

qualified, including evidence of experience similar to this project.

5. Budget (not scored)

The extent to which itemized budget for conducting the project, along with justification, is reasonable and consistent with stated objectives and planned program activities.

6. Human Subjects (not scored)

The applicant must state if there is a need of human subjects review and describe a plan for the review of their proposed project by an accredited review board. The CDC Institutional Review Board (IRB) will review and approve the protocol initially and on at least an annual basis until the research project is completed.

I. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of

1. Semi-annual progress reports. The progress report will include a data requirement that demonstrates measures of effectiveness.

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

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

Awardee is required to obtain an annual audit of these CDC funds (program specific audit) by a U.S. based audit firm with international branches and current license/authority in-country, and in accordance with International Accounting Standards or equivalent.

A fiscal Recipient Capability Assessment may be required, pre-award or post-award, with the potential awardee in order to review their business management and fiscal capabilities regarding the handling of U.S. Federal funds. Send all reports to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement in the application kit.

The following additional requirements are applicable to this program.

- AR-1 Human Subjects
- AR-7 Executive Order 12372 Review
- AR-8 Public Health System Reporting Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2010
- AR-12 Lobbying Restrictions
- AR-14 Accounting

J. Where to Obtain Additional Information

This and other CDC announcements, and the necessary application and associated forms can be found on the CDC home page Internet address—<http://www.cdc.gov> Click on "Funding" then "Grants and Cooperative Agreements."

To obtain business management technical assistance, contact: Vincent Falzone, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341-4146, Telephone number: 770-488-2763, Email address: vfalzone@cdc.gov.

For program technical assistance, contact: Barbara Lopes Cardozo, International Emergency Refugee Health Branch, Division of Emergency and Environmental Health Services, National Center for Environmental Health, Centers for Disease Control and Prevention, 4770 Buford Highway, NE (F-48), Atlanta, GA 30341, Telephone number: (770) 488-4138, Email address: BLopesCardozo@cdc.gov.

Dated: June 29, 2002.

Sandra R. Manning,

CGFM, Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 02-16938 Filed 7-5-02; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Sleep Disorders Research

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Sleep Disorders Research.

Times and Dates: 2:00 p.m.–2:30 p.m., July 23, 2002 (Open); 2:40 p.m.–4:00 p.m., July 23, 2002 (Closed).

Place: Teleconference number (513) 841-4560.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to a FY02 Congressional appropriation.

Contact Person for More Information: Kathleen Goedel, National Institute for Occupational Safety and Health, CDC, 4676 Columbia Parkway Cincinnati, OH., telephone (513) 841-4560.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: July 2, 2002.

Joe Salter,

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

[FR Doc. 02-17101 Filed 7-5-02; 8:45 am]

BILLING CODE 4163-19-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: New Investigator Awards for Unintentional, Violence, and Acute Case, Disability, and Rehabilitation Related Prevention Research, Program Announcement #02121

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 meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): New Investigator Awards for Unintentional, Violence, and Acute Case, Disability, and Rehabilitation Related Prevention Research, Program Announcement #02121.

Times and Dates: 6:00 p.m.–6:30 p.m., July 28, 2002 (Open); 6:30 p.m.–8:00 p.m., July 28, 2002 (Closed); 9:00 a.m.–5:00 p.m., July 29, 2002 (Closed).

Place: The Westin Hotel (Atlanta Airport) 4736 Best Road, Atlanta, GA 30337 Phone: (404) 762-7676.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to PA# 02121.

Contact Person for More Information: Dr. Lynda Doll, Associate Director for Science,

National Center for Injury Prevention and Control, CDC, 2939 Flowers Road, Atlanta, Georgia 30341; (770) 488-1430.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: July 2, 2002.

Joe Salter,

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

[FR Doc. 02-17105 Filed 7-5-02; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Regional Tribal Consultations

In 2001, a draft Tribal Consultation Policy was published with other Department of Health and Human Services tribal consultation policies. CDC is now seeking further tribal guidance on the proposed CDC policy and its implementation through regional tribal consultations and national meetings. We are inviting elected Tribal leaders, Executive Directors of American Indian/Alaska Native (AI/AN) organizations, Health Directors of AI/AN Programs, and AI/AN community members to attend scheduled Consultation meetings. The intent of this consultation process is to establish a mutually acceptable and more effective process of communication between CDC and AI/AN governments and communities. The goal is to establish protocol and to identify public health problems and priorities so that the needs of AI/AN populations are better incorporated into CDC plans and programs.

SUMMARY: CDC has scheduled a series of Regional Tribal Consultations to occur throughout the United States during the time frame of June through early October 2002. The CDC Regional Tribal Consultations will be geographically linked to the Indian Health Service areas as follows: Aberdeen Area (9/02), Alaska Area (8/23/02), Albuquerque Area (8/02), Bemidji Area (8/02-9/02), Billings Area (8/14/02), California Area (7/19/02), Nashville Area (6/12/02), Navajo Area (8/02), Oklahoma Area (7/9/02), Phoenix & Tucson Areas (7/17/02), and Portland Area (6/21/02). In addition, open forums & national tribal consultations will be scheduled at the

following national meetings of AI/AN organizations during late summer and early fall of 2002: the Association of American Indian Physicians (AAIP), the National Alaska Native American Indian Nurses Association (NANAINA), the National Council on Urban Indian Health (NCUIH), the National Indian Health Board (NIHB), the Indian Health Leadership Council, the Self Government Advisory Committee, and the National Congress of American Indians.

Background: The CDC is committed to improving the public health of AI/AN communities, and recognizes both the unique relationship it has with its AI/AN constituents and the cultural diversity of that constituency. To formally guide its efforts to develop and implement a tribal consultation, CDC has established an agency-wide Tribal Consultation Working Group (TCWG), members of which are native and non-native representatives from each of the Centers, Institute, and Offices that comprise CDC and the Agency for Toxic Substances and Disease Registry (ATSDR). In addition to the TCWG, CDC has established two full-time professional staff positions within the Office of the Director to help plan and coordinate CDC programs for AI/AN communities: (1) The CDC Senior Tribal Liaison for Policy and Evaluation and (2) the CDC Senior Tribal Liaison for Science and Public Health. Located in Atlanta, GA and Albuquerque, NM, respectively, these CDC staff members report directly to the Associate Director for Minority Health and serve as CDC points-of-contact for programs/issues relevant to issues of AI/AN public health.

The Agency's commitment to AI/AN public health is further demonstrated by the active engagement of more of its professional staff in broader, more systematic efforts to partner with AI/AN communities across the United States. Prominent among these efforts is the placement of CDC staff in situations that enhance tribal access to CDC personnel and resources (e.g., at least 12 CDC professionals field-assigned to work exclusively on AIAN issues in Indian Country). CDC is also expanding its partnerships with the Indian Health Service (IHS) through multiple intra-agency agreements, collaborative projects, and the establishment of the IHS-CDC-ATSDR Senior Policy Group. A priority for IHS-CDC partnerships is the expansion of the Tribal Epidemiology Centers Program. Overall, CDC and its partners (tribal governments and communities, state health departments, academic institutions, and other federal

organizations) are addressing multiple health issues that affect AI/AN communities including, but not limited to, diabetes, injuries, tobacco use, cardiovascular health, cancer, maternal-child health, and infectious diseases such as HIV/AIDS, other sexually transmitted diseases, hepatitis, antibiotic-resistant bacterial infections, and hantavirus.

FOR FURTHER INFORMATION CONTACT: To express interest in attending and/or participating in the regional or national consultations and to obtain additional information, contact:

Captain Pelagie "Mike" Snesrud, RN, Senior CDC Tribal Liaison for Policy and Evaluation, Office of the Director, Centers for Disease Control and Prevention, MS-D39, 1600 Clifton Rd, NE, Atlanta, Georgia 30329, Phone: 404-639-0432; Fax: 404-639-2195, Email: pws8@cdc.gov.

or

Captain Ralph T. Bryan, M.D., Senior CDC Tribal Liaison for Science and Public Health, Office of the Director, Centers for Disease Control and Prevention, c/o IHS National Epidemiology Program, 5300 Homestead Rd. NE., Albuquerque, NM 87110, Phone: 505-248-4226; Fax: 505-248-4393, e-mail: rrb2@cdc.gov.

SUPPLEMENTARY INFORMATION: The mission of the CDC is to promote health and quality of life by preventing and controlling disease, injury and disability. CDC accomplishes its mission by working with partners throughout the United States and the world to monitor health, detect and investigate health problems, conduct applied research to enhance prevention, develop and advocate sound public health policies, implement prevention strategies, promote healthy behaviors, foster safe and healthful environments, and provide leadership and training. CDC's priorities are: Strengthen science for public health action, Collaborate with health care partners for prevention, Promote healthy living at all stages of life, and Work with partners to improve global health.

The CDC will honor the sovereignty of American Indian/Alaska Native Governments, respect the inherent rights of self-governance and commit to work on a government-to-government basis. The CDC will confer with Tribal Governments, Alaska Native Organizations and AIAN communities, before taking actions and/or making decisions that affect them. Consultation will include all AI/AN governments and organizations.