

relevant reports of the National Quality Forum (such as “National Voluntary Consensus Standards for Hospital Care: An Initial Performance Measure Set” and “Reaching the Tipping Point: Measuring and Reporting Quality Using the NQF-Endorsed Hospital Care Measures”) and the Institute of Medicine (such as “Priority Areas for National Action: Transforming Health Care Quality”). Synopses of these reports are available on these organizations’ websites.

More detailed information about this project and subsequent listening sessions, the Hospital Quality Initiative, the NVHRI and other related activities may be found at <http://www.cms.hhs.gov/quality/hospital>.

**II. Meeting Format**

The first listening session will consist of three parts. First, a presentation on our current activities related to public reporting of hospital quality measures, as well as a discussion of priority areas and examples of measures as developed by such groups as the Institute of Medicine and the National Quality Forum. The next portion of the meeting will be reserved for a panel discussion and comments from key stakeholders, both local and national. The last third of the meeting will be reserved for comments, questions, and feedback from interested parties in attendance.

Time for participants to ask questions or offer comments will be limited according to the number of registered participants. Individuals who wish to offer comments need not indicate their

interest in advance, but they should register for and attend the meeting.

We are interested in a national public dialogue on public reporting of performance measures of hospital care beyond the ten measures currently included in the NVHRI. We believe that an active discussion will help us clearly identify the complementary and competing priorities and concerns of the various stakeholders interested in public reporting. Therefore, we are providing an opportunity for those persons who are unable to attend one of the five listening sessions to submit written comments to one of addresses listed in the **ADDRESSES** section of this notice by July 30, 2004. However, we will not be able to respond personally to the written comments received.

**III. Registration Instructions**

The New York State Quality Improvement Organization, IPRO, is coordinating registration for this listening session. There is no registration fee. You may register online by visiting the IPRO Web site at <http://www.ipro.org> or you may call 1–800–852–3685, ext. 258. You will receive a registration confirmation.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: March 18, 2004.

**Dennis G. Smith,**

*Acting Administrator, Centers for Medicare and Medicaid Services.*

[FR Doc. 04–6669 Filed 3–25–04; 8:45 am]

**BILLING CODE 4120–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Uniform Project Description (UPD) for Discretionary Grant Application Form.

*OMB No.:* 0970–0139.

*Description:* The Administration for Children and Families (ACF) has more than 40 discretionary grant programs. The proposed information collection form would be a uniform discretionary application form usable for all of these grant programs to collect the information from grant applicants needed to evaluate and rank applicants and protect the integrity of the grantee selection process. All ACF discretionary grant programs would be eligible but not required to use this project description portion of the application form. When using the UPD, the project description portion of a program announcement consists of a series of text options which can be selected for individual projects. The combination of selected text options solicits information necessary to evaluate applications solicited for the particular program announcement. Guidance for the content of information requested in the project description is found in OMB Circulars A–102 and A–110.

*Respondents:* Applicants for ACF Discretionary Grant Programs

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hour per response	Total burden hours
UPD .....	11,050	1	40	442,000

Estimated Total Annual Burden Hours: 442,000

**SUPPLEMENTARY INFORMATION:** Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L’Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [grjohnson@acf.hhs.gov](mailto:grjohnson@acf.hhs.gov).

*OMB Comment:* OMB is required to make a decision concerning the collection of information between 30 and 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, Attn: Desk Officer for ACF, E-mail address: [katherine\\_t.\\_astrich@omb.eop.gov](mailto:katherine_t._astrich@omb.eop.gov).

Dated: March 22, 2004.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 04–6736 Filed 3–25–04; 8:45 am]

**BILLING CODE 4184–01–M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35). To request a copy of the