

commenting would be aggrieved by approval of the proposal.

Comments regarding the application must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than July 20, 1995.

**A. Federal Reserve Bank of San Francisco** (Kenneth R. Binning, Director, Bank Holding Company) 101 Market Street, San Francisco, California 94105:

1. *Bancorp Hawaii, Inc.*, Honolulu, Hawaii; to engage *de novo* through its subsidiary, First Federal Savings and Loan Association of America, Honolulu, Hawaii, in making equity and debt investments in corporations or projects designed primarily to promote community welfare, pursuant to § 225.25(b)(6) of the Board's Regulation Y.

Board of Governors of the Federal Reserve System, June 30, 1995.

**Jennifer J. Johnson,**

*Deputy Secretary of the Board.*

[FR Doc. 95-16691 Filed 7-6-95; 8:45 am]

BILLING CODE 6210-01-F

**Grover Lynn Shade, et al.; Change in Bank Control Notices; Acquisitions of Shares of Banks or Bank Holding Companies**

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. Once the notices have been accepted for processing, they will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than July 20, 1995.

**A. Federal Reserve Bank of Dallas** (Genie D. Short, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. *Grover Lynn & Nelda Sue Shade*, both of Muldoon, Texas; to retain 10 percent, for a total of 10 percent, of the voting shares of Lost Pines Bancshares, Inc., Smithville, Texas, and thereby indirectly acquire Lost Pines National Bank, Smithville, Texas.

Board of Governors of the Federal Reserve System, June 30, 1995.

**Jennifer J. Johnson,**

*Deputy Secretary of the Board.*

[FR Doc. 95-16692 Filed 7-6-95; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Announcement Number 529]

RIN 0905-ZA95

**FY 1995 Epidemiologic Research Studies of Acquired Immunodeficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) Infection**

**Introduction**

The Centers for Disease Control and Prevention (CDC) announces a program for competitive fiscal year (FY) 1995 grant or cooperative agreement applications to conduct epidemiologic and behavioral research studies of AIDS and HIV infection. These include studies to evaluate the implementation and effectiveness of policies to reduce mother-to-child HIV transmission, to examine factors related to mother-to-child HIV transmission, and to evaluate factors associated with healthy, long-term HIV- seropositive persons. The study of these research areas as they pertain to minority populations (defined as Black, Hispanic, Asian and Pacific Islander, and American Indian), is encouraged because minorities constitute over 50 percent of all reported cases of AIDS and approximately 76 percent of all women and children with AIDS.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2000," a PHS-led national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of HIV Infection. (To order a copy of "Healthy People 2000," see the section **WHERE TO OBTAIN ADDITIONAL INFORMATION.**)

**Authority**

This program is authorized under Sections 301(a) and 317(k)(2) of the Public Health Service Act [42 U.S.C. 241(a) and 247b(k)(2)], as amended. Applicable program regulations are set forth in 42 CFR Part 52, entitled "Grants for Research Projects."

**Smoke Free Workplace**

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children. This is consistent with the PHS mission to protect and advance the physical and mental health of American people.

**Eligible Applicants**

Eligible applicants include all public and private, nonprofit and for-profit organizations and governments and their agencies. Thus, universities, colleges, research institutions, hospitals, and other public and private organizations, State and local governments or their bonafide agents, federally recognized Indian tribal governments, Indian tribes or Indian tribal organizations, and small, minority- and/or women-owned businesses are eligible to apply.

**Availability of Funds**

Approximately \$3,900,000 will be available in FY 1995 to fund approximately eight awards. It is expected that the average award will be approximately \$375,000, ranging from \$350,000 to \$400,000. It is expected that about 5 new and 3 competing renewal awards will be made and that awards will begin on or about September 30, 1995. Awards will be funded for a 12-month budget period within a project period of up to 3 years. Funding estimates may vary and are subject to change. Continuation awards within the project period will be made on the basis of satisfactory programmatic progress and the availability of funds.

**Purpose**

The purpose of these awards is to conduct epidemiologic and behavioral research studies of AIDS and HIV infection. These include studies to evaluate the implementation and effectiveness of policies to reduce mother-to-child HIV transmission, to examine factors related to mother-to-child HIV transmission, and to evaluate factors associated with healthy long-term HIV- seropositive persons. The study of these research areas as they pertain to minority populations (defined as Black, Hispanic, Asian and Pacific Islander, and American Indian), is encouraged because minorities constitute over 50 percent of all reported cases of AIDS and

approximately 76 percent of all women and children with AIDS.

### Program Requirements

In conducting activities to achieve the purpose of this program, the applicant should follow the procedures set forth below.

#### Research Issues

Three research issues of programmatic interest to the health care community and to CDC for FY 1995 are listed below and are considered to be of significant importance in gaining a greater understanding of the epidemiology of AIDS and HIV infection. However, applications submitted by organizations that examine additional important HIV-related epidemiologic research issues will also be accepted and considered for funding.

#### A. Evaluating the Implementation of Policies to Reduce Mother-to-Child Transmission

Studies should be designed to evaluate the implementation and effectiveness of guidelines for universal counseling and voluntary HIV testing of pregnant women, for offering zidovudine (ZDV) to HIV-infected pregnant women to reduce mother-to-child HIV transmission, and for providing needed health and social services for HIV-infected women and their children. Specifically, proposals are sought which will address the following objectives:

1. To describe the extent to which current prenatal HIV counseling, testing, and intervention practices reflect full implementation of local and/or national guidelines (i.e., the United States PHS Recommendations for HIV Counseling and Testing for Pregnant Women) in a well-defined population.

2. To identify and quantify determinants of success or failure to implement guidelines for offering HIV counseling and testing among pregnant women and to identify and quantify determinants of accepting HIV testing by pregnant women.

3. To identify and quantify determinants of the acceptance of and adherence to preventive ZDV therapy, and the receipt of needed HIV-related services by HIV-infected pregnant women and their children.

4. To identify and quantify social and psychological effects of being diagnosed with HIV, in particular potential adverse social and psychological consequences of HIV testing of pregnant women including discrimination, domestic violence, and loss of social and family supports. Preference will be given to applicants who address two or more of

the above objectives and are able to document their ability to enroll an adequate number of pregnant women and HIV-infected pregnant women.

Applicants must be willing to participate collaboratively with CDC and other researchers in the development, implementation, and analysis of data from the proposed study.

#### B. Mother-to-Child HIV Transmission Studies

Studies should be designed to identify HIV-infected women during pregnancy or at delivery and enroll the women and their infants in a prospective follow-up study to examine factors related to mother-to-child HIV transmission, early diagnosis of infant infection, and disease progression, particularly in infants. Studies designed to examine the effect of interventions to prevent mother-to-child HIV transmission are of particular interest. Preference will be given to studies in which mother-infant pairs are already being systematically identified and followed, and which have the ability to perform virologic and immunologic assays. Applicants must demonstrate that they can provide adequate rates of follow-up of both mothers and infants, including collection of laboratory specimens at periodic intervals (particularly within the first 48 hours of birth and during the first 6 months of life), and long-term follow-up of infants, including those placed in foster care. Applicants must be willing to participate in collaborative studies with other CDC-sponsored mother-to-child HIV transmission projects, including use of common data collection instruments and study design where warranted. Applicants must demonstrate cost-efficient data management and statistical capability or provide explicit plans for data management by CDC or an outside group. Applicants must demonstrate the ability to enroll and follow at least 30 HIV-positive mother-infant pairs per year at each study site.

#### C. Prospective Evaluation of Healthy, Long-Term HIV-Seropositive Persons

Studies should be designed to assess virologic and host factors in which the HIV-infected persons remain disease-free or asymptomatic for prolonged periods (usually, for 10 or more years after HIV infection). Preference will be given to studies in which cohorts of long-term healthy HIV-seropositive persons with characterized dates of seroconversion and high CD4+ lymphocyte counts (e.g., >500 cells/mm<sup>3</sup>) have been established. Studies should be designed to try to identify

virologic and immunologic factors that may modulate the clinical course of HIV infection. Applicants should demonstrate a willingness to collaborate, or have a proven collaborative relationship, with virologic and immunologic laboratories, CDC, and providers of care to HIV-infected persons.

#### Research Project Grants

A research project grant is one in which substantial programmatic involvement by CDC is not anticipated by the recipient during the project period. Applicants for grants must demonstrate an ability to conduct the proposed research with minimal assistance, other than financial support, from CDC. This would include possessing sufficient resources for clinical, laboratory and data management services, and a level of scientific expertise to achieve the objectives described in their research proposal without substantial technical assistance from CDC.

#### Cooperative Agreements

A cooperative agreement implies that CDC will assist the collaborator in conducting the epidemiologic research of AIDS and HIV infection described in the PURPOSE section of this announcement. The application should be presented in a manner that demonstrates the applicant's ability to address the research problem in a collaborative manner with CDC.

In conducting activities to achieve the purpose of this program, the recipient shall be responsible for the activities under A., below, and CDC shall be responsible for conducting activities under B., below:

#### A. Recipient Activities

1. Develop the research study protocol and the interview instrument in collaboration with CDC;

2. Identify, recruit, obtain informed consent, and enroll an adequate number of study participants as determined by the study protocol and the program requirements, where applicable;

3. Continue to follow study participants as determined by the study protocol;

4. Establish procedures to maintain the rights and confidentiality of all study participants;

5. Perform laboratory tests (when appropriate) and data analysis as determined in the study protocol;

6. Collaborate and share data and specimens (when appropriate) with CDC and other collaborators to answer specific research questions; and

7. Conduct data analysis with CDC and other collaborators as well as present research findings.

#### B. CDC Activities

1. Provide technical assistance in the design and conduct of the research;
2. Provide technical guidance in the development of study protocols, consent forms and questionnaires;
3. Assist in designing a data management system;
4. Perform selected laboratory tests;
5. Coordinate research activities among the different sites; and
6. Participate in the analysis of research information and the presentation of research findings.

#### *Determination of Which Instrument to Use*

Applicants must specify the type of award for which they are applying, either project grant or cooperative agreement. CDC will review the applications in accordance with the evaluation criteria. Before issuing awards, CDC will determine whether a grant or cooperative agreement is the appropriate instrument based upon the need for substantial Federal involvement in the project.

#### **Evaluation Criteria**

Applications will be reviewed and evaluated based on the evidence submitted, which specifically describes the applicants' abilities to meet the following criteria:

A. The inclusion of a detailed review of the scientific literature pertinent to the study being proposed and specific research questions and/or hypotheses that will guide the research. (25 points)

B. The originality and need for the proposed research and the extent to which it does not replicate past or present research efforts. (25 points)

C. The plans to develop and implement the study describing how study participants (including racial/ethnic minority populations) will be identified, enrolled, tested and followed. (25 points)

D. The ability to enroll and follow an adequate number of eligible study participants to assure proper conduct of the study. This includes both demonstration of the availability of HIV-infected potential study participants and the experience of the investigator in enrolling and following such persons in a culturally and linguistically appropriate manner. (25 points)

E. The applicant's current activities in AIDS and HIV or related research and how they will be applied to achieving the objectives of the study. Letters of support from cooperating organizations

which demonstrate the nature and extent of such cooperation should be included. (20 points)

F. The applicant's understanding of the research objectives and their ability, willingness and/or need to collaborate with CDC and researchers from other study sites in study design and analysis, including use of common forms, and sharing of specimens (when appropriate) and data. (25 points)

G. The plan to protect the rights and confidentiality of all participants. (25 points)

H. The size, qualifications and time allocation of the proposed staff and the availability of facilities to be used during the research study. Description of how the project will be administered to assure the proper management of the daily activities of the program. (10 points)

I. The proposed schedule for accomplishing the activities of the research, including time-frames. (10 points)

J. A detailed evaluation plan which specifies methods and instruments to be used to evaluate the progress made in attaining research objectives. (10 points) (A maximum of 200 cumulative points can be awarded.)

The budget will be reviewed to determine the extent to which it is reasonable, clearly justified, and consistent with the intended use of funds. All budget categories should be itemized.

#### *Funding Priorities*

Priority will be given to competing continuation applications from satisfactorily performing projects over applications for projects not already receiving support under the program. Projects to evaluate the implementation of policies to reduce mother-to-child transmission will be awarded so that the composite of projects represents the geographic and demographic characteristics of HIV-infected childbearing women.

Public comments are not being solicited regarding the funding priority because time does not permit solicitation and review prior to the funding date.

#### **Executive Order 12372 Review**

Applications are not subject to review under Executive Order 12372, Intergovernmental Review of Federal Programs.

#### **Public Health System Reporting Requirements**

This program is not subject to the Public Health System Reporting Requirements.

#### **Catalog of Federal Domestic Assistance Number**

The Catalog of Federal Domestic Assistance Number is 93.943, Epidemiologic Research Studies of Acquired Immunodeficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) Infection in Selected Population Groups.

#### **Other Requirements**

##### *A. Paperwork Reduction Act*

Projects that involve the collection of information from 10 or more individuals and funded by cooperative agreement will be subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

##### *B. Human Subjects*

This program involves research on human subjects. Therefore, all applicants must comply with the Department of Health and Human Services Regulations, 45 CFR Part 46, regarding the protection of human subjects. Assurance must be provided to demonstrate that the project or activity will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing assurance in accordance with the appropriate guidelines and form provided in the application kit.

In addition to other applicable committees, Indian Health Service (IHS) institutional review committees also must review the project if any component of IHS will be involved or will support the research. If any American Indian community is involved, its tribal government must also approve that portion of the project applicable to it.

##### *C. HIV Program Review Panel*

Recipients must comply with the document entitled Content of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions (June 1992) (a copy is in the application kit). To meet the requirements for a program review panel, recipients are encouraged to use an existing program review panel, such as the one created by the State health department's HIV/AIDS prevention program. If the recipient forms its own program review panel, at least one member must be an employee (or a designated representative) of a State or local health department. The names of the review panel members must be listed on the Assurance of Compliance Form CDC 0.1113, which is also included in the application kit. The recipient must submit the program

review panel's report that indicates all materials have been reviewed and approved.

#### D. Patient Care

Applicants should provide assurance that all HIV-infected patients enrolled in their studies will be linked to an appropriate local HIV care system that can address their specific needs such as medical care, counseling, social services and therapy. Details of the HIV care system should be provided, describing how patients will be linked to the system. Funds will not be made available to support the provision of direct care for study participants.

#### Application Submission and Deadline

The original and five copies of the completed application Form PHS-398 (OMB No. 0925-0001) must be submitted to Clara Jenkins, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 320, Mail Stop E-15, Atlanta, Georgia 30305, on or before August 11, 1995. States and local governments may use Form PHS-5161-1 (OMB No. 0937-0189); however, Form PHS-398 is preferred. If using Form PHS-5161-1, submit an original and two copies to the address stated above.

##### 1. Deadline

Applications shall be considered as meeting the deadline if they are either:

- (a) Received on or before the stated deadline date; or
- (b) Sent on or before the deadline date and received in time for submission to the independent review group. (Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be accepted as proof of timely mailing.)

##### 2. Late Applications

Applications which do not meet the criteria in 1.(a) or 1.(b) above are considered late applications. Late applications will not be considered in the current competition and will be returned to the applicant.

#### Where To Obtain Additional Information

A complete program description, information on application procedures, an application package and business or financial management technical assistance may be obtained from Kevin

G. Moore, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 320, Mail Stop E-15, Atlanta, Georgia 30305, telephone (404) 842-6550. The announcement is available through the CDC homepage on the Internet. The address for the CDC homepage is <http://www.cdc.gov>.

Programmatic technical assistance may be obtained from Jeff Efird, Division of HIV/AIDS, National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Mail Stop E-45, Atlanta, Georgia 30333, telephone (404) 639-6130. Eligible applicants are encouraged to call prior to the development and submission of their application. Please refer to Announcement Number 529 when requesting information and submitting an application.

Potential applicants may obtain a copy of "Healthy People 2000" (Full Report: Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report: Stock No. 017-001-00473-1) referenced in the INTRODUCTION from the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325, telephone (202) 512-1800.

Dated: June 30, 1995.

#### Joseph R. Carter,

*Acting Associate Director for Management, Management and Operations Centers for Disease Control and Prevention (CDC).*

[FR Doc. 95-16688 Filed 7-6-95; 8:45 am]

BILLING CODE 4163-18-P

#### National Institutes of Health

##### National Heart, Lung, and Blood Institute; Notice of Meeting

Pursuant to Pub. L. 92-463, notice is hereby given of the meeting of the following Heart, Lung, and Blood Special Emphasis Panel.

The meeting will be open to the public to provide concept review of proposed contract or grant solicitations.

Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should inform the Contact Person listed below in advance of the meeting.

*Name of Panel:* NHLBI SEP on Tissue Engineering.

*Dates of Meeting:* July 25-26, 1995.

*Time of Meeting:* 1:00 p.m.

*Place of Meeting:* Holderness School, Plymouth, New Hampshire.

*Agenda:* The panel will review the current status of research in the designated areas, identify gaps and make recommendations regarding opportunities and priorities for future contract or grant solicitations.

*Contact Person:* Paul Didisheim, M.D., Rockledge Building II, 6701 Rockledge Drive, Room 9180, Bethesda, Maryland, 20892-7940, (301) 435-0513.

This notice is being published less than fifteen days prior to the meeting due to the urgent need to meet timing limitations imposed by the grant review cycle.

(Catalog of Federal Domestic Assistance Programs Nos. 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; and 93.839, Blood Diseases and Resources Research, National Institutes of Health)

Dated: June 30, 1995.

#### Susan K. Feldman,

*Committee Management Officer, NIH.*

[FR Doc. 95-16683 Filed 7-6-95; 8:45 am]

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#### Public Health Service

##### Agency Forms Undergoing Paperwork Reduction Act Review

Each Friday the Public Health Service (PHS) publishes a list of information collection requests under review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the PHS Reports Clearance Office on (202) 690-7100.

The following requests have been submitted for review since the list was last published on June 30.

1. National Nursing Home Expenditure Survey (NNHES) of the National Medical Expenditure Survey (NMES3)—New—The 1996 NMES3 National Nursing Home Expenditure Survey (NNES) will collect data on use of nursing homes and expenditures for nursing home care from facilities and community respondents for policy and research purpose. Data will be collected on use of nursing homes, expenditures, and sources of payment for care, and facility and resident characteristics. Respondents: Individuals or households; Business or other-for-profit; Not-for-profit institutions; Federal Government; State, Local or Tribal Government. Send comments to Allison Eydtt, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, D.C. 20503.