# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Capacity-Building Assistance (CBA) To Strengthen the Prevention of Human Immunodeficiency Virus (HIV) in Racial and Ethnic Minority Populations

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS). **ACTION:** Notice and request for comments.

SUMMARY: In Fiscal Year (FY) 2000, CDC will provide approximately \$8.3 million dollars to support racial or ethnic minority non-governmental organizations (NGOs) to carry out capacity-building activities for community-based organizations (CBOs) providing human immunodeficiency virus (HIV) prevention services to racial and ethnic minority individuals whose behaviors place them at risk of acquiring or transmitting HIV and other sexually transmitted diseases (STDs).

The purpose of this announcement is to request comments on this proposed program. After consideration of comments submitted, CDC will publish a program announcement to solicit applications. A more complete description of the goals of this program, the target applicants, availability of funds, program requirements, and evaluation criteria follows.

**DATES:** The public is invited to submit comments by July 14, 1999.

ADDRESS: Submit comments to: Technical Information and Communications Branch, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE, Mail Stop E49, Atlanta, GA 30333.

FOR FURTHER INFORMATION CONTACT:

Technical Information and Communications Branch, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE, Mail Stop E49, Atlanta, GA 30333, Fax (404) 639–2007, E-mail address: HIVMAIL@CDC.GOV, Telephone (404) 639–2072.

### SUPPLEMENTARY INFORMATION:

#### **Purpose**

The purpose of this program is to provide financial assistance to national, regional, or local non-governmental minority organizations to develop and implement regionally structured and focused capacity-building assistance that will sustain, improve, and expand

HIV prevention services for racial and ethnic minority individuals whose behaviors place them at risk for acquiring or transmitting HIV and other sexually transmitted diseases (STDs).

Capacity-building assistance developed under this program will be provided in two categories, A and B. Category A includes capacity-building assistance in (1) Organizational Infrastructure Assessment and Development, and (2) Intervention Design, Development, Implementation, and Evaluation. Category B includes capacity-building assistance in (1) Community Capacity-Building for HIV Prevention, and (2) HIV Prevention Community Planning Participation.

The priority for capacity-building assistance in Category A is for CBOs that provide HIV prevention services to racial and ethnic minority populations. These CBOs are prioritized as follows: (1) CBOs funded directly by CDC, (2) CBOs not funded by CDC or State or local health departments, and (3) CBOs funded by State or local health departments. The priorities for receiving capacity-building assistance in Category B are (1) CBOs that provide HIV prevention services to racial and ethnic minority populations, and (2) community stakeholders who represent or work with racial and ethnic minority populations heavily affected by the HIV/ AIDS epidemic. For the purpose of this program announcement, community stakeholders are individuals, groups, or organizations that have an interest in preventing HIV and are potential or actual agents of change.

This program will serve four regional groups as follows:

Northeast Region: CT, MA, ME, NH, NJ, NY, PA, PR, RI, VT, U.S. Virgin Islands.

*Midwest Region:* IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, WI.

South Region: AL, AR, D.C., DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV.

West Region: AK, AZ, CA, CO, HI, ID, NV, NM, OR, MT, UT, WA, WY, American Samoa, Commonwealth of Northern Mariana Islands, Federated States of Micronesia, Guam, Republic of Marshall Islands, Palau.

#### Goals

The goals for this program are as follows:

### 1. Category A

a. Improve the capacity of CBOs to develop and sustain organizational infrastructures in order to support program services and interventions.

b. Improve the capacity of CBOs to design, develop, implement, and

evaluate effective HIV prevention interventions.

### 2. Category B

a. Improve the capacity of CBOs to increase community awareness, leadership, participation in and support for HIV prevention.

b. Enhance the capacity of community stakeholders to provide leadership and

support for HIV prevention.

c. Enhance the capacity of CBOs and community stakeholders to effectively participate in the HIV prevention community planning process.

### **Eligible Applicants**

Eligible applicants for Category A are (1) A national minority organization as a single organization or as the lead organization within a coalition serving one regional group; or (2) a regional minority organization as a single organization or as the lead organization within a coalition serving one regional group; or (3) a local minority organization as the lead organization within a coalition serving one regional group. A coalition serving one regional group. A coalition can consist of any combination of two or more local, regional, or national minority organizations.

Eligible applicants for Category B are (1) A national minority organization as a single organization or as the lead organization within a coalition serving from one to four regions; or (2) a regional minority organization as a single organization or as the lead organization within a coalition serving one region; or (3) a local minority organization as the lead organization within a coalition serving one region.

**Note:** Applicants that meet the eligibility requirements for both Categories A and B may apply for both under separate applications.

Applicants must meet the following criteria:

1. Have a currently valid IRS Tax Determination 501(C)3 status certificate.

2. If applying for Category A, have a documented and established 3-year record of service providing organizational capacity-building assistance to CBOs serving racial and ethnic minority populations. If applying for Category B, have a documented and established 3-year record of service providing community capacity-building to CBOs serving a racial and ethnic minority population and to a racial and ethnic minority community or subpopulation heavily affected by the HIV/ AIDS epidemic. Acceptable documentation includes letters of support, client satisfaction survey summaries, annual reports, and memoranda of agreements.

3. Have a governing body composed of greater than 50 percent racial and

ethnic minority members.

4. Have racial and ethnic minority persons serve in greater than 50 percent of key positions in the organization, including management, supervisory, administrative, and service provision positions (for example, executive director, program director, fiscal director, technical assistance provider, trainer, curricula development specialist, or group facilitator).

5. In a coalition, the lead organization, which is the legal applicant, must meet criteria 1–4 above. Other (non-lead) organizations in the coalition must meet

criteria 3 and 4.

### **Availability of Funds**

In Category A, up to \$5.0 million is expected to be available in FY 2000 to fund four programs. In Category B, up to \$3.4 million is expected to be available in FY 2000 to fund four to sixteen programs with awards ranging from \$212,000 to \$900,000. It is expected that the awards will begin about November 1999, and will be made for a 12-month budget period within a project period of up to five years.

### **Funding Priorities**

In making funding decisions, efforts will be made to (1) ensure capacity-building assistance in both Categories A and B for all four regions identified in the introduction of this announcement; and (2) ensure that funding for capacity-building assistance is distributed in proportion to the HIV/AIDS disease burden for the four major racial and ethnic minority populations by each region or nationally.

### **Program Requirements**

#### 1. Category A

a. Create a regionally-based resource network that includes the applicant's current and proposed staff, researchers, academics, consultants, and other subject matter experts, and may include a coalition and collaborative relationships.

b. Identify capacity-building resources currently available in the region to

avoid duplication of effort.

c. Ensure the effective and efficient provision of capacity-building assistance in (1) Organizational Infrastructure Development and Assessment, and (2) Intervention Design, Development, Implementation, and Evaluation. These services are to be provided through the use of the following delivery mechanisms: Information Transfer, Skills Building, Technical Consultation, Technical Services, and Technology Transfer.

- d. Ensure that capacity-building assistance is allocated according to gaps in services and the priority capacitybuilding assistance needs of CBOs serving highly affected sub-populations.
- e. Develop and implement a plan for targeting, engaging, and maintaining long-term capacity-building relationships with CBOs. The plan should include strategies for conducting ongoing needs assessments and developing tailored capacity-building packages to be delivered over the long-term and as appropriate to the identified needs.
- f. Develop and implement a system that responds to capacity-building assistance requests. This system must include mechanisms for conducting needs assessments, prioritizing capacity-building assistance requests, linking requests to other capacity-building resources, delivering services, and conducting quality assurance.
- g. Develop a standardized system for tracking, assessing, and documenting all capacity-building assistance requests and delivery, with CDC assistance as needed.

h. Participate in a CDC-coordinated capacity-building network.

i. Coordinate program activities with appropriate national, regional, State, and local HIV prevention programs, capacity-building providers, and community planning groups.

j. Evaluate the accomplishment of program objectives and the process and outcomes of capacity-building assistance.

#### 2. Category B

- a. Conduct regional community needs and resource assessments around issues related to HIV prevention, leadership development, and community mobilization.
- b. Develop a regional plan of action to mobilize community and agency resources to meet priority needs in Community Capacity-Building for HIV Prevention.
- c. Develop a regional plan of action to provide capacity-building assistance in HIV Prevention Community Planning Participation.
- d. Provide capacity-building assistance to CBOs and community stakeholders in (1) Community Capacity-Building for HIV Prevention, and (2) HIV Prevention Community Planning Participation. These services are to be provided through the use of the following mechanisms: Information Transfer, Skills Building, Technical Consultation, Technical Services, and Technology Transfer.
- e. Develop and implement a plan for targeting, engaging, and maintaining

long-term capacity-building relationships with CBOs and community stakeholders. The plan should include strategies for conducting ongoing needs assessments and developing tailored capacity-building packages to be delivered over the long-term and as appropriate to the identified needs.

f. Form a regional (e.g., multi-State) community advisory board that includes CBOs, community representatives, members of the target populations and other community stakeholders to provide input on the overall direction of this program and in assessing the program's communication, linkages, performance, and services to the target population.

g. Ensure that capacity-building assistance is allocated according to priority needs for community capacity-building and community planning participation in highly affected subpopulations.

h. Develop and implement a system that responds to requests for assistance in Community Capacity-Building for HIV Prevention, and HIV Prevention Community Planning Participation. This process must include mechanisms for conducting needs assessments, prioritizing requests, linking requests to the resource network funded under Category A, delivering services, and conducting quality assurance.

i. Develop a standardized system for tracking, assessing, and documenting all capacity-building assistance requests and delivery, with CDC assistance as needed

j. Participate in a CDC-coordinated capacity-building network.

k. Coordinate program activities with appropriate national, regional, State, and local HIV prevention programs, capacity-building providers, and community planning groups.

l. Evaluate the accomplishment of program objectives, and the process and outcomes of capacity-building assistance.

#### **Evaluation Criteria**

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC:

1. Long-term Goals (5 points).

2. Organizational Capacity (35 points).

3. Assessing the Need for Capacity-Building Assistance (10 points).

4. Program Plan (35 points).

- 5. Program Evaluation Plan (5 points).
- 6. Communication and Dissemination Plan (5 points).
- 7. Plan for Acquiring Additional Resources (5 points).
- 8. Budget and Staffing Breakdown and Justification (not scored).

9. Training and Technical Assistance Plan (not scored).

10. Site visits by CDC staff may be conducted before final funding decisions are made. A fiscal Recipient Capability Assessment (RCA) may be required of some applicants before funds are awarded.

Dated: June 24, 1999.

#### Thena M. Durham,

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention.

[FR Doc. 99–16590 Filed 6–29–99; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

# The National Vaccine Program Office (NVPO), of the Centers for Disease Control and Prevention (CDC), Announces the Following Meeting

*Name:* International Symposium on Combination Vaccines.

Times and Dates: 8:30 a.m.-6 p.m., February 2, 2000. 9 a.m.-6 p.m., February 3, 2000. 8:30 a.m.-5 p.m., February 4, 2000.

*Place:* Natcher Auditorium, NIH Campus, Bethesda, Maryland.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 500 people.

Purpose: The purpose of the meeting is to fully explore laboratory, clinical, and epidemiologic data integral to developing and licensing new safe and effective combination vaccines.

Matters To Be Discussed: Agenda items will include presentations and discussion regarding: immunogenicity; immune interference; correlates of protection; preand post-licensure safety evaluation; combination vaccines vs. simultaneous administration; manufacturing, product testing, and preclinical (animal) evaluation; and overcoming challenges to use of combination vaccines.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Alicia S. Postema, Health Policy Fellow, NVPO, CDC, 1600 Clifton Road, NE, M/S A– 11, Atlanta, Georgia 30333, telephone 404/ 639–4450.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: June 23, 1999.

#### Carolyn Russell,

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

[FR Doc. 99–16589 Filed 6–29–99; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

# Submission for OMB Review; Comment Request

*Title:* Head Start Grants Administration.

OMB No.: 0980-0243.

Description: This part establishes regulations applicable to program administration and grant management for grants under the Head Start Act. The regulations clarify definitions of terms applicable to the administration of the Head Start program. In addition the regulations establish a requirement for grantees to have student accidents insurance and bonding for certain officials. The regulations also require funding recipients to establish written personnel policies, and clarify the limitations on costs of development and administration of Head Start programs.

*Respondents:* State, Local or Tribal Government.

### ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of re- sponses per respondent	Average bur- den hours per response	Total burden hours
AppealEstimated Total Annual Burden Hours: 4,372.	2,186	1	2	4,372

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447, Attn: ACF Reports Clearance Officer.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 to 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, N.W., Attn: ACF Desk Officer.

Dated: June 24, 1999.

#### **Bob Sargis**,

Acting Reports Clearance Officer. [FR Doc. 99–16625 Filed 6–29–99; 8:45 am] BILLING CODE 4184–01–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

[0980-0242]

### Submission for OMB Review; Comment Request

*Title:* Appeal Procedures for Head Start Grantees and Current or Former Delegate Agencies.

OMB No.: 0980-0242.

Description: Section 646 of the Head Start Act requires the Secretary to prescribe procedures insuring that an agency or organization which desires to serve as a delegate agency under the Head Start Act will receive special notice and an opportunity for a timely appeal when an application has been wholly or substantially rejected or when such application has not been acted upon within a period of time deemed reasonable by the Secretary. The rule also describes the actions available prior to the suspension, termination, or reduction of financial assistance or when an application for refunding is

*Respondents:* State, Local or Tribal Government.