:	Applicants will be evaluated based on: (1) extent to which applicant is responsive to the requirements and purposes of this program; and (2) extent to which application describes need, strategies and investment to address those needs.

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93.359 NURSE EDUCATION, PRACTICE AND RETENTION GRANTS (NEPR)

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	Grants are awarded to eligible applicant organizations for projects to strengthen and enhance the capacity for nurse education, practice and retention to address the nursing shortage. There are three major priority areas (Education, Practice and Retention) and nine purposes associated with the three priority areas. Applicants must select and focus on one of these nine purposes in the grant application. The education priority areas are: Purpose E1) expanding enrollment in baccalaureate nursing programs; Purpose E2) developing and implementing internship and residency programs to encourage mentoring and the development of specialties; Purpose E3) providing education in new technologies, including distance learning methodologies. The practice priority areas are: Purpose P1) establishing or expanding nursing practice arrangements in noninstitutional settings to demonstrate methods to improve access to primary health care in medically underserved communities; Purpose P2) providing care for underserved populations and other high-risk groups such as the elderly, individuals with HIV/AIDS, substance abusers, the homeless, and victims of domestic violence; Purpose P3) providing managed care, quality improvement, and other skills needed to practice in existing and emerging organized health care systems; Purpose P4) developing cultural competencies among nurses. The retention priority areas are: Purpose R1) career ladder bridge programs which promote career advancement for nursing personnel and registered nurses and; Purpose R2) enhancing patient care delivery systems through improving the retention of nurses and enhancing patient care.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds may be used for salaries of personnel specifically employed for the project; consultant fees; supplies and equipment necessary to conduct the project; essential travel expenses and student stipends or scholarships; and other expenses related to the project. Restricted Uses: Indirect costs are allowed for administrative costs incurred as a result of the project, limited to 8 percent of direct costs exclusive of equipment and tuition and fees.
Applicant Eligibility:	an Indian Tribe or Tribal organization,
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Bureau of Health Professions. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Notification is made in writing by a Notice of Grant Award issued from Headquarters Office.
Deadlines:	www.hrsa.gov .
Range Of Approval/ Disapproval Time:	Approximately 6 months after receipt of applications.
Range And Average Of Financial Assistance:	\$25,000 to \$400,000; \$242,000.
Program Accomplishments:	In FY 05, 103 non-competing continuations and 38 new awards were issued. It is estimated that 98 non-competing continuations and 56 new awards will be issued in FY 06.
Information Contacts	
Regional Or Local Office:	LCDR Claudia Brown, CDR Catherine Rupinta and CDR Daniel Reed, Division of Nursing, Bureau of Health Professions, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 9-36, Rockville, MD 20857. Telephone: (301) 443-6193.
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-443-3099; Government and Special Focus Branch: 301-443-3288.

Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	The focus of the funded projects is to strengthen and enhance the capacity for nurse education, practice and retention to address the nursing shortage by: expanding enrollment in baccalaureate nursing programs; developing and implementing internship and residency programs; providing education in new technologies, including distance learning methodologies; establishing or expanding nursing practice arrangements; providing care for underserved populations and other high-risk groups; providing managed care, quality improvement, and other skills needed to practice in existing and emerging organized health care systems; developing cultural competencies among nurses; creating career ladder bridge programs which promote career advancement for registered nurses and nursing personnel; and enhancing patient care delivery systems through improving the retention of nurses and enhancing patient care.
Criteria For Selecting Proposals:	The purpose of the project must be consistent with and promote the activities identified in the law. Need must be documented, and the capability for achieving project goals must be described. In making awards of grants under this section, preference will be given to any qualified applicant with a project that will substantially benefit rural or underserved populations, or help meet public health nursing needs in State in local health departments. This preference will only be applied to applications that rank above the 20th percentile of applications recommended for approval.

93.912 RURAL HEALTH CARE SERVICES OUTREACH AND RURAL HEALTH NETWORK DEVELOPMENT PROGRAM

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	To expand access to, coordinate, restrain the cost of, and improve the quality of essential health services, including preventive and emergency services, through the development of integrated health care delivery systems or networks in rural areas and frontier regions.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	All funds awarded are to be expended solely for carrying out the approved projects.
Applicant Eligibility:	Rural Health Care Services Outreach and Rural Health Network Development Programs: a Tribal government whose grant-funded activities will be conducted within their Federally-recognized Tribal area. Small Health Care Provider Quality Improvement Program: a Tribal government whose grant-funded activities will be conducted within their Federally-recognized Tribal area (documentation of status as a Federally-recognized Native American Tribe must be included). Frontier Extended Stay Cooperative Agreement Program: a Tribal government whose grant-funded activities will be conducted within their Federally-recognized Tribal area.
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Office of Rural Health Policy. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	Applications are reviewed by Federal and nonfederal experts in rural health care services development, coordination, and delivery. Applications are evaluated for merit and are recommended for approval or disapproval. Final decisions are made by the Director, Office of Rural Health Policy.
Deadlines:	Contact Headquarters Office listed below for deadline dates.
Range Of Approval/ Disapproval Time:	From 6-9 months.
Range And Average Of Financial Assistance:	Outreach- Range: \$130-150, Maximum for first year of funding is \$150; Network Range: \$170-180, Maximum for first year of funding is \$180; Network Planning- Range: \$80-85K, Maximum for first year of funding is \$85K; Delta Program- Range: \$400K-1,000,000, Maximum for first year of funding is \$1,000,000.
Program Accomplishments:	For the Outreach Program, in FY 05, there were approx. 13 new awards and 95 continuations. In FY 06 there will be 65 new awards and 43 noncompeting continuation awards. In FY 07, based on the availability of funds, it is estimated there will be 60 new and 60 continuing awards. For the Network Development Grant Program, in FY 05, there were 10 new awards and 27 continuations. In FY 06 there will be 23 new and 15 noncompeting continuation awards. In FY 07, based on the availability of funds, it is estimated there will be 5 new and 30 continuing awards. For the Small Health Care Provider Quality Improvement Program, in FY 06 there will be 15 new awards. In FY 07 there will be up to 15 non-competing continuation awards. For the Frontier Extended Stay Cooperative Agreement Program, in FY 05 there was one new award. In FY 06, there will be one new award. In FY 07, based on the availability of funds, it is estimated there will be one new award. For Delta States Rural Development Network Grant Program, in FY 05, there were 0 new awards and 8 non-competing continuation awards. In FY 06, there will be 0 new awards and 8 non-competing continuation awards. In FY 07, based on the availability of funds, it is estimated there will be 8 new awards and 0 continuing awards.
Information Contacts	
Regional Or Local Office:	Program Contact: Nisha Patel and Jennifer Chang, Outreach Grant Program Coordinators, Office of Rural Health Policy, Health Resources and Services Administration, Room 9A-55, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-0835. Program Contact: Erica Molliver, Network

	Development Grant Program Coordinator, Office of Rural Health Policy, Health Resources and Services Administration, Room 9A-55, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-0835. Program Contact: Heather Dimeris, Small Health Care Provide Quality Improvement Program Coordinator, Office of Rural Health Policy, Health Resources and Services Administration, Room 9A-55, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-0835. Program Contact: Emily Cook, Frontier Extended Stay Clinic Cooperative Agreement Program Coordinator, Office of Rural Health Policy, Health Resources and Services Administration, Room 9A-55, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-0835. Program Contact: Lakisha Smith, Delta States Rural Development Network Grant Program, Office of Rural Health Policy, Health Resources and Services Administration, Room 9A-55, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443-0835.
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-4433099; Government and Special Focus Branch: 301-443-3288.
Web Site Address:	www.hrsa.gov
Examples Of Funded Projects:	Funded projects include efforts to provide primary care services in rural areas, including mental health services, emergency medical services, prenatal care, free clinical services, and preventive health services. In addition, projects designed to increase the number of health professionals available to provide services in rural areas have also been funded. These include upgrading nursing skills from R.N. to N.P. or C.N.S. levels or upgrading the skills of emergency medical services personnel. In addition, projects designed to improve access to rural health services (such as transportation or services on mobile vans) have also been funded. More recently projects to develop or enhance vertically integrated networks have been supported.
Criteria For Selecting Proposals:	Criteria are based on the need of the project, innovation, clearly defined roles of each network member, strength of applicant's management plan, level of local commitment, costs, and program evaluation plan

93.926 HEALTHY START INITIATIVE (Healthy Start)

Federal Agency:	HEALTH RESOURCES AND SERVICES ADMINISTRATION
Objectives:	To eliminate disparities in perinatal infant and maternal health by: enhancing a community's health care infrastructure and service system and a State's infrastructure; and directing resources and interventions to improve access to, utilization of, and full participation in comprehensive perinatal and women's health services, particularly for women and infants at higher risk for poor health outcomes.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Every Healthy Start project implements community-driven approaches to address infant mortality rates by reducing maternal behavioral and medical risk factors and promoting healthy outcomes for women and their families. Beginning with prenatal care and continuing through the infant's second year of life, each community awarded funds assures the availability of a core set of services and activities for the perinatal population in their project area. These services include case management, home visiting and links to health care and other needed services for mothers and their infants; direct outreach and peer mentoring by trained community members; screening and referral for perinatal/postpartum depression; and strong coordination with and access to substance abuse, domestic violence, mental health, early intervention, parenting and other critical services for high-risk women and families. In addition, each Healthy Start project is required to have a community-based consortium composed of individuals and organizations and that includes women and families served by their project, to collaborate with their State Title V (MCH) Agency, and to implement a local health system action plan to improve the quality, cultural competence of and access to services and/or to address other problems in the local system of care. Funds may not be used to supplant currently funded activities/services.
Applicant Eligibility:	Eligible applicants include Indian Tribes or tribal organizations (as those terms are defined at 25 U.S.C. 450b).
Application Procedure:	Grant applications and required forms for this program can be obtained from Grants.gov. Please visit the Grants.gov Web site at www.grants.gov to both find and apply for all Federal grant opportunities. All qualified applications will be forwarded to an objective review committee which will make funding recommendations to the Associate Administrator for the Maternal and Child Health Bureau. The Associate Administrator has the authority to make final selections for awards.
Award Procedure:	See specific program grant guidance.
Deadlines:	www.hrsa.gov .
Range Of Approval/Disapproval Time:	Final decisions are made approximately 166 days after receipt of applications.
Range And Average Of Financial Assistance:	\$270,000 to \$2,350,000; \$939,031
Program Accomplishments:	In FY 05, 102 projects were awarded to new and existing projects. In FY06, it is estimated that 103 projects will be awarded. It is estimated that 99 projects will be awarded for FY 07.
Information Contacts	
Regional Or Local Office:	Director, Division of Healthy Start and Perinatal Services, Maternal and Child Health Bureau, Health Resources and Services Administration, Department of Health and Human Services, Room 18-12, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 4430543.
Headquarters Office:	Grants Management Office: Oscar Tanner, Director, Division of Grants Management, Health Resources and Services Administration, Department of Health and Human Services, 5600 Fishers Lane, Room 11A-16. Health Services Branch: 301-443-2385; Research and Training Branch: 301-4433099; Government and Special Focus Branch: 301-443-3288.
Web Site Address:	www.hrsa.gov .
Examples Of Funded Projects:	From pregnancy either to the next pregnancy or 2 years post delivery for the mother and infant, every Healthy Start project assures the availability of a core set of services and system building activities to the perinatal population in the project area. Projects include a consortium, case management, outreach, health education, screening and referral for depression, collaboration with State Title V, a local health system action plan, and plans

	for sustainability.
Criteria For Selecting Proposals:	See specific program grant guidance.



FUNDING OPPORTUNITIES

- 93.123 **HEALTH PROFESSIONS PREGRADUATE SCHOLARSHIP PROGRAM FOR INDIANS**
- 93.193 **URBAN INDIAN HEALTH SERVICES** (Urban Indian Alcohol and Substance Abuse Program; Urban Mental Health; Urban Immunization and Health Promotion/Disease Prevention)
- 93.210 **TRIBAL SELF-GOVERNANCE PROGRAM: PLANNING AND NEGOTIATION COOPERATIVE AGREEMENTS AND IHS COMPACTS/FUNDING AGREEMENTS** (Tribal Self Governance)
- 93.228 **INDIAN HEALTH SERVICE-HEALTH MANAGEMENT DEVELOPMENT PROGRAM** (Indian Health)
- 93.231 **EPIDEMIOLOGY COOPERATIVE AGREEMENTS**
- 93.237 **SPECIAL DIABETES PROGRAM FOR INDIANS DIABETES PREVENTION AND TREATMENT PROJECTS** (Indian Health)
- 93.284 **INJURY PREVENTION PROGRAM FOR AMERICAN INDIANS AND ALASKAN NATIVES -COOPERATIVE AGREEMENTS** (Injury Prevention)
- 93.442 **SPECIAL DIABETES PROGRAM FOR INDIANS (SDPI) COMPETITIVE GRANT PROGRAM**
- 93.443 **HEALTH PROMOTION/DISEASE PREVENTION PROGRAM FOR AMERICAN INDIANS AND ALASKA NATIVES**
- 93.933 **DEMONSTRATION PROJECTS FOR INDIAN HEALTH**
- 93.954 **TRIBAL RECRUITMENT AND RETENTION OF HEALTH PROFESSIONALS INTO INDIAN HEALTH PROGRAMS** (Tribal Recruitment)
- 93.970 **HEALTH PROFESSIONS RECRUITMENT PROGRAM FOR INDIANS** (Recruitment Program)
- 93.971 **HEALTH PROFESSIONS PREPARATORY SCHOLARSHIP PROGRAM FOR INDIANS**
- 93.972 **HEALTH PROFESSIONS SCHOLARSHIP PROGRAM**

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93.123 HEALTH PROFESSIONS PREGRADUATE SCHOLARSHIP PROGRAM FOR INDIANS

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To provide scholarships to American Indians and Alaska Natives for the purpose of completing pre-graduate education leading to a baccalaureate degree only in the following areas: (1) Pre-Medicine: priority as follows: senior, junior, sophomore, freshman; (2) Pre-dentistry: priority as follows: senior, junior, sophomore, freshman.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Scholarship awards are limited to persons of American Indian or Alaska Native descent. Support is limited to 4 years of full-time education, or part-time equivalent for a maximum of 8 years
Applicant Eligibility:	Individuals of American Indian or Alaska Native descent , who have successfully completed high school education or high school equivalency, and have been accepted for enrollment or are enrolled in an accredited pregraduate program in a pre-medicine or pre-dentistry curriculum.
Application Procedure:	Application form OMB No. 0917-0006 and instructions are provided by the Indian Health Service and are usually available to interested individuals in February. An application form and required documentation (official transcripts, letter of acceptance by college, curriculum verification, Indian eligibility, tuition verification, faculty evaluations) are submitted to IHS Headquarters for review and approval/disapproval.
Award Procedure:	Grants are awarded on a competitive basis. Approved funding includes payments for stipends and books that are made directly to the individual recipient. Tuition and fee payments are made to the recipient's college or university.
Deadlines:	Contact IHS Area offices for application deadlines. New applications are usually available in February with a submission deadline of April 1.
Range Of Approval/ Disapproval Time:	Applicants are notified by July 31.
Range And Average Of Financial Assistance:	\$18,913 to \$27,217; \$20,049.
Program Accomplishments:	In fiscal year 2005, 48 new and 13 continuing awards were made. It is estimated that a total of 61 scholarship awards will be made in fiscal year 2006 and fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Pat Lee-McCoy, IHS Scholarship Program, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-6197. Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-0243. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	Scholarships may be awarded for any of the following career categories (or the equivalent): (1) Premedicine; (2) preoptometry; (3) predentistry; or (4) preosteopathy. The priority categories are premedicine (priority as follows: senior, junior, sophomore, freshman) and predentistry (priority as follows: senior, junior, sophomore, freshman).
Criteria For Selecting Proposals:	Applicant must be of Indian descent. Other elements considered are: (1) academic performance; (2) faculty or employer recommendation; (3) stated reasons for applying for the scholarship; and (4) the relative needs of the Indian Health Service and Indian health organizations for persons in specific health professions.

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93.193 URBAN INDIAN HEALTH SERVICES (Urban Indian Alcohol and Substance Abuse Program; Urban Mental Health; Urban Immunization and Health Promotion/Disease Prevention)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To provide health-related services to Urban Indians including: (1) Alcohol and substance abuse prevention, treatment, rehabilitation, and education; (2) mental health needs assessment and services; (3) health promotion and disease prevention services; (4) immunization services.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	These grants are limited to established urban Indian health services. The recipient organization must be an urban Indian organization with whom the Secretary has entered into a contract or grant under Title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq).
Applicant Eligibility:	Urban Indian organizations with whom the Secretary has entered into a contract or grant under Title V of the Indian Health Care Improvement Act.
Application Procedure:	This program is subject to the provisions of OMB Circular No. A-122. The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us.
Award Procedure:	Grants are awarded to all eligible organizations based on a thorough review to determine conformance with the goals of the program. Applications are processed and grants are awarded by Indian Health Service Headquarters. Funding level available to an organization is based on specific criteria in the Act to include size of urban Indian population, accessibility to, and utilization of, other health resources available to that population and identification of need for services.
Deadlines:	Contact the Headquarters Office for application deadlines.
Range Of Approval/ Disapproval Time:	Grants are approved or disapproved within 90 days of receipt of grant applications by the Indian Health Service, Division of Grants Operations.
Range And Average Of Financial Assistance:	\$114,578 to \$573,126; \$209,846.
Program Accomplishments:	Thirty-four continuing grant awards were funded in fiscal year 2005. It is estimated that 34 continuing grants will be awarded in fiscal year 2006, and it is anticipated that 34 continuing grants will be awarded in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Danielle Steward, Program Specialist, Urban Programs, Indian Health Service, 801 Thompson Avenue, Suite 200, Rockville, MD 20852. Telephone: (301) 443-4680. Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, Suite 100, Rockville, MD 20852. Telephone: (301) 443-5204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	(1) Alcohol and Substance Abuse Prevention, Intervention, After-Care and Education for Youth and Families; (2) Therapeutic Counseling; (3) Comprehensive Chemical Dependency Project; (4) Mental Health Needs Assessment; (5) Mental Health Services; (6) Immunization Services; and (7) Diabetes Prevention/Education and Obesity Control.
Criteria For Selecting Proposals:	Proposals will be reviewed by staff of the Indian Health Service to ensure compliance with the following: (1) Size of the urban Indian population; (2) accessibility to, and utilization of, other health resources available to such

	population; (3) duplication of existing Indian Health Service or other Federal grants or contracts; (4) capability of the organization to adequately perform the activities required under the grant; (5) satisfactory performance standards for the organization in meeting the goals; (6) identification of need for services; and (7) proposed methodology for accomplishing the stated goals of the program.
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93.210 TRIBAL SELF-GOVERNANCE PROGRAM: PLANNING AND NEGOTIATION COOPERATIVE AGREEMENTS AND IHS COMPACTS/FUNDING AGREEMENTS (Tribal Self Governance)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To make financial assistance awards to Indian tribes to enable them to assume programs, functions, services, and activities (PFSA) with respect to which Indian tribes or Indians are primary or significant beneficiaries, administered by the Department of Health and Human Services (DHHS) through the Indian Health Service. Cooperative Agreements: In preparation for additional tribes each fiscal year, the IHS will make Planning Cooperative Agreements available. The Planning Cooperative Agreements allows a tribe to gather information to determine the current types and extent of PFSAs and funding levels available within its service areas and to plan for the types and extent of PFSAs and funding to be made available to the tribe under a compact. The IHS will also award Negotiation Cooperative Agreements which allow tribes to prepare to negotiate for compacting under Self-Governance. Compacts/Funding Agreements: Such assumptions will be by compact/funding agreements.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	Cooperative Agreements: Establishing and operating programs to provide planning and negotiation resources to tribes interested in participating in the Tribal Self-Governance Program (TSGP). These cooperative agreements will be awarded on a one-time basis. Compacts/Funding Agreements: Funds are to be spent in accordance with P.L. 93-638 applicable regulations and negotiated compact/funding agreement terms.
Applicant Eligibility:	For planning cooperative agreements, any Federally-recognized tribe which (1) Formally requests, through a governing body action, a planning cooperative agreement for the purpose of participation in the TSGP and (2) has furnished organization-wide single audit reports as prescribed by Public Law 96-502, the Single Audit Act of 1984, as amended, for the previous 3 years that contain no uncorrected significant and material audit exceptions in the audit of the tribe's self-determination contracts or self-governance funding agreements with any Federal agency. For Negotiation Cooperative Agreements: In addition to the two criteria listed above, applicants must have successfully completed the planning phase as described at 42 CFR 137.20. Compacts/Funding Agreements: Per 42 CFR 137.18, to be eligible to participate in self-governance, an Indian tribe must have: (a) successfully completed the planning phase described in Sec. 137.20; (b) requested participation in self-governance by resolution or other official act ion by the governing body of each Indian tribe to be served; and (c) demonstrated, for three fiscal years, financial stability and financial management capability. Per 42 CFR 137-21, the Indian tribe provides evidence that , for the three years prior to participation in self-governance, the Indian tribe has had no uncorrected significant and material audit except ions in the required annual audit of the Indian tribe's self-determination contracts or self-governance funding agreements with any Federal agency. Per 42 CFR 137.26, an Indian tribe does not need to receive a planning or negotiation cooperative agreement to be eligible to participate in self-governance. An Indian tribe may use other resources to meet the planning requirement and to negotiate. For each fiscal year, an additional 50 Indian tribes that meet the eligibility criteria shall be entitled to participate in self-governance.
Application Procedure:	Cooperative Agreements: The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1-800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us.
Award Procedure:	Cooperative Agreements: Cooperative agreements are made directly by the IHS to the Indian tribal applicants, based on results of a competitive review process. Compacts are awarded to those Indian tribes or organizations who have successfully negotiated with

	IHS. Compacts/Funding Agreements: Compacts/Funding Agreements are awarded to those Indian tribes or organizations who have completed negotiations with IHS.
Deadlines:	Cooperative Agreements: Contact the Headquarters Office listed below for deadline dates. Compacts/Funding Agreements: There is no deadline for a Tribe entering into a Compact/Funding Agreement. Contact the Director, Office of Tribal Self-Governance, listed below for additional information.
Range Of Approval/ Disapproval Time:	Cooperative Agreements: Within 45 days of IHS deadline. Compacts/Funding Agreements: The time varies as these are negotiated documents.
Range And Average Of Financial Assistance:	None.
Program Accomplishments:	In fiscal year 2005, there are 71 compact, 91 funding agreements covering tribally operated facilities which include 11 hospitals, 71 health centers, one school health centers, and 189 health stations/village clinics.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Paula Williams, Director, Office of Tribal Self-Governance, Indian Health Service, 801 Thompson Avenue, Suite 240, Rockville, MD 20852. Telephone: (301) 443-7821. Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-5204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	Tribally operated facilities include hospitals, health centers, school health centers, and health stations/Alaska village clinics.
Criteria For Selecting Proposals:	For planning cooperative agreements, criteria are as follows: goals/objectives; methodology including innovativeness of approach; capability of applicant to successfully conduct the project; and budget and its effective use.

93.228 INDIAN HEALTH SERVICE-HEALTH MANAGEMENT DEVELOPMENT PROGRAM (Indian Health)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To improve the quality of the health of American Indians and Alaska Natives by providing a full range of curative, preventive and rehabilitative health services; and to improve the management capability of American Indians and Alaska Natives to assume operation of all or part of an existing Indian Health Service (IHS) direct-operated health care program.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	The assistance is used for four types of management related projects: (1) Feasibility Studies; (2) Planning; (3) Tribal Health Management Structure Development; and (4) Evaluation. Tribal management grants may not be used to support operational programs, or to supplant existing public and private resources. This assistance is available to Federally-recognized Indian Tribes and Tribal-sanctioned Tribal organizations.
Applicant Eligibility:	Federally-recognized Tribes and Tribally-sanctioned Tribal organizations.
Application Procedure:	The applicant package may be found in Grants.gov. or at http://www.ihs.gov/NonMedicalPrograms/gogp/gogp_funding.asp . Information regarding the electronic application process may be directed to Michelle G. Bulls, Grants Policy Officer at (301) 443-6528. Applications under Public Law 93-638 to staff and manage health services and facilities may be submitted to respective IHS Area Office. Tribal Management Program is processed and administered by IHS Headquarters. This program is subject to the provisions of 45 CFR 92 for Indian Tribes and OMB Circular No. A-110, if applicant is a nonprofit Tribal organization.
Award Procedure:	Grants are awarded on a competitive basis with processing and final approval by Headquarters.
Deadlines:	For Public Law 93-638 grants applications must be submitted 90 days prior to the proposed project start date. Specific types of grant projects may have specific deadlines imposed. Contact Headquarters Office for application deadlines.
Range Of Approval/ Disapproval Time:	90 days. Grants are approved/disapproved within ninety (90) days from receipt of application/proposal in IHS Headquarters.
Range And Average Of Financial Assistance:	Tribal Management Awards: range of \$50,000 to \$100,000; \$79,690. Health Services Projects: range of \$85,000 to \$185,000; \$182,140.
Program Accomplishments:	In fiscal year 2005, 18 new and 10 continuing Tribal management projects were awarded; in fiscal year 2006, 20 new and 7 continuing Tribal management projects will be awarded; and in fiscal year 2007, 23 new and seven continuing Tribal management project grants will be made. In fiscal year 2005, 20 continuing health services projects were awarded; in fiscal years 2006 and 2007, an estimated 20 continuing projects will be funded.
Information Contacts	
Regional Or Local Office:	See Appendix IV of the Catalog for Indian Health Service Area Offices.
Headquarters Office:	Program Contact: For Tribal Management Program: Ms. Patricia Spottedhorse, Program Analyst, Office of Tribal Programs, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-1104. For Health Services Projects and Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443 5204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov/nonmedicalprograms/tmg/index.asp .
Examples Of Funded Projects:	The development of: (1) A management structure (2) an evaluation of Tribal health programs; (3) a feasibility study and comprehensive health plan; (4) a management information system; (5) technical assistance; (6) a development of financial/management systems for Public Law 93-638 programs; and (7) a Federal program analysis.
Criteria For Selecting Proposals:	(1) The apparent capability of the applicant to organize and manage the proposal project successfully considering the adequacy of staff, management systems, equipment and facilities; (2) the soundness of the applicant's plan for conducting the project and for assuring effective utilization of grant funds; (3) the adequacy of the

	budget in relation to the scope of the project and available funds; and (4) the relative effectiveness of the applicant's plan to carry out each of the requirements as set forth in the application.
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93.231 EPIDEMIOLOGY COOPERATIVE AGREEMENTS

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To develop epidemiology centers and public health infrastructure through the augmentation of existing programs with expertise in epidemiology and a history of regional support. Activities should include, but not be limited to, development of surveillance for disease conditions, epidemiological analysis, interpretation, and dissemination of surveillance data, investigation of disease outbreaks, development and implementation of epidemiological studies, development and implementation of disease control and prevention programs, and coordination of activities with other public health authorities in the region. Proposed activities which cover large population and/or geographical areas that do not necessarily correspond with current Indian Health Service (IHS) administrative areas are encouraged.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grant funds may be used to develop and conduct activities to achieve epidemiology programs. The recipient activities will coordinate and participate in projects, investigations, or studies of national scope; and share surveillance and other data collected. IHS activities will convene workshops/meetings; provide technical assistance and consultation; provide training; conduct site visits; and coordinate all epidemiological activities on a national basis.
Applicant Eligibility:	Any federally recognized Indian tribe or tribal organization, as defined in Section 4(d) and 4(e) of the Indian Health Care Improvement Act, Public Law 94-437, as amended. An intertribal consortia or Indian organization, if it is incorporated for the primary purpose of improving Indian health, and it is representative of the tribes or urban Indian communities in which it is located. An urban Indian organization is defined as a nonprofit corporate body situated in an urban center eligible for services under Title V of the Indian Health Care Improvement Act, Public Law 94-437, as amended.
Application Procedure:	The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us, as furnished by Public Health Service (PHS) and required by 45 CFR 92 (State and local governments), and OMB Circular No. A-110 (nonprofit organizations) must be used for cooperative agreements under this program.
Award Procedure:	Cooperative agreements are made based on results of a competitive review process.
Deadlines:	For specific information on the application deadline, contact the Division of Grants Operations on (301) 443-5204.
Range Of Approval/Disapproval Time:	Approximately 120 days.
Range And Average Of Financial Assistance:	\$399,500 to \$540,000; \$469,750
Program Accomplishments:	In fiscal year 2005 11 projects were funded. It estimated that up to 12 projects will be funded in fiscal years 2006 and 12 in 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Dr. James Cheek; Division of Epidemiology and Disease Prevention, Indian Health Service, Headquarters West, 5300 Homestead Road, NE; Albuquerque, New Mexico 87110; Telephone: (505) 248-4132. For Grants Management Contact: Ms. Lois Hodge; Grants Management Officer, Division of Grants Operations, Indian Health Service; 801 Thompson Avenue, TMP, Suite 360; Rockville, Maryland 20852; Telephone: (301) 443-5204. (Telephone numbers are not toll-free).

Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	(1) The Northwest Portland Area Indian Health Board has established a Northwest Tribal Epidemiology Center in Portland, Oregon to serve the 39 federally-recognized tribes who are its members plus the two urban Indian organizations in the Portland Area of the Indian Health Center; and (2) The Alaska Native Tribal Health Consortium is establishing a new Alaska Native Epidemiology Center in Anchorage, Alaska, which will enhance the ability of Alaska Native health provider agencies to assess long-term changes in the health status of Alaska's 100,000 native people.
Criteria For Selecting Proposals:	Selection criteria are introduction, current capacity and project objectives, approach and results and benefits, project evaluation, organization capabilities and qualifications, and budget. Consideration will be given to applicants: (1) Proposing to provide services to large regions consisting of more than a single IHS administrative area; and (2) demonstrating evidence of past and current epidemiological activities.

93.237 SPECIAL DIABETES PROGRAM FOR INDIANS DIABETES PREVENTION AND TREATMENT PROJECTS (Indian Health)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To promote improved health care among <u>American Indians</u> /Alaska Natives through special diabetes prevention and treatment services projects with objectives and priorities determined at the local level. SDPI Reauthorization of 2002 includes a new initiative. The funding mechanism is a competitive grant program that will provide funding to selected SDPI grantees for a demonstration project to implement and evaluate defined activities in two areas - primary prevention of diabetes in people with prediabetes and prevention of cardiovascular disease in people with diabetes.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Public Law 107-360 funds (FY 2004-2008) to fund: 1) non-competitive grant programs to implement primary, secondary, and tertiary diabetic prevention and treatment and related data collection and 2) competitive demonstration projects to implement and evaluate (a) primary prevention of diabetes in people with prediabetes and (b) prevention of cardiovascular disease in people with diabetes. The award amount will include both direct and indirect costs. Grant funds may not be used for any other purpose. Funding may not be used as matching funds for other Federal programs.
Applicant Eligibility:	The Public Health Service Act, as amended, states that the following groups are eligible to apply for grants: Indian Health Service (IHS) entities: Indian tribes or tribal organizations who operate an Indian Health program. This includes program under a contract, grant, cooperative agreement or compact with the IHS under the Indian Self-Determination Act; and Urban Indian organizations that operate an urban Indian Health program. This includes programs under a grant or contract with the IHS under Title V of the Indian Health Care Improvement Act.
Application Procedure:	The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us. This program is subject to the provisions of either 45 CFR 92 or 45 CFR 74, depending upon the type of applicant organization. Applications will be reviewed by the Division of Grants Operations in Headquarters East, Indian Health Service, for eligibility and compliance with the announcement. Chief Medical Officers (CMOs) and Area Diabetes Consultants (ADCs) in IHS Area Offices will be responsible for programmatic review, addressing the soundness of the proposed services, compliance of proposed service with the legislation, and recommending the proposed costs. Applications will be rated not ranked. Grants will be awarded based on CMOs and ADCs acceptance of the applications.
Award Procedure:	After review and approval, a notice of this grant award is prepared and processed along with the appropriate notification to the public.
Deadlines:	Contact the Division of Grants Operations, Headquarters Office for information regarding application deadline dates. Deadline dates are also noted in the grant announcement.
Range Of Approval/ Disapproval Time:	Funds are expected to be awarded no later than 45 days after complete applications are received. Awards could be delayed for applications not meeting initial approval.
Range And Average Of Financial Assistance:	Public Law 107-360 funds: Non-competitive grant programs range is \$46,000 to \$5 million and average is \$350,350. Competitive grants receive one of two specified amounts depend on size of demonstration

	project: \$324,300 or \$397,100.
Program Accomplishments:	Of the Public Law 107-360 funds: In FY 2004 and FY 2005, 330 noncompetitive grants and 66 competitive grants were awarded. It is estimated that a similar number of grant awards will be made in FY 2006, FY 2007, and FY 2008.
Information Contacts	
Regional Or Local Office:	Not applicable
Headquarters Office:	Program Contact: Dr. Kelly Acton, Director, Division of Diabetes Treatment and Prevention, 5300 Homestead Road, NE., Albuquerque, New Mexico 87110. Telephone: (505) 248-4182. Fax: (505) 248-4188. Grant Management contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 4435204. Fax: (301) 443- 9602.
Web Site Address:	IHS Division of Diabetes Treatment and Prevention: http://www.ihs.gov/medicalprograms/diabetes . IHS Division of Grants Operations and Grants Policy: http://www.ihs.gov/NonMedicalPrograms/gogp .
Examples Of Funded Projects:	Non-competitive grant programs: Examples include primary prevention efforts to prevent the onset of diabetes in people at risk for the disease and have not been diagnosed with diabetes (such as nutrition and exercise programs); or secondary prevention efforts to prevent complications of diabetes such as kidney disease, eye disease, heart disease, and amputations in patients diagnosed with diabetes; and tertiary prevention efforts to prevent or delay morbidity and mortality in patients with diabetes already having complications from the disease. Competitive grant programs: Two types of demonstration programs have been funded: 1) prevention of diabetes in patients diagnosed with prediabetes and 2) prevention of cardiovascular disease in patients diagnosed with type 2 diabetes
Criteria For Selecting Proposals:	For Public Law 107-360 funds (from FY 2004 through 2008), all grant programs reapply for continuation funding only.

93.284 INJURY PREVENTION PROGRAM FOR AMERICAN INDIANS AND ALASKAN NATIVES -COOPERATIVE AGREEMENTS (Injury Prevention)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To improve the quality of the health of American Indians and Alaska Natives by developing the capacity of tribes to address their injury problems.
Types Of Assistance:	Project Grants (Cooperative Agreements).
Uses And Use Restrictions:	The assistance is used for three types of injury prevention related projects: (1) Part I Basic: Build or enhance local injury prevention capacity; and (2) Part II Intervention: Implement a proven or promising injury prevention intervention. This assistance is available to federally-recognized Indian tribes, tribal organizations, and urban Indian organizations.
Applicant Eligibility:	Federally-recognized tribes, tribal organizations, non-profit organizations serving primarily American Indians and Alaska Natives, and urban Indian organizations may apply.
Application Procedure:	Standard application forms, as furnished by IHS and required by 45 CFR, 92, for State and local governments and 45 CFR, 74, for nonprofit organizations, must be used for this program. Injury Prevention Programs are processed and administered by IHS Headquarters. This program is subject to the provisions of 45 CFR 92 for Indian tribes and Part 74 for Nonprofit organizations, and OMB Circulars No. A-110 and A-102.
Award Procedure:	Cooperative agreements are awarded on a competitive basis with processing and final approved by Indian Health Service Headquarters.
Deadlines:	Cooperative agreement applications must be submitted as required in the program announcement.
Range Of Approval/ Disapproval Time:	Cooperative agreements are approved/disapproved within 90 days to 120 days from receipt of the application/proposal in IHS Headquarters.
Range And Average Of Financial Assistance:	Injury Prevention: Part I Basic Core Capacity Injury Prevention up to \$75,000; Part II Injury Intervention up to \$10,000.
Program Accomplishments:	In fiscal year 2005, a total of 35 cooperative agreements were funded. It is estimated that 33 cooperative agreements will be awarded in fiscal year 2006 and fiscal year 2007.
Information Contacts:	
Regional Or Local Office:	See Appendix IV of the Catalog for Indian Health Service Area Offices.
Headquarters Office:	Injury Prevention Program Contact: Ms. Nancy Bill, Injury Prevention Program Manager, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-1054. For Grants Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-5204. Use the same number for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	Basic Core Capacity Injury Prevention Program Development or Enhanced Injury Prevention Program Development, implementation of proven or promising injury prevention projects that are based on addressing local injury problems and provision of training for tribes, tribal organizations, and urban Indian organizations to address local injury prevention issues and concerns.
Criteria For Selecting Proposals:	(1) The apparent capability of the applicant to organize and manage the proposed project successfully considering the adequacy of staff, management systems, equipment and facilities; (2) the soundness of the applicant's plan for conducting the project and for assuring effective utilization of grant funds; (3) the adequacy of the budget in relation to the scope of the project and available funds; and (4) the relative effectiveness of the applicant's plan to carry out each of the requirements as set forth in the application

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93.442 SPECIAL DIABETES PROGRAM FOR INDIANS (SDPI) COMPETITIVE GRANT PROGRAM

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	The Indian Health Service (IHS) announces a new initiative under the Special Diabetes Program for Indians (SDPI). This funding mechanism is a competitive grant program that will provide funding to selected SDPI grantees for a demonstration project to implement and evaluate defined activities in one of two areas (primary prevention of diabetes or prevention of cardiovascular disease in people with diabetes).
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds (including direct costs and allowable indirect costs) may be used only for expenses clearly related and necessary to carry out approved activities that will support the implementation and evaluation of demonstration projects under this competitive grant program.
Applicant Eligibility:	Applicants eligible to receive an award under this announcement are SDPI grant recipients. The applicant must be one of the following entities: IHS hospital or clinic, federally recognized Tribes, Title V Urban Indian Health Programs or consortia of any of the above.
Application Procedure:	Applications can be found in the grants.gov. Applications will also be available on request from the IHS National Diabetes Program at the following address: 5300 Homestead Road, NE, Albuquerque, NM 87110, telephone 505-248-4182, fax 505-248-4188, email address: diabetesprogram@mail.ihs.gov. The application will be posted on the IHS National Diabetes Program web site at www.ihs.gov/medicalprograms/diabetes and on the HHS Grants web site at www.grants.gov on or before June 1, 2005. Applicants may submit one application for one or both demonstration projects. A separate application is required for each demonstration project. Applicants will be funded for only one project (primary prevention of diabetes or prevention of cardiovascular disease in people with diabetes). Tribal Approval of Application/Letter of Support: It is the policy of the IHS that all projects involving AIAN tribes be approved by the Tribal governments with jurisdiction. Therefore, the following documentation is required as part of this application: 1) For federally recognized Indian tribe - a resolution of support from the Tribal government must be a part of the application. Applications that involve more than one Indian tribe must include resolutions of support from all participating tribes. 2) For an eligible consortium of tribes - a resolution of support from each tribe of the consortium must be included. 3) For Title V Urban Indian Health Programs - a letter of support from the program's board must be included. 4) For IHS hospitals or clinics - a letter of support from the Service Unit Director or Chief Executive Officer must be included. 5) For all applicants - letters of support from all partners and collaborating entities. The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1-800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us. Upon receipt, IHS will administratively review applications by completeness and responsiveness. Applications that are incomplete, non-responsive to this RFA, do not meet eligibility criteria or do not follow the guidelines of the SF 424 will be returned to the applicant without further consideration. Applications will be evaluated for technical merit by appropriate peer review groups convened by the IHS National Diabetes Program in accordance with established criteria.
Award Procedure:	Anticipated Announcement Date of Awards: August 30, 2006 Anticipated Award Date: September 29, 2006. Applicants will only be eligible to receive one award

	<p>for funding in one area (i.e. primary prevention of diabetes or prevention of cardiovascular disease in people with diabetes. Priorities for funding will be based on the technical merit of the application, the assessed potential of the applicant and the likelihood of the applicant to successfully implement the defined interventions. Awards will be made only to organizations with financial management systems and management capabilities that are acceptable under PHS Policy. Awards will be administered under the PHS Grants Policy Statement. Awards will be subject to the availability of funds and grants will be administered in accordance with applicable Office of Management and Budget (OMB) Circulars, Department of Health and Human Services grant regulations at 45 CFR Parts 74 and 92, the Public Health Service Grants Policy Statement and other applicable IHS policies and procedures such as the regulations governing protection of human subjects at 45 CFR Part 46. Grants Management will not award a grant without an approved application in conformance with regulatory and policy requirements and which describes the purpose and scope of the project to be funded. When the application is approved for funding, the Grants Management Office will prepare a Notice of Grant Award with special terms and conditions binding upon the award and refer to all general terms applicable to the award.</p>
Deadlines:	<p>Letter of Intent Deadline: June 1, 2006. Prospective applicants are asked to submit a letter of intent that includes the selected area for the application (primary prevention of diabetes or prevention of CVD in people with diabetes), the name, address, and telephone number of the Project Director and its Program Coordinator, and the number and title of this RFA. The letter of intent must be received by the IHS National Diabetes Program, 5300 Homestead Road NE, Albuquerque, NM 87110, telephone 505-248-4182, fax 505-248-4188, email: mary.tso@mail.ihs.gov, before 6:00 pm MDT on June 1, 2006. Letters may be submitted by mail, fax, or email. Although a letter of intent is not required, is not binding, and does not enter into the review of a subsequent application, the information that it contains allows the IHS staff to estimate the potential review workload and avoid conflict of interest in the review. Application and Resolution Date: July 1, 2006. The applications must be received before 6:00 pm MDT on July 1, 2006. If an application is received after that date, it will be returned to the applicant without review. To be considered timely, an application must be received on or before the deadline date. No additional materials received after the deadline will be considered. Applications not meeting the deadline date specified in the announcement are considered late applications and will not be considered for funding under the announcement. Receipt of applications will be acknowledged by postcard.</p>
Range Of Approval/ Disapproval Time:	<p>The anticipated date for the announcement of selectees is 60 days after the application due date.</p>
Range And Average Of Financial Assistance:	<p>The total amount of funding available is \$23,300,000 and the number of anticipated awards will be approximately 60 (30 in each intervention area). The expected amount of individual awards will vary based on size of the program, and will vary from \$200,000 to \$300,000 per year.</p>
Program Accomplishments:	<p>None to date. This competitive grant program is a new initiative under the 2002 Reauthorization of the Special Diabetes Program for Indians grant program, Public Law 107-360</p>
Information Contacts	
Regional Or Local Office:	<p>Not applicable.</p>
Headquarters Office:	<p>Program Contact: Dr Kelly Acton or Lorraine Valdez, BSN, MPA, CDE IHS National Diabetes Program 5300 Homestead Road NE Albuquerque, NM 87110 Telephone 505-248-4182 Fax 505-248-4188 Email: diabetesprogram@mail.ihs.gov Grants Management Office Contact: Ms. Denise Clark, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360 Rockville, MD 20852. Telephone: 301-443-5204, Fax 301-443-9602.</p>
Web Site Address:	<p>IHS National Diabetes Program: http://www.ihs.gov/medicalprograms/diabetes; http://www.grants.gov</p>
Examples Of Funded	<p>None.</p>

Projects:	
Criteria For Selecting Proposals:	<p>Applications will be evaluated in accordance with the criteria stated below for technical merit by appropriate peer review groups convened by the IHS National Diabetes Program. Applications will be reviewed and scored according to the quality of their responses to the requirements listed below for developing the project narrative: 1) statement of need, 2) proposed implementation approach, 3) management plan and staffing, and 4) evaluation plan. The IHS National Diabetes Program will convene 2 review groups, one for each area in this initiative. The recommendations from the review committees will be considered by the IHS NDP. The Director of the IHS NDP will make the final funding decisions in consideration of the following points, some of which were based on input from the tribal consultation: strengths and weaknesses of the application as identified by peer reviewers, likelihood of success in implementation of the activities, demonstrated capacity of the applicant for programmatic implementation, availability of funds, and other factors based on tribal consultation including distribution of awards in terms of geography and balance among program size, program type (i.e. IHS, Tribal, urban vs. rural, hospital, clinic, etc.) Awards will be made only to organizations with financial management systems and management capabilities that are acceptable under PHS Policy. Awards will be administered under the PHS Grants Policy Statement.</p>

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93.443 HEALTH PROMOTION/DISEASE PREVENTION PROGRAM FOR AMERICAN INDIANS AND ALASKA NATIVES

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To create healthier American Indian/Alaska Native (AI/AN) communities by developing, implementing, and coordinating innovative and effective community and clinic-based interventions programs designed to promote health and prevent chronic disease and disability.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	This assistance is available to Federally-recognized Indian Tribes, Tribal organizations, and urban Indian organizations. This assistance is used to develop, implement, and coordinate innovative and effective community and clinic-based interventions programs to promote health and prevent chronic disease. Funds (including direct and allowable indirect costs) may be used for expenses directly related and necessary to carry out approved activities that will support the implementation and evaluation of projects under this competitive grant program.
Applicant Eligibility:	Federally-recognized tribes, tribal organizations, nonprofit organizations primarily American Indians and Alaska Natives, and urban Indian organizations may apply.
Application Procedure:	The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us. Health Promotion/Disease Prevention program are processed and administered by IHS Headquarters. This program is subject to the provisions of 45 CFR Part 92 for Indian tribes and Part 74 for Nonprofit organizations, and OMB Circulars No. A-110, A-122, A-87, and A-102.
Award Procedure:	Grants are awarded on a competitive basis with processing and final approval by Indian Health Service Headquarters.
Deadlines:	Contact the Headquarters Office for application deadlines.
Range Of Approval/ Disapproval Time:	Grants are approved or disapproved within 90 days of receipt of grant applications by the Indian Health Service, Division of Grants Operation.
Range And Average Of Financial Assistance:	None. New Program.
Program Accomplishments:	Twenty grant awards were funded in fiscal year 2005. It is anticipated that 13 new grants will be awarded in fiscal year 2006, and it is anticipated that 13 continuing grants will be awarded in fiscal year 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Ms. Alberta Becenti, Health Promotion/Disease Prevention Coordinator, Indian Health Service, 801 Thompson Avenue, Suite 300, Rockville, MD 20852. Telephone: (301) 443-4305. Grants Management Contact: Ms. Denise Clark, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-5204.
Web Site Address:	http://www.ihs.gov
Examples Of Funded Projects:	(1) Diabetes Prevention, (2) Obesity Prevention, Youth and Children, (3) Alcohol Intervention for Youth, (4) Physical Activity, (5) Women's Health, (6) Tobacco Prevention, and (6) Strengthen Families.
Criteria For Selecting Proposals:	Applications will be evaluated in accordance with the criteria stated below for technical merit by appropriate peer review groups convened by the IHS Health Promotion/Disease Prevention Program. Applications will be reviewed and rated on the basis of the evaluation criteria listed for developing the project narrative: 1)

	<p>background and needs, 2) intervention plan, 3) plans for monitoring and program evaluation, 4) organizational capabilities and qualifications, and 5) communication and information sharing. Proposals will be reviewed for merit by the Objective Review Committee consisting of at least three federal and three nonfederal reviewers appointed by the IHS. The technical review process ensures the selection of quality projects in a national competition for limited funding. After review of the applications, rating scores will be compared, and the application with the highest rating score are selected to receive funding.</p>
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93.933 DEMONSTRATION PROJECTS FOR INDIAN HEALTH

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To promote improved health care among American Indians and Alaska Natives through research studies and demonstration projects, addressing such issues as Elder Care, Women's Health Care, and Children & Youth Initiative.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Federal assistance is to be used for the following purposes: (1) Research, analysis, and investigation of a broad range of issues affecting the health of American Indians and Alaska Natives; and (2) demonstration projects and studies that provide American Indians/Alaska Natives with impetus and involvement in their health care and that promote improved health care to Indian people.
Applicant Eligibility:	Federally recognized Indian tribes; tribal organizations; nonprofit intertribal organizations; nonprofit urban Indian organizations contracting with the Indian Health Service under Title V of the Indian Health Care Improvement Act.
Application Procedure:	This program is subject to the provisions of either 45 CFR, Part 92 or OMB Circular No. A-110 depending upon the type of applicant organization. The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1-800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us.
Award Procedure:	After review and approval, a notice of award is prepared and processed, along with appropriate notification to the public.
Deadlines:	Contact the Division of Grants Operations, Headquarters Office, for information regarding application deadline dates.
Range Of Approval/ Disapproval Time:	From 90 to 120 days.
Range And Average Of Financial Assistance:	\$27,000 to \$300,000; \$115,000.
Program Accomplishments:	In fiscal year 2005, 19 continuing children & youth initiative grants were awarded; and fiscal years 2006 and 2007, the 19 projects are expected to be funded. In fiscal year 2005, 19 continuing elder care initiatives grants were awarded; and it is anticipated that the 19 continuing awards will be made in fiscal years 2006 and 2007. In fiscal year 2005, 6 continuing Indian women's demonstration grants were awarded; and it is anticipated that the 6 continuing grants will be funded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: For Elders Health Program contact: Dr. Bruce Finke, Nashville Area Elder Health Consultant, 45 Vernon Street, Northampton, MA 01060. Telephone: (413) 584-0790. For Indian Women's Health Demonstration Program Contact: Ms. Carolyn Aoyama, Nurse Consultant, Division of Nursing Services, 801 Thompson Avenue, Suite 300, Rockville, MD 20852. Telephone: (301) 443-1840. For Children & Youth Initiative Program contact: Ms. Judith Thierry, Maternal and Child Health Coordinator, Office of Public Health, 801 Thompson Avenue, Suite 300, Rockville, MD 20852. Telephone: (301) 443-5070. For Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360 Rockville, MD 20852. Telephone: (301) 4435204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded	(1) National Indian Health Board is conducting a tribal health care advocacy

Projects:	demonstration project to provide advice and consultation on behalf of Indian health care consumers to improve health care delivery in Indian communities; and (2) Southeast Alaska Regional Health Consortium is providing an expansion of WISEWOMEN program to serve all adult Alaska Native women in Southeast Alaska.
Criteria For Selecting Proposals:	The selection criteria are: Statement of problem(s) requiring solution; need for assistance; results or benefits expected from the project; approach or soundness of the applicant's plan for conducting the project; key personnel and their capability to carry out the project; and adequacy of management controls. Consideration will be given to the demonstrative aspects of the project and the compatibility of the project with the overall goals and objectives of the Indian Health Service.

93.954 TRIBAL RECRUITMENT AND RETENTION OF HEALTH PROFESSIONALS INTO INDIAN HEALTH PROGRAMS (Tribal Recruitment)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To make financial assistance awards to Indian tribes and tribal and Indian health organizations to enable them to recruit, place, and retain health professionals to fill critical vacancies and to meet the staffing needs of Indian health programs and facilities including those administered by the Indian Health Service (IHS).
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Establishing and operating programs designed to recruit and retain health professionals into Indian health programs and facilities.
Applicant Eligibility:	Any federally-recognized Indian tribe or tribal or Indian health organization is eligible to apply.
Application Procedure:	The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us.
Award Procedure:	Grants are made directly by the Indian Health Service to applicant agency, based on results of competitive review process.
Deadlines:	Contact Headquarters Office listed below for application deadline.
Range Of Approval/ Disapproval Time:	Within 90 days of IHS deadline.
Range And Average Of Financial Assistance:	\$60,000 to \$100,000; \$82,900.
Program Accomplishments:	In fiscal year 2005, six continuing awards were issued. It is estimated that six continuing awards will be funded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	For program information, contact Mr. Darrell Pratt, Leader, Health Professions Manager, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-5710. For grants management information, contact Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-5204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Need - Is the need for the project justified? If a project targets urban Indian health programs, is there justification and documentation for conducting activities at that site? Do proposed efforts complement and expand past recruitment efforts? Approach - Are the objectives well stated? Is the applicant's work plan for conducting the project sound and effective? Is the approach innovative? Are the activities proposed cost effective and will they lead to effective recruitment, placement, and retention? Adequacy of Management Controls - Is the applicant capable of successfully conducting the project both from a technical and business standpoint? Is the proposed interaction with IHS staff adequate for an application for recruitment of Federal staff? Is the budget sound in relation to the work plan and does it assure effective utilization of grant funds? Are the facilities and equipment adequate? Key Personnel - Regarding the position descriptions, are the qualifications of key personnel appropriate and adequate to carry out the project? If a resume is provided,

	are the individual's qualifications and experiences consistent with the position description and conduct of the project?
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93.970 HEALTH PROFESSIONS RECRUITMENT PROGRAM FOR INDIANS (Recruitment Program)

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	(1) To identify American Indians and Alaska Natives with a potential for education or training in the health professions, and to encourage and assist them to enroll in health or allied health professional schools; (2) to increase the number of nurses, nurse midwives, nurse practitioners and nurse anesthetists who deliver health care services to American Indians and Alaska Natives; and (3) to place health professional residents for short-term assignments at Indian Health Service (IHS) facilities as a recruitment aid.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Establishing and operating programs designed to recruit American Indians and Alaska Natives into health and allied health professional schools.
Applicant Eligibility:	Public or private nonprofit health or educational entities or Indian tribes or tribal organizations as specifically provided in legislative authority.
Application Procedure:	The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact Grants.gov Customer Support at 1800-518-4726 or support@grants.gov. The Contact Center hours of operation are Monday-Friday from 7:00 a.m. to 9:00 p.m. (Eastern Standard Time). If you require additional assistance please contact Michelle G. Bulls, Grants Policy Officer at (301) 443-6528 at least fifteen days prior to the application deadline. To submit an application electronically, please use the http://www.Grants.gov apply site. Download a copy of the application package, on the Grants.gov website, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us. This program is subject to the provisions of 45 CFR, Part 92 for State and local governments and OMB Circular No. A-110 for nonprofit organizations.
Award Procedure:	Grants are made directly by the Indian Health Service to applicant agency, based on results of competitive review process.
Deadlines:	Contact Headquarters Office for application deadlines.
Range Of Approval/ Disapproval Time:	Within 90 days of IHS deadline.
Range And Average Of Financial Assistance:	\$300,000 to \$500,000; \$224,600.
Program Accomplishments:	In fiscal year 2005, 11 continuing projects were awarded. In fiscal years 2006 and 2007, 11 continuing projects are expected to be funded.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	For Health Professions Recruitment and Health Resident Recruitment Contact: Mr. Darrell Pratt, Leader, Health Professions Manager, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-5710. For Nursing Recruitment Contact: Ms. Sandra Haldane, Director, Division of Nursing Services, Indian Health Service, 801 Thompson Avenue, Suite 300, Rockville, MD 20852. Telephone: (301) 443-1026. Grants Management Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP. Suite 360, Rockville, MD 20852. Telephone: (301) 443-5204. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	(1) The University of North Dakota recruited Indians into its medical and health care programs; and (2) the Arizona State University recruited students for nursing careers, and provided scholarship support through the grant.
Criteria For Selecting Proposals:	(1) Potential effectiveness of the proposed project in carrying out such purposes, (2) the demonstrated capability of the applicants to successfully conduct this type of project, (3) accessibility of the applicant to the target population, (4) relationship of project objectives and known or anticipated Indian health manpower objectives, (5) soundness of the fiscal plan, (6) cost reasonableness, and (7) completeness of the application.

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93.971 HEALTH PROFESSIONS PREPARATORY SCHOLARSHIP PROGRAM FOR INDIANS

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To make scholarships to American Indians and Alaska Natives for the purpose of completing compensatory pre-professional education to enable the recipient to qualify for enrollment or re- enrollment in a health professions school or curriculum.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Scholarship awards are limited to persons of American Indian or Alaska Native descent. Awards are limited to a maximum of 2 years of full-time scholarship support under this section of the Indian Health Care Improvement Act.
Applicant Eligibility:	Scholarship awards are made to individuals of American Indian or Alaska Native descent, who have successfully completed high school education or high school equivalency and who have been accepted for enrollment in a compensatory, pre-professional general education course or curriculum.
Application Procedure:	Application forms and instructions are provided by the Indian Health Service (IHS) Scholarship Program acting through the IHS Area Program Offices. Application forms and required documentation (official transcripts, letter of acceptance by college, curriculum verification, Indian eligibility, tuition verification, faculty evaluations) should be submitted to IHS Headquarters for review and approval/disapproval.
Award Procedure:	Payments for stipends and books are made directly to the individual applicant. Tuition payments and fees are made to the college or university, upon receipt of an invoice.
Deadlines:	Contact IHS Area offices for application deadlines. New applications are usually available to interested individuals in February with a submission deadline of April 1.
Range Of Approval/ Disapproval Time:	Applicants are notified by July 31.
Range And Average Of Financial Assistance:	\$17,500 to \$26,019; \$17,366.
Program Accomplishments:	For fiscal year 2005, 54 new and 44 continuation scholarship awards were made. It is estimated that 98 continuation scholarship awards will be funded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	See Appendix IV of the Catalog for Indian Health Service Area Offices.
Headquarters Office:	Program Contact: Ms. Patricia Lee-McCoy, Scholarship Branch, Division of Health Professions Support, 801 Thompson Avenue, Suite 450A, Rockville, MD 20852. Telephone: (301) 443-6197. Grants Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-0243. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	In fiscal year 2005, continuing scholarship recipients will be funded in the pre-professional categories of pre-nursing, pre-medical technology, pre-physical therapy, pre- engineering, pre-sanitation, and pre-pharmacy only.
Criteria For Selecting Proposals:	Applicant must be American Indian or Alaska Native. Other elements considered are: (1) Academic performance; (2) faculty recommendation; (3) stated reasons for asking for the scholarship; (4) goals of the individual; and (5) the relative needs of the IHS and Indian health organizations for persons in specific health professions are taken under consideration.

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93.972 HEALTH PROFESSIONS SCHOLARSHIP PROGRAM

Federal Agency:	INDIAN HEALTH SERVICE
Objectives:	To provide scholarships to American Indians and Alaska Natives at health professions schools in order to obtain health professionals to serve Indians. Upon completion, scholarship recipients are obligated to serve in the Indian Health Service or an Indian health organization for each year of support with a minimum of 2 years.
Types Of Assistance:	Project Grants
Uses And Use Restrictions:	Scholarships support students who pursue full-time or part-time courses of study in health professions needed by the Indian Health Service (IHS). Disciplines have included allopathic and osteopathic medicine, dentistry, nursing (baccalaureate and graduate), public health nutrition (graduate), medical social work (graduate), speech pathology/audiology (graduate), optometry, pharmacology and health care administration. Not all disciplines participate each year. Scholarships may not be awarded to students who have conflicting service obligations after graduation or who are not enrolled members of Federally-recognized tribes. Recipients are required to perform 1 year of obligated service for each year of scholarship support, with a minimum obligation of 2 years in the Indian Health Service, or in a program conducted under a contract entered into under the Indian Self-Determination Act; or in an Indian health organization assisted under Title V of the Indian Health Care Improvement Act; or in private practice in a Health Manpower Shortage Area which addresses the health care needs of a substantial number of Indians. Deferment for internship, residency, or other advanced clinical training for medical, osteopathy, and dental students is generally not to exceed 3 years, consistent with the specialty needs of the IHS. Currently, 4-year deferments may be granted for obstetrics-gynecology and psychiatry residencies.
Applicant Eligibility:	Individuals of American Indian or Alaska Native who are enrolled members of a Federally-recognized tribe are eligible. Applicants for new awards: (1) must be accepted by an accredited U.S. educational institution for a full-time or part-time course of study leading to a degree in medicine, osteopathy, dentistry, or other participating health profession which is deemed necessary by the Indian Health Service; (2) be eligible for or hold an appointment as a Commissioned Officer in the Regular or Reserve Corps of the Public Health Service; or (3) be eligible for civil service in the Indian Health Service.
Application Procedure:	Application forms and instructions are provided by the Indian Health Service Scholarship Program, acting through the IHS Area offices.
Award Procedure:	Priority will be given to applicants who are prior recipients. Special consideration is given to junior and senior level students whose specialty plans are in primary care fields. Criteria which determine competitive ranking awards may include: (1) work experience, preferably health-related in communities of health care need; (2) personal background from a community of health care need; (3) career goals of primary care practice in service to Indians; and, (4) academic performance. Student financial need does not affect selection.
Deadlines:	Contact IHS Area offices for application deadlines. New applications are available to interested individuals usually in February with a submission deadline of April 1.
Range Of Approval/ Disapproval Time:	Applicants notified by July 31.
Range And Average Of Financial Assistance:	\$24,128 to \$38,222; \$24,694.
Program Accomplishments:	In fiscal years 2005, 78 new and 196 continuing scholarships were awarded. Approximately the same number of awards will be funded in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	See Appendix IV of the Catalog for Indian Health Service Area Program Offices.
Headquarters Office:	Program Contact: Ms. Pat Lee-McCoy, IHS Scholarship Program, Division of Health Professions Support, Indian Health Service, 801 Thompson Avenue, Suite 120, Rockville, MD 20852. Telephone: (301) 443-6197. Grants Contact: Ms. Lois Hodge, Grants Management Officer, Division of Grants Operations, Indian Health Service,

	801 Thompson Avenue, TMP, Suite 360, Rockville, MD 20852. Telephone: (301) 443-0243. Use the same numbers for FTS.
Web Site Address:	http://www.ihs.gov .
Examples Of Funded Projects:	In fiscal year 2005, there were 274 scholarships awarded to students in the following categories: nursing, medicine, medical technology, health administration, x-ray technology, optometry, dentistry, pharmacy, dental hygiene, dietetics, masters of public health, health education, chemical dependency counseling, health records, engineering, physician assistant, sanitation, and physical therapy.
Criteria For Selecting Proposals:	(1) Academic performance; (2) faculty recommendations; (3) stated reasons for asking for the scholarship; (4) goals of the individual; and (5) the relative needs of the IHS and Indian health organizations for persons in specific health professions.

FUNDING OPPORTUNITIES

- 93.187** **UNDERGRADUATE SCHOLARSHIP PROGRAM FOR INDIVIDUALS FROM DISADVANTAGED BACKGROUNDS** (NIH Undergraduate Scholarship Program; UGSP)

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93.187 UNDERGRADUATE SCHOLARSHIP PROGRAM FOR INDIVIDUALS FROM DISADVANTAGED BACKGROUNDS (NIH Undergraduate Scholarship Program; UGSP)

Federal Agency:	NATIONAL INSTITUTES OF HEALTH
Objectives:	To provide service-conditioned scholarships to individuals from disadvantaged backgrounds who agree to pursue undergraduate education at accredited institutions. Individuals must pursue a course of academic study which prepares them for professions needed by the National Institutes of Health (NIH). NIH expects to facilitate interest of these individuals in pursuing careers in the biomedical/biobehavioral sciences at the NIH.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	This program will provide scholarships to individuals who are enrolled or accepted for enrollment as full-time students at an accredited undergraduate institution of higher education and who are from disadvantaged backgrounds. Each recipient must agree by written contract to serve as an NIH employee full-time for not less than 10 consecutive weeks of each year during which the individual is attending the undergraduate institution and receiving a scholarship; and, not later than 60 days after obtaining the educational degree, each recipient must begin serving as a full-time NIH employee for one year for each year of NIH scholarship support (a deferment of the service obligation may be obtained if the Director, NIH, determines that such is appropriate). Applicants must submit a proposed academic program for each academic year and agree that this program will not be altered without prior approval. The applicant must be in good academic (maintain a minimum GPA of 3.5) standing with their educational institution for continuation under the scholarship program. Maximum scholarship per academic year is \$20,000. Scholarship funds may only be used for tuition expenses and qualified educational and living expenses incurred while attending school.
Applicant Eligibility:	(3) from a disadvantaged background as determined by the Secretary of Health and Human Services;
Application Procedure:	Application, a signed contract, and other required information (as listed in the application packet) are submitted to the Program office. Once an application package is received by the administering Program Office, preliminary eligibility will be determined and highly qualified applicants will be interviewed. Final determination of awards will be made upon review by the Undergraduate Scholarship Program Committee at a regularly scheduled meeting.
Award Procedure:	Priority will be given to applicants who are prior recipients. The NIH Undergraduate Scholarship Program Committee will review, rank, and approve or disapprove applications submitted for program participation. Criteria which determine competitive ranking for awards may include: (1) career goal in biomedical/biobehavioral research; (2) academic performance; and (3) letters of recommendation. A student's financial need alone does not affect selection. Applicants approved for award will be notified by the Program Director. The Secretary, and his/her designee will sign the service contract of approved applicants, provide a copy to the participant and undergraduate institution notice of approved award amount. Scholarship payments, including room and board, books, fees and transportation are made to the college or university for dispersal.
Deadlines:	Contact the Headquarters Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	
Range And Average Of Financial Assistance:	Dollar assistance per scholar ranges from \$1,714 to \$20,000 per year. Average annual dollar assistance per scholar is estimated to be \$12,000.
Program Accomplishments:	Twenty awards were made in fiscal year 2005. NIH projects that 20 awards will be made in fiscal year 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program and Business Contact: Alfred C. Johnson, Ph.D., Undergraduate Scholarship Program, Office of Intramural Research, National Institutes of Health, 2 Center Drive, Room 2E24, Bethesda, MD 20892-0230. Telephone: (888)352-3001.

	Facsimile: (301) 480-3123. Email: ugsp@nih.gov .
Web Site Address:	http://ugsp.info.nih.gov .
Examples Of Funded Projects:	Funded undergraduate students majoring in the following disciplines: Biochemistry, Biology, Chemistry, Computer Science, Microbiology, Neurobiology, Neuroscience, and Pharmacology.
Criteria For Selecting Proposals:	The NIH Undergraduate Scholarship Program Committee will review, rank, and approve or disapprove applications based on career goals and academic performance. Priority will be given to applicants who have demonstrated good academic performance, demonstrated a career goal to pursue biomedical/biobehavioral research, and have characteristics which support the likelihood they will complete their service obligations.



FUNDING OPPORTUNITIES

- 93.104 **COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES FOR CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCES (SED)** (CMHS Child Mental Health Service Initiative)
- 93.230 **CONSOLIDATED KNOWLEDGE DEVELOPMENT AND APPLICATION (KD&A) PROGRAM**
- 93.275 **SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ACCESS TO RECOVERY**
- 93.958 **BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES** (CMHS Block Grant)
- 93.959 **BLOCK GRANTS FOR PREVENTION AND TREATMENT OF SUBSTANCE ABUSE** (Substance Abuse Prevention and Treatment (SAPT) Block Grant)

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93.104 COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES FOR CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCES (SED) (CMHS Child Mental Health Service Initiative)

Federal Agency:	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
Objectives:	To provide community-based systems of care for children and adolescents with a serious emotional disturbance and their families. The program will ensure that services are provided collaboratively across child-serving systems; that each child or adolescent served through the program receives an individualized service plan developed with the participation of the family (and, where appropriate, the child); that each individualized plan designates a case manager to assist the child and family; and that funding is provided for mental health services required to meet the needs of youngsters in these systems.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Grant funds may be used for salaries, wages and fringe benefits of professional and support staff; travel directly related to carrying out service activities; supplies, communications, and rental of equipment and space; training specifically aimed at one of the following: the development of individualized service plans; the provision of therapeutic foster care, group home care; intensive home-based services, or intensive day treatment services; administration of the system; and appropriate continuing education of two days or less; contracts for performance of activities under the approved project; and other such items necessary to support project activities. Grant funds and required matching funds may not be used for: other required services; to purchase or improve real estate property; provide residential care and/or services in residential treatment centers serving more than 10 children in inpatient hospital settings; any training activities with the exception of those mentioned above; and non-mental health services including mental health medical services, educational services, vocational counseling and rehabilitation, and protection and advocacy.
Applicant Eligibility:	Federally Recognized Indian Tribal governments.
Application Procedure:	Standard application forms, as furnished by the Public Health Service (PHS 5161-1, Rev. July, 2000) and required by 45 CFR Part 92 for State and local governments, must be used by applicants. Grant application kits may be obtained from: Knowledge Exchange Network (KEN) at 1 (800) 7892647.
Award Procedure:	Applications submitted are reviewed in a two- tiered peer review process. Grants in support of projects recommended for approval by the initial review group and the Center for Mental Health Services Advisory Council are awarded directly to the applicant organization.
Deadlines:	Contact Headquarters Office listed below for application deadlines.
Range Of Approval/ Disapproval Time:	From 120 to 180 days.
Range And Average Of Financial Assistance:	\$46,507,927 to \$58,022,823; \$56,538,504.
Program Accomplishments:	In fiscal year 2001, 44 continuation awards were made. It is estimated that the same number of awards will be funded in fiscal year 2005 and fiscal year 2006.
Information Contacts	
Regional Or Local Office:	Not applicable
Headquarters Office:	Program Contact: Gary Blau, PhD, Chief, Child Adolescent and Family Branch, Division of Knowledge Development and Systems Change, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, 1 Choke Cherry Road, 6-1041; phone number 240-276-1980 Rockville, MD 20857. Contact: Ms. Kimberly Pendleton, Grants Management Officer, SAMHSA,

	Department of Health and Human Services, 1 Choke Cherry Road, Rockville, MD 20857. Telephone: (240) 276-1421. E-mail Kimberly.Pendleton@samhsa.hhs.gov. Use the same numbers for FTS.
Web Site Address:	http://www.hhs.gov .
Examples Of Funded Projects:	East Baltimore, Maryland; Charleston, South Carolina; Tohatchi, New Mexico/Navajo Nation; South Bronx, New York; Parsons, Kansas; Milwaukee, Wisconsin; and Santa Barbara, California.
Criteria For Selecting Proposals:	The following review criteria will be used in evaluating proposals: 1) Potential significance of the proposed project; 2) appropriateness of goals and objectives; 3) adequacy and appropriateness of the proposed approach and activities; 4) evidence of the State's readiness and commitment to the proposed project; 5) commitment to family participation in system development and care of their children and adolescents; 6) degree of cultural competence demonstrated; 7) capability and experience of project director, consultants, and other key staff; 8) adequacy of available resources; 9) reasonableness of the proposed budget; 10) cooperation in the evaluation activities; and 11) evidence of activities directed at developing continues funding support. Award criteria include: 1) quality of proposed project as determined by the review process; 2) geographical distribution; and 3) availability of funds.

93.230 CONSOLIDATED KNOWLEDGE DEVELOPMENT AND APPLICATION (KD&A) PROGRAM

Federal Agency:	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
Objectives:	To provide immediately usable knowledge to improve substance abuse and mental health services in crucial selected areas. SAMHSA's Knowledge Development and Application (KDA) program is aimed at answering important, practical questions and effectively transferring answers to those who need the information. The questions to be answered are not decided by the agency in isolation, but arise from consumers and their families, providers, State officials, constituency organizations, national advisory councils, services researchers, the Congress, HHS, and for substance abuse, the Office of National Drug Control Policy (ONDCP). The program emphasizes knowledge development and application, making sure that this knowledge is relevant and timely. KDA activities are undertaken in actual service settings rather than in artificially created and controlled settings. SAMHSA's KDA program is driven by the needs of the users/providers/systems administrators. SAMHSA announces specific KDA topics annually in the Federal Register. Dissemination of results through multiple channels, including the latest available technology, to inform service providers is an integral part of the KDA program.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds (including direct costs and allowable indirect costs) may be used only for expenses clearly related and necessary to carry out approved activities that will provide immediately useful, practical knowledge that service providers need as they wrestle with the rapidly changing health care environment. Funds may not be used to supplant current funding for existing activities. Funds may not be used to pay for services except for additional costs created by the research and may not be used for the purchase of a facility to house any portion of the proposed project. Any funds proposed for the purpose of renovation expenses must be detailed and linked directly to programmatic activities. Any lease arrangements in association with the proposed project utilizing these funds may not extend beyond the project period or cover non-programmatic activities. Construction costs are not allowed.
Applicant Eligibility:	domestic private nonprofit and for-profit organizations such as community-based organizations,
Application Procedure:	All applicants must use application form PHS 5161-1 (July, 2000) Application kits containing the necessary forms and instructions may be obtained by contacting: The National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345. Telephone: (301) 468-2600 or 1(800) 729-6686, or the National Mental Health Services Knowledge Exchange Network (KEN) at 1(800) 789-2647. Award Procedure: Applications for grants and cooperative agreements recommended for approval by the initial review group and concurred in by the appropriate National Advisory Council and the Center Director(s) are awarded directly by each Center (Center for Mental Health Services (CMHS), Center for Substance Abuse Prevention (CSAP), and Center for Substance Abuse Treatment (CSAT)) to the applicant organization.
Deadlines:	Contact Division of Extramural Activities, Policy, and Review, SAMHSA, 1 Choke Cherry Road, Rockville, MD 20857. Telephone: (240) 276-1199 for the receipt date(s) for applications.
Range Of Approval/ Disapproval Time:	Approximately 90 to 120 days.
Range And Average Of Financial Assistance:	\$162,500 to \$1,200,000; \$351,500.
Program Accomplishments:	None
Information Contacts	
Regional Or Local Office:	CSAP programmatic contact: Peggy Thompson (240) 276-2447; CSAT programmatic contact: George Gilbert, Phone (240) 276-1681; CMHS programmatic contact: Diane Abbate 240-276-1824 Grants Management contact: Kimberly Pendleton, Division of Grants Management, Substance Abuse and Mental Health Services Administration, 1 Choke Cherry Road room 7-1091, Phone (240) 276-

	1421.
Web Site Address:	http://www.samhsa.gov .
Examples Of Funded Projects:	In CMHS some of the funded programs were: HIV/AIDS-Education, HIV/AIDS Outcome & Costs Study, HIV AIDS High Risk, Child Mental Health, Criminal Justice Diversion, Circles of Care, etc. In CSAP some of the funded programs were: State Incentive Grants, Workplace and Managed Care, Early Childhood Problems, Starting Early/Starting Smart, Community-Initiated Prevention Interventions, Substance Abuse Prevention/HIV Care, Parenting and Family Strengthening Prevention Interventions: A Dissemination of Innovations Study, CAPT, etc. In CSAT, some of the programs funded were: Replication of Effective Treatment for Methamphetamine Dependence, Targeted Capacity Expansion, Women and Violence, etc. Some programs funded in CMHS were: Circles of Care, Child Mental Health Initiative, HIV/AIDS Cost Study, Jail Diversion, etc
Criteria For Selecting Proposals:	Criteria for technical merit review of applications will include the following: 1) Potential significance of proposed project; 2) Appropriateness of applicant's proposed objectives to the goals of the specific program; 3) Adequacy and appropriateness of the proposed approach and activities; 4) Adequacy of available resources, such as facilities and equipment; 5) Qualifications and experience of the applicant organization, the project director, and other key personnel; and, 6) Reasonableness of the proposed budget. In addition, award criteria will include the availability of Federal funds.

93.275 SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ACCESS TO RECOVERY

Federal Agency:	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
Objectives:	To implement voucher programs for substance abuse clinical treatment and recovery support services pursuant to sections 501 (d)(5) and 509 of Public Health Service Act (42 U.S.C. sections 290aa(d)(5) and 290bb-2). This new program, called Access to Recovery (ATR), is part of a Presidential initiative to provide client choice among substance abuse clinical treatment and recovery support service providers, expand access to a comprehensive array of clinical treatment and recovery support options (including faith-based programmatic options), and increase substance abuse treatment capacity. Monitoring outcomes, tracking costs, and preventing waste, fraud and abuse to ensure accountability and effectiveness in the use of Federal funds are also important elements of the ATR program. Through the ATR grants, States, Territories, the District of Columbia and Tribal Organizations (hereinafter collectively referred to as "States") will have flexibility in designing and implementing voucher programs to meet the needs of clients in the State. The key to successful implementation of the voucher programs supported by the ATR grants will be the relationship between the States and clients receiving services, to ensure that clients have a genuine, free, and independent choice among eligible providers. States are encouraged to support any mixture of clinical treatment and recovery support services that can be expected to achieve the program's goal of achieving cost-effective, successful outcomes for the largest number of people.
Types Of Assistance:	Project Grants.
Uses And Use Restrictions:	Funds (including direct costs and indirect costs) may be used only for expenses clearly related and necessary to carry out approved activities.
Applicant Eligibility:	Eligibility for Access to Recovery (ATR) grants is limited to the immediate office of the head of a Tribal Organization. (A "Tribal Organization" means the recognized governing body of any Indian tribe or any legally established organization of Indians, including urban Indian health boards, inter-tribal councils, or regional Indian health boards, which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such an organization.) The head of the Tribal Organization must sign the application.
Application Procedure:	Applications must comply with the following requirements, or they will be screened out and will not be reviewed: Use of the PHS 5161-1 application; Application submission requirements in Section IV-3 of this document; and Formatting requirements provided in Section IV-2.4 of this document. Applicants may request a complete application kit by calling SAMHSA's National Clearinghouse for Alcohol and Drug Information (NCADI) at 1800-729-6686. Applicants also may download the required documents from the SAMHSA Web site at www.samhsa.gov . Click on "grant opportunities." PHS 5161-1 (revised July 2000)-Includes the face page, budget forms, assurances, certification, and checklist. Applicants must use the PHS 5161-1. Applications not submitted on the PHS 5161-1 will be screened out and will not be reviewed. Request for Applications (RFA) Includes instructions for the grant application. This document is the RFA.
Award Procedure:	Not applicable.
Deadlines:	The application must be received by June 4, 2004. Applications received after this date must have a proof-of-mailing date from the carrier dated at least one (1) week prior to the due date. Private metered postmarks are not acceptable as proof of timely mailing. Applicants will be notified by postal mail that the application has been received. Applications not received by the application deadline or postmarked by a week prior to the application deadline will be screened out and will not be reviewed.
Range Of Approval/ Disapproval Time:	Approximately 90 -120 days.
Range And Average Of Financial Assistance:	Not to exceed \$15,000,000 per grant.
Program Accomplishments:	7 grants were awarded in 2005. 5 in 2006 and 0 in 2007.
Information Contacts	

Regional Or Local Office:	None.
Headquarters Office:	CSAT contact: Andrea Kopstein, PhD., M.P.H., 1 Choke Cherry Road, Rockville, MD 20857 (240) 276-1575 . Grants Management contact: Kathleen Sample, Division of Grants Management, SAMHSA, 1 Choke Cherry Road, Rockville, MD 20857(240) 276-1407; Fax (240) 276-1430.
Web Site Address:	http://www.samhsa.gov
Examples Of Funded Projects:	Not applicable; New program.
Criteria For Selecting Proposals:	SAMHSA applications for this program are peer-reviewed according to the review criteria listed above. For those programs with an individual award of over \$100,000, the Center for Substance Abuse Treatment National Advisory Council also must review application. Decisions to fund a grant are based on: Strengths and weaknesses of the application as identified by the Peer Review Committee and approved by the Center for Substance Abuse Treatment National Advisory Council. Availability of funds. Balance among the geographic regions of the United States, different models for implementing the voucher programs (see Program Requirements, in Section I.), and the use of effective approaches to address those with special needs (e.g., homeless populations, people with co-occurring disorders, people living in rural areas, etc.) Evidence that funds will be distributed through a voucher mechanism that guarantees clients genuine, free, and independent choice among eligible clinical treatment and recovery support providers, among them at least one provider to which the clients has no religious objection. Evidence that the applicant has addressed the standards for grantees outlined in appendix C of the RFA. Evidence the applicant will increase capacity for recovery support services. In the event of a tie among applicant scores, the following method will be used to break the tie: Scores on the criterion with the highest possible point value will be compared (Extent to Which Proposed Project Meets ATR Goals-30 points). Should a tie still exist, the evaluation criterion with the next highest possible point value will be compared, continuing sequentially to the evaluation criterion with the lowest possible point value, should that be necessary to break all ties. If an evaluation criterion to be used for this purpose has the same number of possible points as another evaluation criterion, the criterion listed first in Section V-1 will be used first.

93.958 BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES (CMHS Block Grant)

Federal Agency:	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
Objectives:	To provide financial assistance to States and Territories to enable them to carry out the State's Plan for providing comprehensive community mental health services to adults with a serious mental illness and to children with a serious emotional disturbance; monitor the progress in implementing a comprehensive community based mental health system; provide technical assistance to States and the Mental Health Planning Council that will assist the States in planning and implementing a comprehensive community based mental health system.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Funds may be used at the discretion of the State to achieve the described objectives except for certain requirements. State plans must meet prescribed criteria. Services under the plan will be provided only through appropriate, qualified community programs (which may include community mental health centers, child mental-health programs, psychosocial rehabilitation programs, mental health peer-support programs and mental-health primary consumer- directed programs). Services under the plan will be provided through community mental health centers only if the centers meet prescribed criteria. Up to 5 percent of grant funds may be used for administering the funds. Funds may not be used to provide inpatient services; to make cash payments to intended recipients of health services; to purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment; to satisfy any requirement for the expenditure of nonfederal funds as a condition for the receipt of Federal funds; or to provide financial assistance to any entity other than a public or nonprofit private entity.
Applicant Eligibility:	State and U.S. Territory Governments; or Tribal Organizations.
Application Procedure:	Chief Executive Officer of the State or Territory must apply annually for an allotment. States are required to submit an application which contains a State Plan that describes comprehensive community mental health services for adults with a serious mental illness and children with a serious emotional disturbance, an Implementation Report that describes State progress in implementing the plan for the preceding year, recommendations from the State Mental Health Planning Council, a report on expenditure of the preceding fiscal year's block grant funds, a maintenance of effort report and agreements signed by the Chief Executive Officer of the State.
Award Procedure:	Grant Awards are issued directly by The Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSA) to the designated State agency.
Deadlines:	The application is due no later than September 1 of the fiscal year prior to the fiscal year for which CMHS Block Grant funding is being requested.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	\$50,000 to \$54,955,073; \$27,502,536.
Program Accomplishments:	Fifty-nine grants were awarded in fiscal year 2005. It is anticipated that 59 CMHS block grants will be issued in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: Dr. Joyce Berry, State Planning and System Development Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, 1 Choke Cherry Road, Room, 2-1093, Rockville, Maryland 20857. Telephone: (240) 276-1736. Grants Management Contact: LouEllen M. Rice, Grants Management Officer, Division of Grants Management, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, Room 7-1091, 1 Choke Cherry Road, Rockville, Maryland 20857. Telephone: (240) 2761404.
Web Site Address:	http://www.samhsa.gov
Examples Of Funded	Not applicable.

Projects:	
Criteria For Selecting Proposals:	Applications must fulfill statutory and regulatory requirements. For information regarding statutory and regulatory requirements, contact Dr. Joyce Berry, State Planning and Systems Development Branch, Center for Mental Health Services, SAMHSA, PHS, 1 Choke Cherry Road, Room 21093 Rockville, MD 20850. Telephone: 240-276-1736.

93.959 BLOCK GRANTS FOR PREVENTION AND TREATMENT OF SUBSTANCE ABUSE (Substance Abuse Prevention and Treatment (SAPT) Block Grant)

Federal Agency:	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
Objectives:	To provide financial assistance to States and Territories to support projects for the development and implementation of prevention, treatment and rehabilitation activities directed to the diseases of alcohol and drug abuse.
Types Of Assistance:	Formula Grants.
Uses And Use Restrictions:	Funds may be used at the discretion of the States to achieve the statutory objectives, including the fulfillment of certain requirements. Not less than 20 percent of the funds shall be spent for programs for individuals who do not require treatment for substance abuse, but to educate and counsel such individuals and to provide for activities to reduce the risk of such abuse by the individuals by developing community-based strategies for prevention of such abuse, including the use of alcoholic beverages and tobacco products by individuals to whom it is unlawful to sell or distribute such beverages or products. States shall expend not less than 5 percent of the grant to increase (relative to fiscal year 1994) the availability of treatment services designed for pregnant women and women with dependent children (either by establishing new programs or expanding the capacity of existing programs). States shall also expend not less than 5 percent of the grant to increase (relative to fiscal year 1993) the availability of such services to pregnant women and women with dependent children. States must require programs of treatment for intravenous drug abuse to admit individuals into treatment within 14 days after making such a request or 120 days of such a request, if interim vices are made available within 48 hours. States will provide, directly or through arrangements with other public or nonprofit entities, tuberculosis services such as counseling, testing, treatment, and early intervention services for substance abusers at risk for the human immunodeficiency virus (HIV) disease. Other statutory requirements also apply.
Applicant Eligibility:	State and U.S. Territory Governments; or Tribal Organizations. NOTE: Only the Red Lake Band of Chippewa Indians is eligible for direct award of SAPT Block Grant Funds, per the PHS Act.
Application Procedure:	Chief Executive Officer of the State, Territory, or Tribal Organization (limited to the Red Lake Band of the Chippewa) must apply annually for an allotment.
Award Procedure:	Grant awards are issued directly by the Center for Substance Abuse Treatment to the designated State Agency, Territory, or Tribal organization (limited to the Red Lake Band of the Chippewa).
Deadlines:	The application is due no later than October 1 of the fiscal year for which SAPT Block Grant funding is being requested.
Range Of Approval/ Disapproval Time:	Not applicable.
Range And Average Of Financial Assistance:	\$110,614 to \$252,450,447; \$126,285,530.
Program Accomplishments:	In fiscal year 2005, 60 awards were made. It is anticipated that 60 awards will be made in fiscal years 2006 and 2007.
Information Contacts	
Regional Or Local Office:	Not applicable.
Headquarters Office:	Program Contact: John J. Campbell, Division of State and Community Assistance, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, 1 Choke Cherry Road, Rockville, Room 5-1057, MD 20857. Telephone 240-276-2891. Grants Management Contact: Ms. LouEllen M. Rice, Division of Grants Management, Office of Program Services, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, 1 Choke Cherry Road Room 7-1091, Rockville, MD 20857. Telephone: (240) 276-1404.
Web Site Address:	http://www.samhsa.gov .

Examples Of Funded Projects:	Not applicable.
Criteria For Selecting Proposals:	Applications must fulfill statutory and Federal regulations and regulatory requirements. For information on statutory and Federal regulations requirements contact John J. Campbell, Division of State and Community Assistance, Center for Substance Abuse Treatment, SAMHSA, 1 Choke Cherry Road, Room 5-1057 Rockville, MD 20857

Appendix

Organization Charts for Operating Divisions

Administration for Children and Families (ACF)

Administration on Aging (AoA)

Agency for Healthcare Research and Quality (AHRQ)

Agency for Toxic Substance Disease Registry (ATSDR)

Centers for Disease Control and Prevention (CDC)

Centers for Medicare & Medicaid Services (CMS)

Food and Drug Administration (FDA)

Health Resources and Services Administration (HRSA)

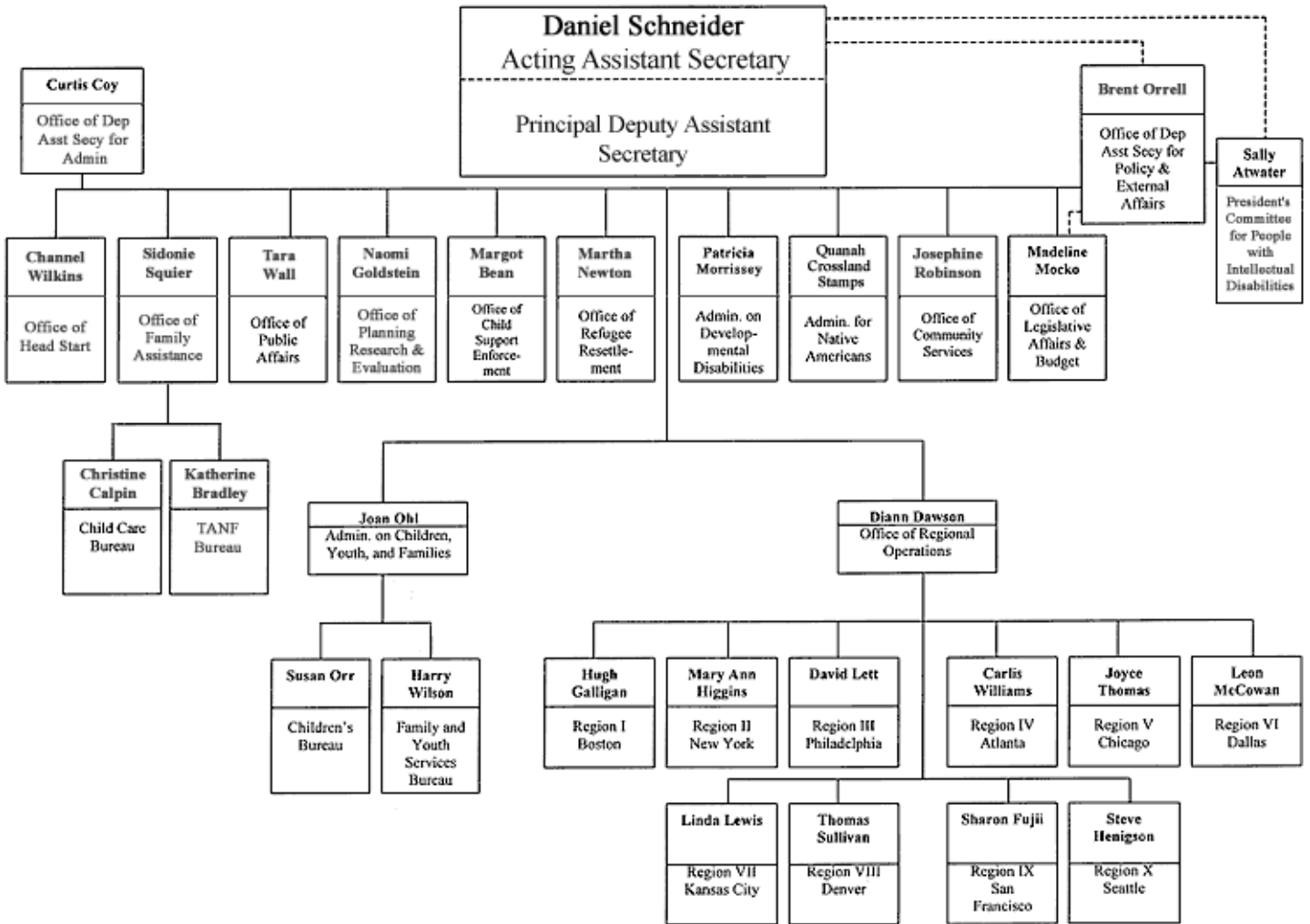
Indian Health Service (IHS)

National Institutes of Health (NIH)

Substance Abuse and Mental Health Services Administration (SAMHSA)

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ACF Operational Structure



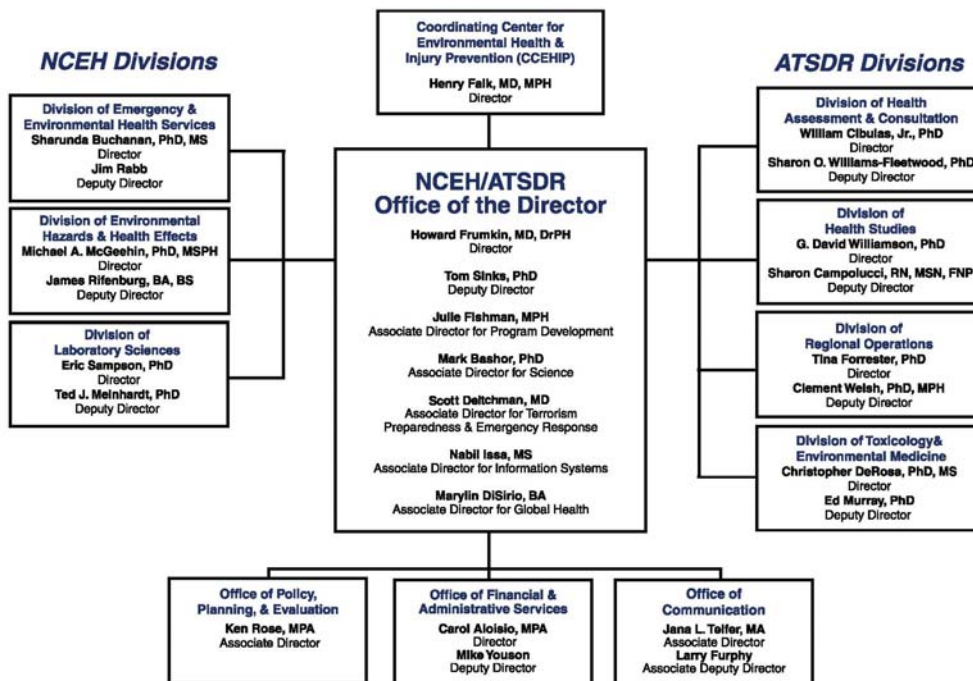
**Administration for Aging
Organizational Chart**

Office of the Assistant Secretary			
Josefina G. Carbonell, ASA Edwin Walker, PDASA			
Office of Evaluation Saadia Greenberg			
Center For Management John Wren	Center for Planning and Policy Lori Gerhard	Center for Communications & Consumer Services Carol Crecy	Center for Wellness & Community-Based Services Frank Burns
Office of Budget & Finance Steve Hagy			Office for Community Based-Services Brian Lutz
Office of Grants Management Stephen Daniels			Office for American Indian, Alaskan Native & Native Hawaiian Programs Yvonne Jackson
Office of Information Resource Management VACANT			Office of Consumer Choice & Protection Babara Dieker
Office of Administrative Services Sophia Hurt (Acting)			AoA RegionaI Support Centers Irma Tetzloff



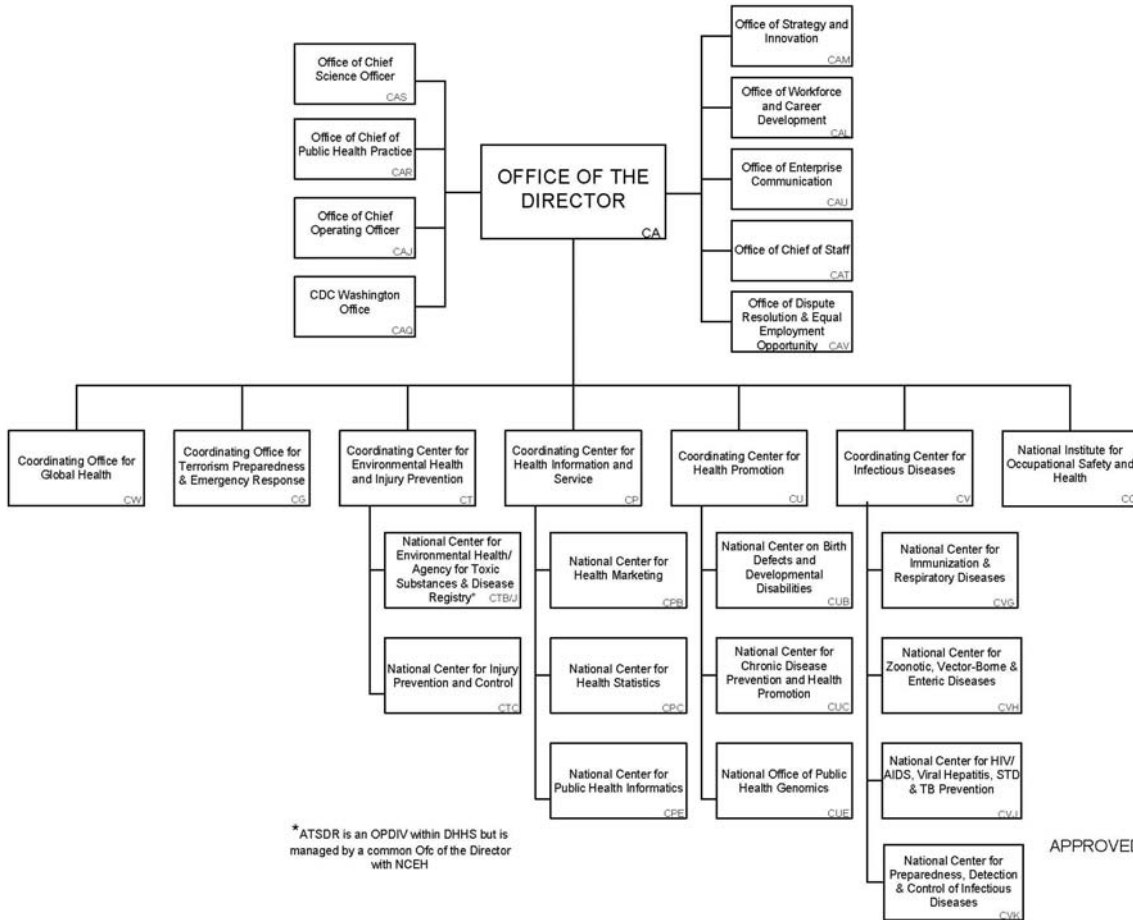


National Center for Environmental Health/ Agency for Toxic Substances and Disease Registry



July 2007

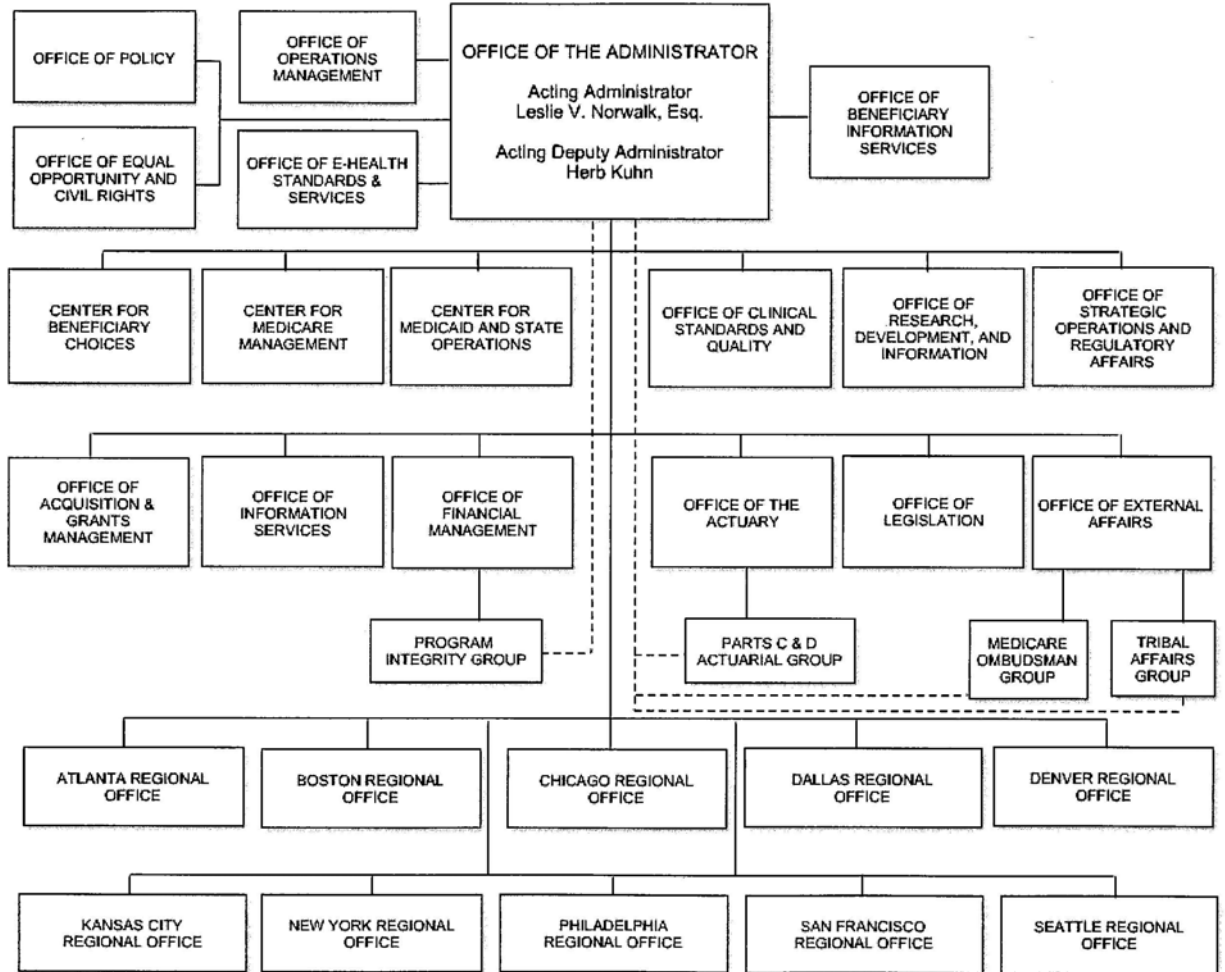
**DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)**



* ATSDR is an OPDIV within DHHS but is managed by a common Cfo of the Director with NCEH

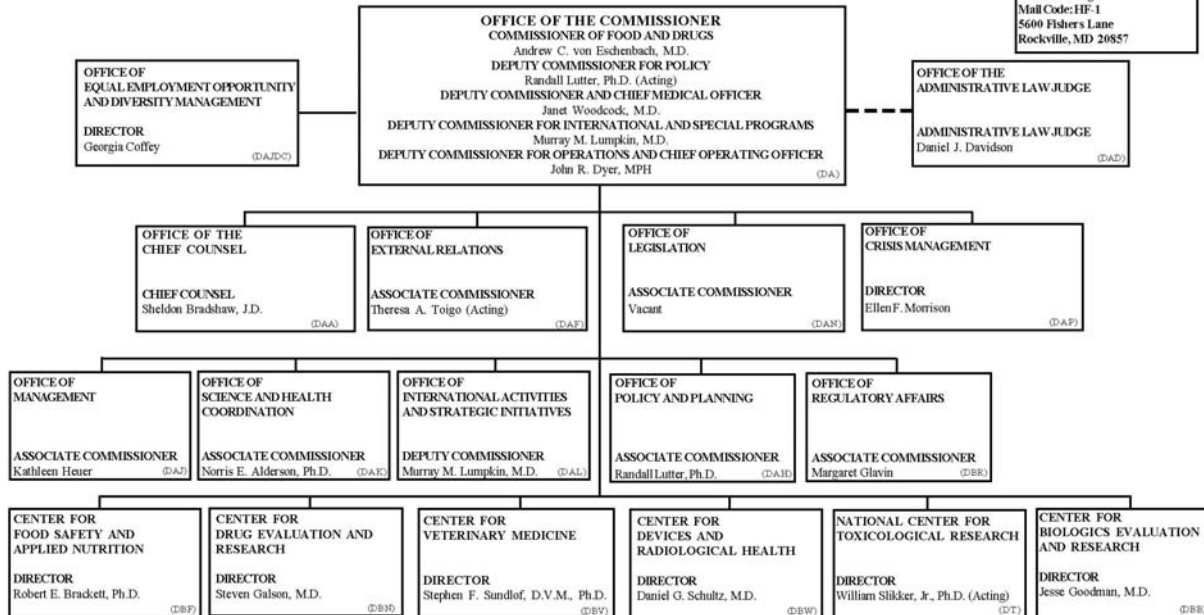
APPROVED 3/22/2007

CMS Centers for Medicare & Medicaid Services



DEPARTMENT OF HEALTH AND HUMAN SERVICES
FOOD AND DRUG ADMINISTRATION

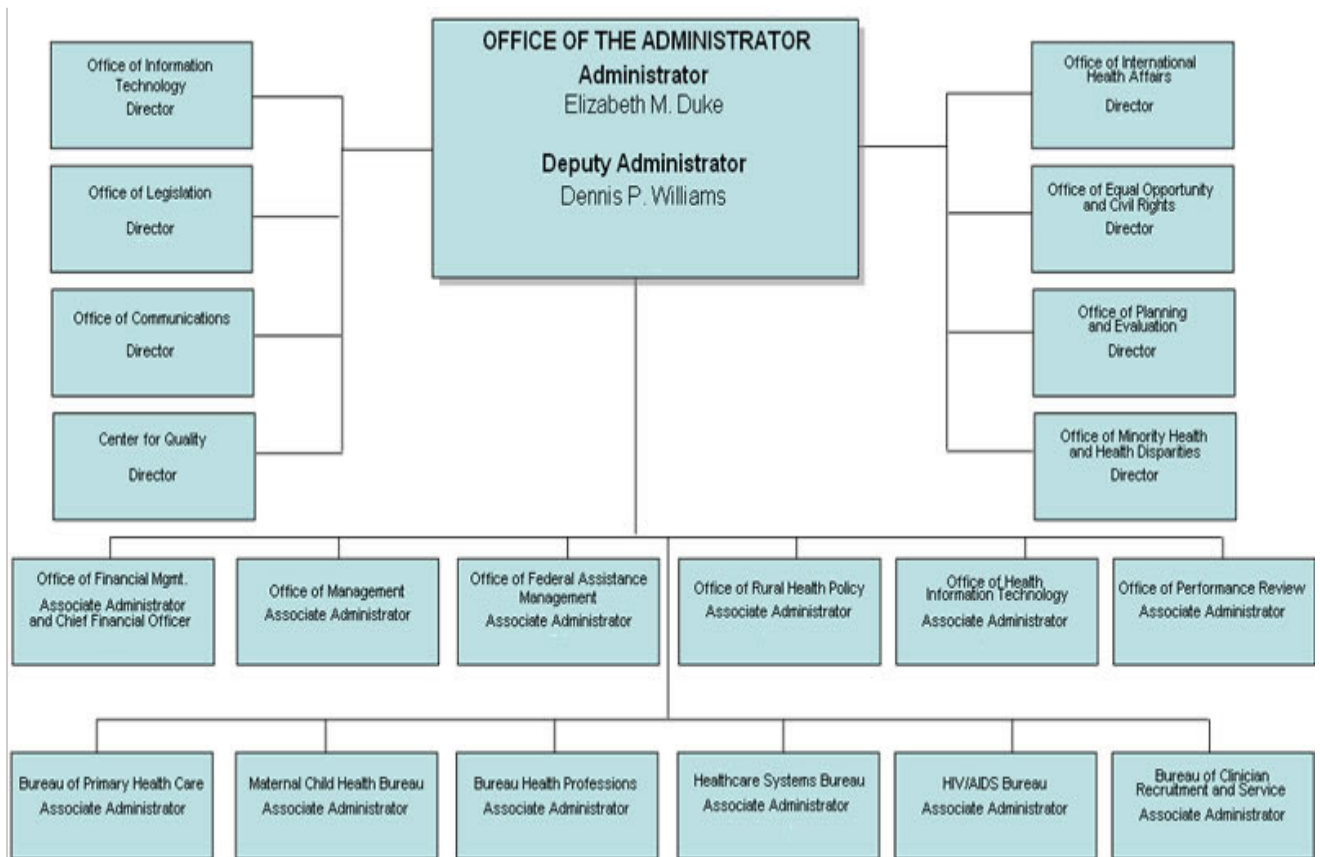
Main Tel: (301) 827-2410
Fax: (301) 443-3100
Parklawn Bldg.
Mail Code: HF-1
5600 Fishers Lane
Rockville, MD 20857



--- Reports directly to the Secretary, HHS

Prepared by the Management Programs & Analysis Staff, OMP, OM-01-19-07

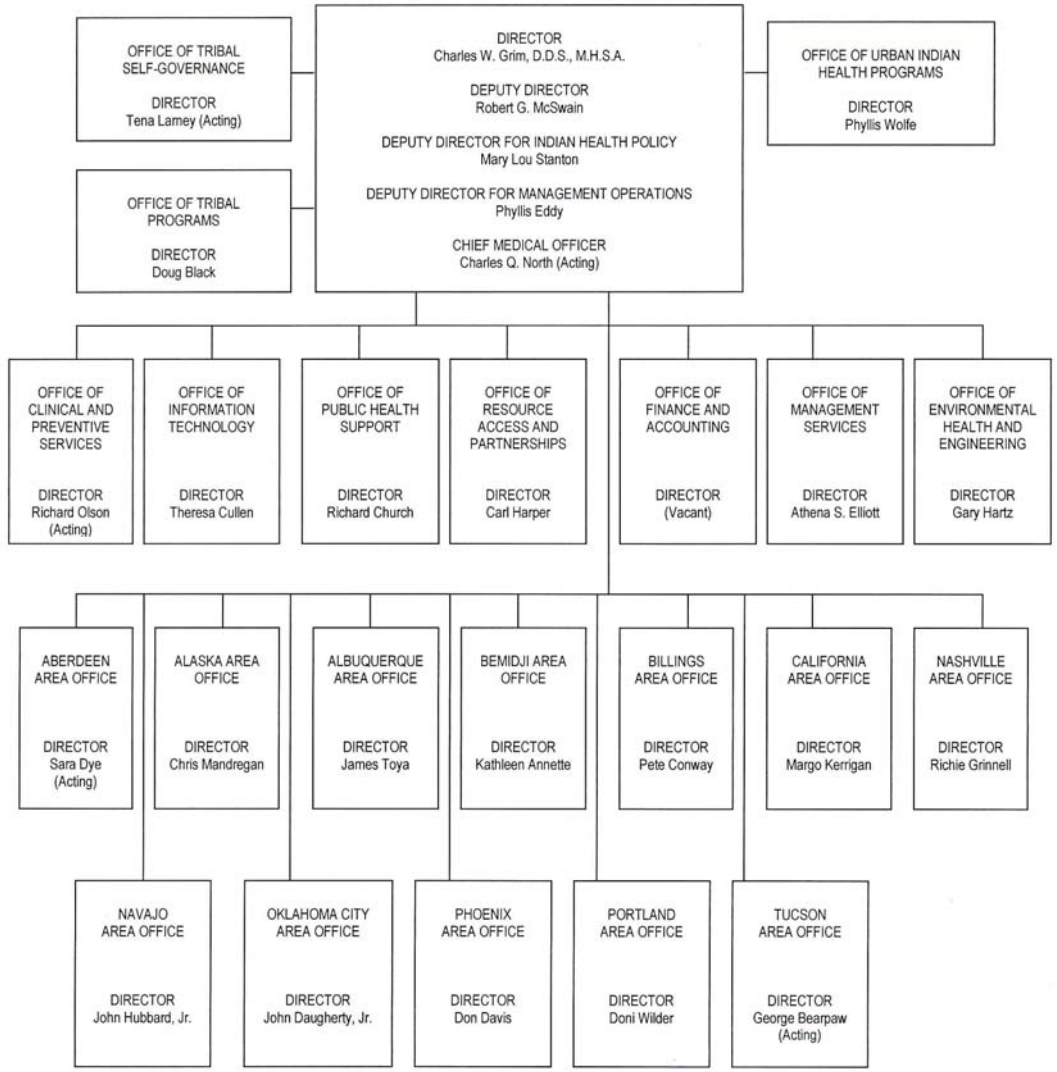
Health Resources and Services Administration (HRSA)



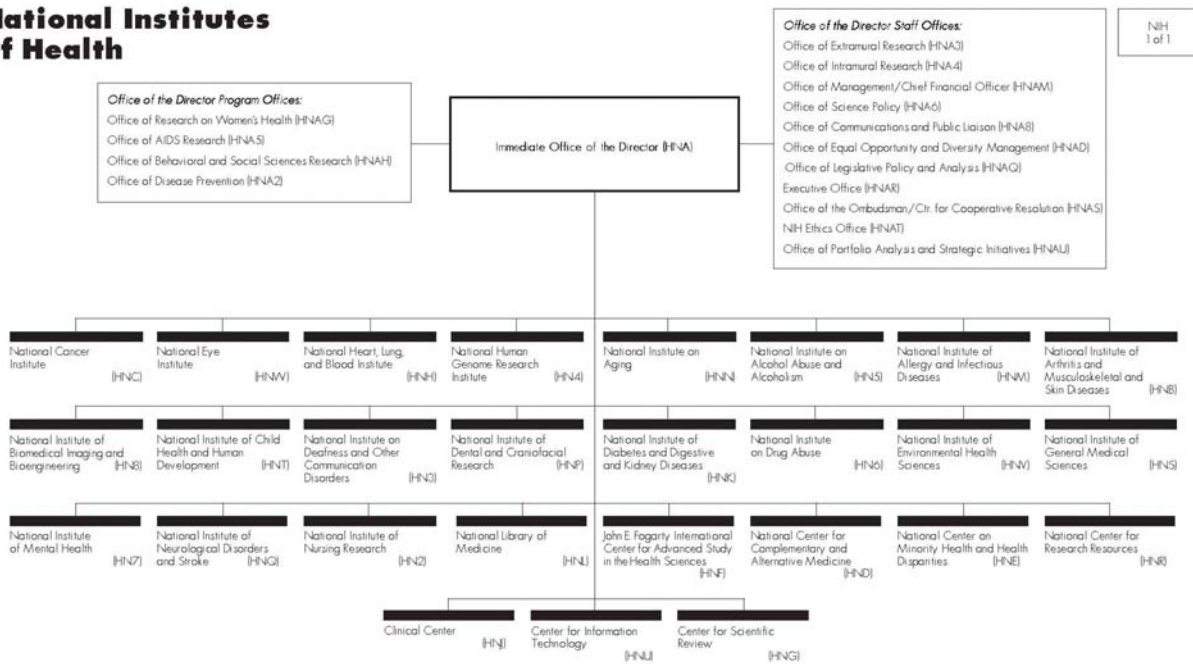
DEPARTMENT OF HEALTH AND HUMAN SERVICES

INDIAN HEALTH SERVICE

Approved: *Charles W. Grim, DDS*
 Date: **MAY 18 2007**



National Institutes of Health



The Mission of the National Institutes of Health is science in pursuit of knowledge to improve human health. This means pursuing science to expand fundamental knowledge about the nature and behavior of living systems; to apply that knowledge to extend the health of human lives, and to reduce the burdens resulting from disease and disability.

The National Institutes of Health seeks to accomplish its mission by:

- Fostering fundamental discoveries, innovative research, and their applications in order to advance the Nation's capacity to protect and improve health;
- Developing, maintaining, and renewing the human and physical resources that are vital to ensure the Nation's capability to prevent disease, improve health, and enhance quality of life;
- Expanding the knowledge base in biomedical, behavioral, and associated sciences order to enhance America's economic well-being and ensure a continued high return on the public investment in research; and
- Exemplifying and promoting the highest level of scientific integrity, public accountability, and social responsibility in the conduct of science.

Department of Health and Human Services SAMHSA Organizational Chart

