include: development of pilot projects; completion of high quality research projects; publication of findings in peer reviewed scientific and technical journals; number of professionals trained; provision of consultation and technical assistance; integration of disciplines; translation of research into implementation; impact on injury control outcomes including legislation, regulation, treatment, and behavior modification interventions.

2. Review by CDC Advisory Committee for Injury Prevention and Control (ACIPC)

Factors to be considered by ACIPC include:

a. The results of the peer review.

b. The significance of the proposed activities as they relate to national program priorities and the achievement of national objectives.

c. National and programmatic needs and geographic balance.

d. Overall distribution of the thematic focus of competing applications; the nationally comprehensive balance of the program in addressing the three phases of injury control (prevention, acute care, and rehabilitation); the control of injury among populations who are at increased risk, including racial/ethnic minority groups, the elderly and children; the major causes of intentional and unintentional injury; and the major disciplines of injury control (such as biomechanics and epidemiology).

e. Budgetary considerations, the ACIPC will establish annual funding levels as detailed under the heading, Availability of Funds.

3. Applications for Supplemental Funding for Existing CDC Injury Centers

Existing CDC Injury Centers may submit an application for supplemental awards to support research work or activities. Applications should be clearly labeled to denote their status as requesting supplemental funding support. These applications will be reviewed by the IRGRC and the ACIPC.

4. Continued Funding

Continuation awards within the project period will be made on the basis of the availability of funds and the following criteria:

a. The accomplishments of the current budget period show that the applicant's objectives as prescribed in the yearly work plans are being met;

b. The objectives for the new budget period are realistic, specific, and measurable;

c. The methods described will clearly lead to achievement of these objectives;

d. The evaluation plan allows management to monitor whether the methods are effective by having clearly defined process, impact, and outcome objectives, and the applicant demonstrates progress in implementing the evaluation plan;

e. The budget request is clearly explained, adequately justified, reasonable, and consistent with the intended use of grant funds; and

f. Progress has been made in developing cooperative and collaborative relationships with injury surveillance and control programs implemented by State and local governments and private sector organizations.

H. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of:

1. Progress report annually;

2. Financial status report, no more than 90 days after the end of the budget period; and

3. Final financial status report and performance report, no more than 90 days after the end of the project period.

Send all reports to: Lisa T. Garbarino, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), Room 300, 255 East Paces Ferry Road, NE, Atlanta, Georgia 30305–2209.

The following additional requirements are applicable to this program. For a complete description of each see Addendum 1 in the application kit.

AR98–1—Human Subjects Certification
AR98–2—Requirements for inclusion of Women and Racial and Ethnic Minorities in Research
AR98–9—Paperwork Reduction Act Requirements
AR98–10—Smoke-Free Workplace Requirement
AR98–11—Healthy People 2000
AR98–12—Lobbying Restrictions
AR98–13—Prohibition on Use of CDC funds for Certain Gun Control Activities
AR98–20—Conference Activities within Grants/Cooperative Agreements

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under Sections 301, 391, 392, 393, and 394 of the Public Health Service Act [42 U.S.C. 241, 280b, 280b–1, 280b–1a, and 280b–2], as amended. Program regulations are set forth in 42 CFR Part 52. The catalog of Federal Domestic Assistance number is 93.136.

J. Where to Obtain Additional Information

To receive additional written information and to request an application kit, call 1–888–GRANTS4 (1–888–472–6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest. A complete program description and information on application procedures are contained in the application package.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from Lisa T. Garbarino, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE, Mailstop E–13, Atlanta, GA 30305, telephone (404) 842–6796 or Internet address: lgt1@cdc.gov.

Programmatic technical assistance may be obtained from Tom Voglesonger, Office of Research Grants, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (CDC), 4770 Buford Highway, NE, Mailstop K–58, Atlanta, GA 30341–3724, telephone (770) 488–4265 or Internet address: tdv1@cdc.gov.

See also the CDC home page on the Internet: http://www.cdc.gov

Please refer to Announcement 99014 when requesting information and submitting an application.

Dated: August 27, 1998.

John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–23624 Filed 9–1–98; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Vaccine Advisory Committee, Subcommittee on Future Vaccines, Subcommittee on Immunization Coverage, and Subcommittee on Vaccine Safety: Meetings

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following Federal advisory committee meetings.

Name: National Vaccine Advisory Committee (NVAC).

Times and Dates: 9 a.m.–2 p.m., September 28, 1998; 8 a.m.–12:30 p.m. September 29, 1998.

Place: Hubert H. Humphrey Building, Room 800, 200 Independence Avenue, SW, Washington, DC 20201.

Status: Open to the public, limited only by the space available.

Notice: In the interest of security, the Department has instituted stringent procedures for entrance to the Hubert H. Humphrey Building by non-government employees. Thus, persons without a government identification card should plan to arrive at the building each by either between 8 and 8:30 a.m. or 12:30 and 1 p.m. so they can be escorted to the meeting. Entrance to the meeting at other times during the day cannot be assured.

Purpose: This committee advises and makes recommendations to the Director of the National Vaccine Program on matters related to the Program responsibilities.

Matters to be Discussed: Agenda items will include updates on the National Vaccine Program Office (NVPO) activities; a report from the Division of Vaccine Injury Compensation; a discussion on the impact of changes in Federal funding of vaccine programs, the Food and Drug Administration, National Immunization Program and Association of State and Territorial Health Officers; a report from the Assistant Secretary for Health and Surgeon General; a discussion on the current status of NIH efforts to develop a vaccine to prevent AIDS; a report from the task force on community preventive services; status of NVAC papers, strategies to sustain immunization coverage; a report fostering non-traditional sites for promoting adult immunization, and case studies of vaccine development; a discussion on the progress in influenza pandemic preparedness; potential utility of new influenza vaccines, blueprint strategy for tuberculosis vaccine development; reports from the Immunization Registries Workgroup, progress toward a strategic plan, Subcommittee on Future Vaccines, Subcommittee on Immunization Coverage and Subcommittee on Vaccine Safety; a discussion on future agenda items.

Name: Subcommittee on Future Vaccines.

Time and Date: 2 p.m.–5 p.m., September 28, 1998.

Place: Hubert H. Humphrey Building, Room 703, 200 Independence Avenue, SW, Washington, DC 20201.

Status: Open to the public, limited only by the space available.

Purpose: This subcommittee develops policy options and guides national activities that lead to accelerated development, licensure, and the best use of new vaccines in the simplest possible immunization schedules.

Matters to be Discussed: Agenda items will include discussions regarding ''Orphan Vaccines'' How can we expedite the development of certain vaccines? Follow-up of discussion on indemnification for phase 1 clinical trials.

Name: Subcommittee on Immunization Coverage.

Time and Date: 2 p.m.–5 p.m., September 28, 1998.

Place: Hubert H. Humphrey Building, Room 800, 200 Independence Avenue, SW, Washington, DC 20201.

Status: Open to the public, limited only by the space available.

Purpose: This subcommittee will identify and propose solutions that provide a multifaceted and holistic approach to reducing barriers that result in low immunization coverage for children.

Matters to be Discussed: Agenda items will include updates on the status of the Immunization Coverage paper, ''Strategies to Sustain Immunization Coverage'', adult immunization at non-traditional sites, and a discussion of adolescent frame work for immunization.

Name: Subcommittee on Vaccine Safety.

Time and Date: 2 p.m.–5 p.m., September 28, 1998.

Place: Hubert H. Humphrey Building, Room 705A, 200 Independence Avenue, SW, Washington, DC 20201.

Status: Open to the public, limited only by the space available.

Purpose: This subcommittee reviews issues relevant to vaccine safety and adverse reactions to vaccines.

Matters to be Discussed: Agenda items include a discussion on the review of the draft public health service vaccine safety action plan.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Felecia D. Pearson, Committee Management Specialist, NVPO, CDC, 1600 Clifton Road, NE, M/S A–11, Atlanta, Georgia 30333, telephone 404/639–4450.

Dated: August 27, 1998.

Carolyn J. Russell,

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

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BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Project

Title: Application Requirements for the Low Income Home Energy Assistance Program (LIHEAP) and Detailed Model Plan submitted every 3 years. Abbreviated applications to be submitted in alternate years.

OMB No.: 0970–0075.

Description: States, including the District of Columbia, tribes, tribal organizations and territories applying for LIHEAP block grant funds must submit an annual application that meets the LIHEAP statutory and regulatory requirements prior to receiving Federal funds. A detailed application must be submitted every 3 years.

Respondents: State, Territories and Tribal Governments.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Detailed Model Plan	65	1	1	65
Abb. Model Plan	115	1	.33	38

Estimated Total Annual Burden Hours: 103.

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded 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. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use