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- a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
 - f. 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.
 4. Semi-annual progress reports, 30 days after the end of the budget period. These reports must be mailed to the Grants Management or Contract Specialist listed in the "Agency Contacts" section of this announcement.

VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: (770) 488-2700.

For program technical assistance, contact: Jonathan Mermin, MD, MPH, Global AIDS Program, Uganda Country Team, National Center for HIV, STD and TB Prevention, Centers for Disease Control and Prevention P.O. Box 49, Entebbe, Uganda, Telephone: +256-41320776, e-mail: jhm@cdc.gov.

For financial, grants management, or budget assistance, contact: Shirley Wynn, Contract Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: (770) 488-1515, e-mail address: zbx6@cdc.gov.

Dated: June 4, 2004.

William P. Nichols,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Laboratory Service Strengthening at Health Center IV and Above in the Republic of Uganda

Announcement Type: New.
Funding Opportunity Number: Program Announcement 04223.

Catalog of Federal Domestic Assistance Number: 93.941.

Key Dates:

Application Deadline: July 12, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under sections 301 and 307 of the Public Health Service Act, [42 U.S.C. 241 and 242], and section 104 of the Foreign Assistance Act of 1961, 22 U.S.C. 215lb, as amended.

Purpose: The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2004 funds for a cooperative agreement program for Laboratory Service Strengthening at Health Center IV and above in the Republic of Uganda. This program addresses the "Healthy People 2010" focus area of HIV.

The overall aim of this program is to improve the capacity of the laboratories within the Uganda health system to offer HIV testing and counseling, and other key tests related to opportunistic infections diagnosis and the basic care package for people living with HIV, such as TB screening. Strengthening laboratories to support provision of antiretroviral therapy (ART) is not a deliberate part of this program though the improvements made in facilities and personnel may provide benefits to planned and future programs of ARV therapy.

The United States Government seeks to reduce the impact of HIV/AIDS in specific countries within sub-Saharan Africa, Asia and the Americas. The President's Emergency Plan for AIDS Relief (PEPFAR) encompasses HIV/AIDS activities in more than 75 countries and focuses on 14 countries, including Uganda, to develop comprehensive and integrated prevention, care and treatment programs. CDC has initiated its Global AIDS Program (GAP) to strengthen capacity and expand activities in the areas of: (1) HIV primary prevention; (2) HIV care, support and treatment; and (3) capacity and infrastructure development, including surveillance. Targeted countries represent those with the most severe epidemics and the highest number of new infections. They also represent countries where the potential impact is greatest and where the United States government agencies are already active. Uganda is one of those countries.

CDC's mission in Uganda is to work with Ugandan and international partners to develop, evaluate, and support effective implementation of interventions to prevent HIV and related illnesses and improve care and support of persons with HIV/AIDS.

Voluntary counseling and testing (VCT) services are available at a large number of private and government clinics across the country, but there are still many communities far from VCT providers. The most recent Demographic and Health Survey in Uganda indicated that 70 percent of people would like to receive HIV testing but only 10 percent reported that they had been tested. The absence of VCT, routine counseling and testing (RCT), and TB screening at many existing health facilities presents a major challenge in covering the whole population of Uganda with these key services. If all Health Centers IV and above can provide good quality laboratory services, this will represent a major contribution to both the Uganda HIV/AIDS prevention and care strategies.

The purpose of this program is to ensure that over five years all laboratories at Health Center IV facilities and above are rehabilitated, their staff provided with training and support supervision, and quality assurance systems are established such that these facilities are able to offer HIV testing to support VCT, TB screening, and diagnosis of other common opportunistic infections (OI) that is of reliable quality and is available without interruption. The program may also support scholarships for the training of staff, including HIV counselor training, for facilities lack of staff is a key impediment to service delivery. It is expected that the program would last five years and evolve gradually from a focus on rehabilitation and refresher training to concentrate on supervision and quality assurance. This program does not include any responsibility for financial support of care provision.

The measurable outcomes of the program will be in alignment with GAP goals to reduce HIV transmission and improve care of persons living with HIV. They also will contribute to the PEPFAR goals, which are: (1) Within five years treat more than two million HIV-infected persons with effective combination anti-retroviral therapy; (2) care for seven million HIV-infected and affected persons including those orphaned by HIV/AIDS; and (3) prevent 10 million new infections. Specific measurable outcomes of this program will be the percentage of units that have functioning integrated VCT services, the number of clients served with VCT and the number of persons trained in lab-related activities.

Activities:

1. Awardee Activities.

Awardee activities for this program are as follows:

a. Identify project staffing needs; hire and train staff.

b. Identify vehicles, furnishings, fittings, equipment, computers and other fixed assets procurement needs of the program and acquire from normal sources.

c. Establish suitable administrative and financial management structures and a project office, if required.

d. Conduct a comprehensive national assessment of laboratory facilities and personnel from Health Center IV and above, taking into account data already collected by the AIDS/HIV Integrated Model District Program (AIM) and other stakeholders. Use this assessment for the targeting and prioritizing of program activities.

e. Develop and implement a program of laboratory rehabilitation and equipment based on an agreed basic standard.

f. Plan, develop and implement, in coordination with stakeholders, an in-service training program for laboratory technicians focusing on rapid HIV testing, screening for TB and other common OIs, skills and practices required for good management of laboratory facilities and other relevant topics identified by needs assessment.

g. Provide scholarships for the training of counselors and laboratory staff for health units where understaffing is found to be a critical issue.

h. Work with stakeholders and relevant authorities to support the development of improved supervision and quality assurance systems within the public and private laboratory system.

i. Support the collection and analysis of data to assess the scale of HIV counseling and testing and TB screening provision. Support improved laboratory management, supervision, and quality assurance. The data collection system should be integrated within the general Health Management Information System (HMIS).

j. Ensure that the commodities supplies management system is operational at the facilities level.

k. Ensure that the above activities are undertaken in a manner consistent with the national HIV/AIDS strategic framework.

2. CDC Activities

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC activities for this program are as follows:

a. Provide technical assistance, as needed, in the development of standards for laboratory facilities,

training materials and programs, and quality assurance systems.

b. Collaborate with the awardee, as needed, in the development of an information technology system for tracking key laboratory activities and in the analysis of data derived from those records.

c. Assist, as needed, in the evaluation of the program and in the development of further appropriate initiatives.

d. Provide input, as needed, into the criteria for selection of staff and non-staff implementing the program and of those receiving either laboratory or counselor training.

e. Provide input into the overall program strategy.

f. Collaborate, as needed, with the awardee in the selection of key personnel to be involved in the activities to be performed under this agreement including approval of the overall manager of the program.

Technical assistance and training may be provided directly by CDC staff or through organizations that have successfully competed for funding under a separate CDC contract.

II. Award Information

Type of Award: Cooperative Agreement.

CDC involvement in this program is listed in the Activities section above.

Fiscal Year Funds: 2004.

Approximate Total Funding: \$3,500,000. (This amount is for the entire five year project period.)

Approximate Number of Awards: 1.

Approximate Average Award: \$700,000. (This amount is for the first 12-month budget period, and includes only direct costs.)

Floor of Award Range: none.

Ceiling of Award Range: \$700,000.

Anticipated Award Date: September 1, 2004.

Budget Period Length: 12 months.

Project Period Length: 5 years.

Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

III.1. Eligible Applicants

Applications may be submitted by public nonprofit organizations, private nonprofit organizations, universities, colleges, research institutions, hospitals, and faith-based organizations that meet the following criteria:

1. Have at least three years of documented HIV/AIDS related laboratory programming experience in Uganda.

2. Have demonstrated expertise in health system development and management and knowledge of the health system in Uganda.

3. Have extensive knowledge in laboratory protocols relevant to the program.

4. The organization must be based in Uganda.

III.2. Cost Sharing or Matching

Matching funds are not required for this program.

III.3. Other

If you request a funding amount greater than the ceiling of the award range, your application will be considered non-responsive and will not be entered into the review process. You will be notified that your application did not meet the submission requirements.

If your application is incomplete or non-responsive to the requirements listed below, it will not be entered into the review process. You will be notified that your application did not meet the submission requirements.

Note: Title 2 of the United States Code Section 1611 states that an organization described in section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant or loan.

IV. Application and Submission Information

IV.1. Address To Request Application Package

To apply for this funding opportunity use application form PHS 5161.

Application forms and instructions are available on the CDC Web site, at the following Internet address: www.cdc.gov/od/pgo/forminfo.htm.

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the CDC Procurement and Grants Office Technical Information Management Section (PGO-TIM) staff at: (770) 488-2700. Application forms can be mailed to you.

Content and Form of Submission

Application: You must submit a project narrative with your application forms. Your narrative must be submitted in the following format:

- Maximum number of pages: 25. If your narrative exceeds the page limit, only the first pages which are within the page limit will be reviewed.

- Font size: 12 point un-reduced.
- Page margin size: One inch.
- Printed only on one side of page.
- Held together only by rubber bands or metal clips; not bound in any other way.

- Must be submitted in English.

Your narrative should address activities to be conducted over the entire project period, and should consist of, as a minimum, a plan, objectives, activities, methods, and an evaluation framework.

A budget and budget justification highlighting any supplies mentioned in the Program Requirements and any proposed capital expenditure must also be included. The budget justification will not be counted in the page limit stated above. Guidance for completing your budget can be found on the United States government Website at the following address: <http://www.cdc.gov/od/pgo/funding/budgetguide.htm>.

Additional information is optional and may be included in the application appendices. The appendices will not be counted toward the narrative page limit. Additional information could include but is not limited to: organizational charts, curriculum vitae, letters of support, etc.

You are required to have a Dun and Bradstreet Data Universal Numbering System (DUNS) number to apply for a grant or cooperative agreement from the Federal government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access www.dunandbradstreet.com or call 1-866-705-5711.

For more information, see the CDC Web site at: <http://www.cdc.gov/od/pgo/funding/pubcomm.htm>.

If your application form does not have a DUNS number field, please write your DUNS number at the top of the first page of your application, and/or include your DUNS number in your application cover letter.

Additional requirements that may require you to submit additional documentation with your application are listed in section "Administrative and National Policy Requirements."

IV.3. Submission Dates and Time

Application Deadline Date: July 12, 2004.

Explanation of Deadlines:

Applications must be received in the CDC Procurement and Grants Office by 4 p.m. Eastern Time on the deadline date. If you send your application by the United States Postal Service or commercial delivery service, you must

ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If CDC receives your application after closing due to: (1) Carrier error, when the carrier accepted the package with a guarantee for delivery by the closing date and time, or (2) significant weather delays or natural disasters, you will be given the opportunity to submit documentation of the carriers guarantee. If the documentation verifies a carrier problem, CDC will consider the application as having been received by the deadline.

This announcement is the definitive guide on application format, content, and deadlines. It supersedes information provided in the application instructions. If your application does not meet the deadline above, it will not be eligible for review, and will be discarded. You will be notified that your application did not meet the submission requirements.

CDC will not notify you upon receipt of your application. If you have a question about the receipt of your application, first contact your courier. If you still have a question, contact the PGO-TIM staff at: (770) 488-2700. Before calling, please wait two to three days after the application deadline. This will allow time for applications to be processed and logged.

IV.4. Intergovernmental Review of Applications

Executive Order 12372 does not apply to this program.

IV.5. Use of Funds

Funds may be used for:

1. Assessment and rehabilitation of laboratory facilities including provision of basic requisite utilities and equipment.

2. Assessment and training of laboratory staff on a national basis; Provision of scholarships for the training of counselors and other laboratory staff.

3. Evaluation and management of the activities.

Funds may not be used for any new construction. The purchase of antiretrovirals (ARVs), reagents and laboratory equipment for ARV treatment is not a permitted use of these funds. Recurrent supplies and test kits will be available to laboratories through the normal medical supplies system.

Funding Restrictions

Restrictions, which must be taken into account while writing your budget, are as follows:

- Antiretroviral Drugs—The purchase of ARVs, reagents, and laboratory

equipment for ARV treatment projects require pre-approval from HHS/CDC officials.

- Needle Exchange—No funds appropriated under this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

- Funds may be spent for reasonable program purposes, including personnel, training, travel, supplies and services. Equipment may be purchased and renovations completed, however, prior written approval by CDC officials must be requested in writing.

- All requests for funds contained in the budget shall be stated in U.S. dollars. Once an award is made, CDC will not compensate foreign grantees for currency exchange fluctuations through the issuance of supplemental awards.

- The costs that are generally allowable in grants to domestic organizations are allowable to foreign institutions and international organizations, with the following exception: With the exception of the American University, Beirut, the Gorgas Memorial Institute, and the World Health Organization, Indirect Costs will not be paid (either directly or through sub-award) to organizations located outside the territorial limits of the United States or to international organization regardless of their location.

- The applicant may contract with other organizations under this program, however, the applicant must perform a substantial portion of the activities, including program management and operations, and delivery of prevention and care services for which funds are requested.

- Prostitution and Related Activities. The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons.

Any entity that receives, directly or indirectly, U.S. Government funds in connection with this document ("recipient") cannot use such U.S. Government funds to promote or advocate the legalization or practice of prostitution or sex trafficking. Nothing in the preceding sentence shall be construed to preclude the provision to individuals of palliative care, treatment, or post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits, condoms, and, when proven effective, microbicides. A recipient that is otherwise eligible to receive funds in connection with this document to prevent, treat, or monitor HIV/AIDS shall not be required to

endorse or utilize a multisectoral approach to combating HIV/AIDS, or to endorse, utilize, or participate in a prevention method or treatment program to which the recipient has a religious or moral objection. Any information provided by recipients about the use of condoms as part of projects or activities that are funded in connection with this document shall be medically accurate and shall include the public health benefits and failure rates of such use.

In addition, any foreign recipient must have a policy explicitly opposing, in its activities outside the United States, prostitution and sex trafficking, except that this requirement shall not apply to the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Health Organization, the International AIDS Vaccine Initiative or to any United Nations agency, if such entity is a recipient of U.S. government funds in connection with this document.

The following definitions apply for purposes of this clause:

- Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. 22 U.S.C. 7102(9).

- A foreign recipient includes an entity that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico. *Restoration of the Mexico City Policy*, 66 FR 17303, 17303 (March 28, 2001).

All recipients must insert provisions implementing the applicable parts of this section, "Prostitution and Related Activities," in all subagreements under this award. These provisions must be express terms and conditions of the subagreement, acknowledge that each certification to compliance with this section, "Prostitution and Related Activities," are a prerequisite to receipt of U.S. Government funds in connection with this document, and must acknowledge that any violation of the provisions shall be grounds for unilateral termination of the agreement prior to the end of its term. In addition, all recipients must ensure, through contract, certification, audit, and/or any other necessary means, all the applicable requirements in this section, "Prostitution and Related Activities," are met by any other entities receiving U.S. Government funds from the recipient in connection with this document, including without limitation, the recipients' sub-grantees, sub-contractors, parents, subsidiaries, and affiliates. Recipients must agree that HHS may, at any reasonable time, inspect the documents and materials

maintained or prepared by the recipient in the usual course of its operations that relate to the organization's compliance with this section, "Prostitution and Related Activities."

All primary grantees receiving U.S. Government funds in connection with this document must certify compliance prior to actual receipt of such funds in a written statement referencing this document (e.g., "[Recipient's name] certifies compliance with the section, 'Prostitution and Related Activities.'" addressed to the agency's grants officer. Such certifications are prerequisites to the payment of any U.S. Government funds in connection with this document.

Recipients' compliance with this section, "Prostitution and Related Activities," is an express term and condition of receiving U.S. Government funds in connection with this document, and any violation of it shall be grounds for unilateral termination by HHS of the agreement with HHS in connection with this document prior to the end of its term. The recipient shall refund to HHS the entire amount furnished in connection with this document in the event it is determined by HHS that the recipient has not complied with this section, "Prostitution and Related Activities."

Awards will not allow reimbursement of pre-award costs.

IV.6. Other Submission Requirements

Application Submission Address: Submit the original and two hard copies of your application by mail or express delivery service to: Technical Information Management Section—PA#04223, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341.

Applications may not be submitted electronically at this time.

V. Application Review Information

V.1. Criteria

You are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures must be objective and quantitative, and must measure the intended outcome. These measures of effectiveness must be submitted with the application and will be an element of evaluation.

Your application will be evaluated against the following criteria:

1. Understanding of the issues, principles and systems requirements

involved in improving laboratory performance in Health Center IV facilities and above and in carrying out basic laboratory rehabilitation in the context of Uganda. (25 points)

Does the applicant demonstrate an understanding of the technical, managerial and other practical issues involved in delivering a cost effective and relevant program of laboratory rehabilitation, in-service training, and development of supervision and quality assurance systems focusing on VCT and screening for TB and other common OIs throughout Uganda?

2. Ability to carry out the proposal (25 points)

Does the applicant demonstrate the capability to achieve the purpose of this proposal?

3. Personnel (20 points)

Are the personnel (including their qualifications, training, availability, and experience) adequate to carry out the proposed activities?

4. Work Plan (15 points)

Does the applicant describe activities which are realistic, achievable, time-framed and appropriate to complete this program?

5. Administrative and Accounting Plan (15 points)

Is there a plan to account for, prepare reports, monitoring and audit expenditures under this agreement, manage the resources of the program and produce, collect and analyze performance data?

6. Budget (not scored)

Is the budget for conducting the activity itemized and well-justified and consistent with stated activities and planned program activities?

V.2. Review and Selection Process

Applications will be reviewed for completeness by the Procurement and Grants Office (PGO) staff, and for responsiveness by NCHSTP/GAP. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance through the review process. Applicants will be notified that their application did not meet submission requirements.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in the "Criteria" section above.

V.3. Anticipated Announcement and Award Dates

Award Date: September 1, 2004.

VI. Award Administration Information

VI.1. Award Notices

Successful applicants will receive a Notice of Grant Award (NGA) from the

CDC Procurement and Grants Office. The NGA shall be the only binding, authorizing document between the recipient and CDC. The NGA will be signed by an authorized Grants Management Officer, and mailed to the recipient fiscal officer identified in the application.

Unsuccessful applicants will receive notification of the results of the application review by mail.

VI.2. Administrative and National Policy Requirements:

45 CFR Part 74 and Part 92

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address: <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>.

The following additional requirements apply to this project:

- AR-10 Smoke-Free Workplace Requirements

Additional information on these requirements can be found on the CDC web site at the following Internet address: <http://www.cdc.gov/od/pgo/funding/ARs.htm>.

VI.3. Technical Reporting Requirements

Provide CDC with original plus two copies of:

1. Semi annual progress reports, 30 days after the end of the budget period.
2. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
3. Financial status report, no more than 90 days after the end of the budget period.
4. Final financial and performance reports, no more than 90 days after the end of the project period.

These reports must be mailed to the Grants Management or Contract Specialist listed in the "Agency Contacts" section of this announcement.

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For financial, grants management, or budget assistance, contact:

Shirley Wynn, Contract Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: (770) 488-1515, e-mail address: zbx6@cdc.gov.

Dated: June 4, 2004.

William P. Nichols,

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

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BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Pediatric Environmental Health Specialty Unit (PEHSU) Program

Announcement Type: New.
Funding Opportunity Number: 04024.
Catalog of Federal Domestic Assistance Number: 93.161.

Key Dates:

Application Deadline: July 26, 2004.

Executive Summary: *The Agency for Toxic Substances and Disease Registry (ATSDR) Pediatric Environmental Health Specialty Unit (PEHSU) Program was developed as a national resource for pediatricians, other health care providers, Federal staff, and the public. The mission is to: (1) Reduce environmental health threats to children; (2) improve access to expertise in pediatric environmental medicine; and (3) strengthen public health prevention capacity.*

The three primary focus areas of the Program are education and health promotion, consultation, and referral of children who may have been exposed to environmental hazards.

I. Funding Opportunity Description

Authority: This program is authorized under sections 104(i) of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) of 1980, as amended by the Superfund Amendments and Reauthorization Act (SARA) of 1986 [42 U.S.C. 9604(i)].

Purpose: The grantee under this PEHSU Program will operate as a national resource for pediatricians, other health care providers, Federal staff, and the public. The purpose of the Program is to: (1) Reduce environmental health threats to children; (2) improve access to expertise in pediatric environmental medicine; (3) strengthen public health prevention capacity; and (4) assist pediatric patients, their families, health care providers, and Federal/regional staff. The grantee will also assist sites or local communities where the ATSDR and the PEHSU Program are intended to provide services to pediatric patients and their families, health care providers, and Federal/regional staff. The PEHSU will have a special focus to assist sites or local communities where ATSDR and Environmental Protection Agency (EPA) are involved. This program addresses the "Healthy People 2010" focus area of Educational and Community-Based Programs, Environmental Health, and Age-Related Objectives for Children.

Measurable outcomes of the program will be in alignment with one (or more) of the following performance goal(s) for the ATSDR: (1) Prevent ongoing and future exposures and resultant health effects from hazardous waste sites and releases; (2) Mitigate the risks of human health effects at toxic waste sites with documented exposures; and (3) Build and enhance effective partnerships.

Activities

Awardee activities for this program are as follows:

Manage and Oversee the PEHSU Services

- Establish and administer a PEHSU Program in each of the ten EPA regions. (Please see Attachment One for a list of these regions. Attachments are posted with this announcement on the CDC Web site at <http://www.cdc.gov/od/pgo/funding/grantmain.htm>).

- Provide oversight and technical assistance in the regional PEHSU organizational development and operations management.

- Work closely with ATSDR and EPA staff located in federal regional offices, as well as EPA staff in Washington, DC and ATSDR staff in Atlanta, Georgia.

- Monitor and report quantitatively and qualitatively on PEHSU program accomplishments. Reports should be compatible with the ATSDR management information system Site Tracking and Reporting System (STARS).

- Develop, coordinate and host an annual PEHSU conference to promote professional and organizational