define each one at its first use and periodically throughout application.

Dated: August 25, 2005.

Mary Lou Valdez,

Deputy Director for Policy, Office of Global Health Affairs.

Cristina V. Beato,

Acting Assistant Secretary for Health, Office of Public Health and Science.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of Availability of Funds for Cooperative Agreement To Provide Technical Assistance and Support to the Afghanistan Ministry of Public Health (MOPH) in Strengthening the Management of the Women's and Children's Hospitals and Hospital Services in Kabul

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Public Health and Science, Office of Global Health Affairs.

Announcement Type: Cooperative Agreement—FY 2005 Initial Announcement.

Funding Opportunity Number: OGHA 05–025.

OMB Catalog of Federal Domestic Assistance: TBD, In Process.

Authority: Division F of the Consolidated Appropriations Act, 2005, Public Law 108–447 (2004).

SUMMARY: The Office of Global Health Affairs (OGHA) announces that up to $475,000 in fiscal year (FY) 2005 of funds is available for one (1) cooperative agreement to provide support to strengthen the management of women's and children's hospitals by the Afghan Ministry of Public Health (MOPH) in Kabul. This effort is an undertaking by the Department of Health and Human Services (HHS) in partnership with the Afghan MOPH. The primary goal of this project is to improve the quality of care at women's and children's health institutions in Afghanistan. The OGHA anticipates substantial HHS scientific and programmatic involvement in the administration of the quality improvement program. The project will be approved for up to a one-year period for a total of $475,000 (including indirect costs). Funding for the cooperative agreement is contingent upon the availability of funds

DATES: Application Availability: September 2, 2005.

Optional Letter of Intent due by 5 p.m. ET: September 9, 2005.

Applications due by 5 p.m. ET: September 19, 2005.

Award date: September 30, 2005.

ADDRESSES: Application kits may be requested from, and applications submitted to: Ms. Karen Campbell, Director, Office of Grants Management, Office of Public Health and Science (OPHS), HHS, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852.

I. Funding Opportunity Description

Purpose of the Agreement

HHS, in partnership with other relevant U.S. Government agencies, anticipates involvement in the development, administration and oversight of this program to improve hospital management capacity within the MOPH. The program will be for a three-year period. Approximately $475,000 (including indirect costs) will be available in the first year. Funding for the cooperative agreement in subsequent years is contingent upon the availability of funds and the performance of the awardee against measurable performance targets.

This Cooperative Agreement is intended to complement and build upon the work of the MOPH Hospital Management Task Force (HMTF) and its efforts to implement the Essential Package of Hospital Services (EPHS) and the recommendations of the Joint U.S. Government/MOPH health-facility management planning team, as outlined above. Implementation and adherence to recognized evidence-based healthcare and facility-management standards will be essential elements of successful proposals.

The awardee will work in collaboration with the MOPH's HMTF based on the approved recommendations of the Joint USG/MOPH planning mission. The plans will include but are not limited to the type of governance structure, procurement strategies, human resources management, financial management, facility and environmental safety management, sharing of services, developing a continuum of maternal and child healthcare in Kabul and centers of excellence within the consortium, developing an integrated health records system, and quality assurance. The award recipient will work with HHS to review training plans previously developed to support improvements in healthcare administration and provide a phased plan for leadership and healthcare management training as part of their planning process.

Activities: To assist the MOPH in carrying out the recommendations of the USG/MOPH team, including the development of a self-sustaining organizational structure within the MOPH that supports the management, organization and entrepreneurial growth of the healthcare hospital delivery sector in Kabul.

Assist in planning and establishing an organizational structure that facilitates the development of a network of women's and children's hospitals, herein referred to as the Kabul Women's and Children's Hospital Consortium, or the Consortium. Specifically: Develop a plan and assist in establishment of a Consortium Board of Directors that will provide governance, strategic direction and facilitate communication for the Consortium. The Board and its chair will be appointed by the MOPH.

Develop and implement a non-profit foundation to raise funds and broaden support for the Consortium. Solicit international donors' resource support for the foundation.

Implement and refine Consortium management and Board of Directors governance process. This includes assisting MOPH in the development of leadership accountability and performance contracts, objective performance assessment and measurement systems, and a performance-based salary and incentive system for healthcare managers and executives.

Summarize in a three-year plan the strategies that the Kabul Women's Children's Hospital Consortium will undertake in the restructuring of hospital service delivery. This plan will be prepared and submitted to the MOPH and HHS no later than three months of the initiation of this grant program.

Advise the HTMF staff on the establishment of a separate city-wide Kabul Hospital Council that will serve as a platform for local hospital directors for discussion, sharing of knowledge and best practices, creation of a referral system for continuity and coordination of care with the goal of improving healthcare services and health of the city of Kabul. The grantee is expected to assist the HMTF with preparing for Council meetings.

Provide technical assistance and logistical support to the MOPH in preparing, hosting and reporting the recommendations of an international healthcare management summit at a date to be determined by the MOPH. The main goal of this summit is to give the Minister a forum to describe the vision for the Afghan healthcare system, describe plans for the establishment of a hospital consortium in Kabul and gain support from the conference attendees for the MOPH vision to improve the

overall access to and quality of healthcare services in Kabul. The summit is intended to:

- Highlight MOPH's efforts to improve healthcare management including the key role of the Hospital Management Task Force in the process.
- Discuss, prioritize and coordinate international donor support for health facility management improvement efforts.
- Describe and obtain support for the establishment of Kabul Women and Children.
- Hospital Consortium and the Consortium Foundation.
- Formally adopt the concept of a Kabul Women and Children's Hospital Consortium.
- Introduce and describe the role of the Kabul Hospital Council.

In providing assistance to the MOPH for an International Healthcare Facility Management Summit, the award recipient will assist in developing a communication plan and list of invited participants, support MOPH interactions with appropriate stakeholders involved in maternal and child health (hospital directors, clinicians, non-governmental organizations, international donors, and others), complete a detailed agenda for the meeting, provide speech writing support for the MOPH, identify meeting facilitators, develop, copy and distribute all meeting invitations, materials and supporting documents and reserve and secure an appropriate location for the Summit. The award recipient will also assist the MOPH in preparing a report summarizing the Summit deliberations, recommendations and conclusions.

Assist in developing a set of standards to be used by the MOPH in evaluating the quality, performance and management of hospitals. This activity should build on the previous activities of other international donors, non-governmental groups, and multilateral organizations which have supported similar work. These standards should be modeled on standards used in other developed and developing countries and adapted to Afghan conditions. The standards should accommodate legal, religious and cultural factors found within Afghanistan. The objective is to develop over the course of the grant period a set of uniform, achievable expectations for structures, processes and outcomes for hospitals in Afghanistan and thus create an ''Afghan National Healthcare Certification Program.'' The work plan should reflect a schedule for developing the elements of the Certification Program over the course of the grant period.

Train a cadre of Afghan nationals at the MOPH capable of performing the review process according to the Afghan hospital standards described above. The goal of this activity is to enable the MOPH to certify hospitals by the end of the grant period. It is anticipated that funding and other incentives provided to Kabul-based hospitals by the MOPH would be based on their performance against these standards. The award recipient will work with the MOPH to determine what these incentives will be, the schedule of inspections, and how the Certification Program will be implemented.

The budget for the cooperative agreement is expected to support local expenses related to the summit, including meeting facilitators and administrative support staff. Conference attendees not affiliated with the grantee organization or the MOPH are expected to provide their own support.

Special Considerations

Travel Support: Applicants should be aware of and take into account the special security considerations when working in Afghanistan. Travel planning includes responsibility for all logistical arrangements for team members and will be the responsibility of the grantee. Travel expenses for attendees to the Summit will be the responsibility of the attendee or his/her organization. Travel expenses for MOPH staff attendees will be the responsibility of the MOPH.

Team Accommodation and On-site support: Accommodation and on-site support is not included and it is the responsibility of the award recipient and his/her support staff. The award recipient shall arrange all on-site resources for team members, including but not limited to food, security, emergency health care, and local transportation.

Finally, the award recipient will monitor and report progress quarterly to HHS/OGHA and conduct a comprehensive evaluation of all required elements and conditions, including outcome measures for effectiveness and efficiency.

II. Award Information

The administrative and funding instrument to be used for this program will be the cooperative agreement in which substantial OGHA/HHS scientific and/or programmatic involvement is anticipated during the performance of the project. Under the cooperative agreement, OGHA/HHS will support and/or stimulate awardee activities by working with them in a non-directive partnership role. HHS staff is substantially involved in the program activities, above and beyond routine monitoring. Through this cooperative agreement, HHS will collaborate in an advisory capacity with the award recipient, especially during the development and implementation of a mutually agreed-upon work plan. HHS will actively participate in periodic progress reviews and a final evaluation of the program.

Approximately $475,000 in FY 2005 funds is available to support the agreement. This level of support is dependent on the receipt of a sufficient number and diversity of applications of high merit.

The anticipated start date is October 1, 2005. There will only be one single award made from this announcement. The program and budget period for this agreement is for 24 months.

Although this program is provided for in the financial plans of the OGHA, the award pursuant to this RFA is contingent upon the availability of funds for this purpose.

The award recipient must comply with all HHS management requirements for meeting participation and progress and financial reporting for this cooperative agreement. (Please see HHS Activities and Program Evaluation sections below.)

HHS/OS/OGHA activities for this program are as follows:

- Organize an orientation meeting with the award recipient to brief them on applicable U.S. Government expectations, regulations, policies and key management requirements, as well as report formats and contents. The orientation could include meetings with staff from HHS agencies, the U.S. Departments of Defense and Veterans Affairs, and USAID.
- Review and approve the process used by the award recipient to select key personnel and/or post-award subcontractors and/or sub grantees to be involved in the activities performed under this agreement.
- Review and approve award recipients annual work plan and detailed budget.
- Review and approve award recipient's monitoring and evaluation plan.
- Meet on a monthly basis with award recipient to assess monthly expenditures in relation to approved work plan, and modify plans as necessary.
- Meet on a quarterly basis with award recipient to assess quarterly technical and financial progress reports, and modify plans as necessary.
- Meet on an annual basis with award recipient to review annual progress

report for each U.S. Government Fiscal Year, and to review annual work plans and budgets for the subsequent year.

• Assure experienced HHS or other subject-matter experts from other relevant U.S. Government agencies will participate in the planning, development, implementation, and evaluation of all phases of this project.

• Assist in establishing and maintaining U.S. Government, MOPH, and non-governmental organizations (NGOs) contracts and agreements necessary to carry out the program.

III. Eligibility Information

1. Eligible Applicants

Applications may be submitted by non-profit entities with offices in the United States and partner country or incorporated and headquartered in the United States with offices in the United States. Additionally, organizations or consortiums of organizations, including faith-based and community based organizations, that have collective experience with accepting donated medical technology, upgrading drug formularies, training health care providers, local and international transportation, and other logistics are encouraged to apply for a grant under this announcement.

2. Cost Sharing or Matching

Cost sharing, matching funds, and cost participation is not a requirement of this agreement.

3. Other—(If Applicable): N/A

IV. Application and Submission Information

1. Address To Request Application Package

This Cooperative Agreement project uses the Application Form OPHS–1, Revised 8/2004, which is enclosed in your application packet. This generic form is used by many different programs funded through the Public Health Service (PHS). Some parts of it are not required; other sections need to be filled out in a fashion specific to the program. Instructions for filling out OPHS–1, Revised 8/2004 will be included in the application packet. These forms may also be obtained from the following sites by: Downloading from: *https://egrants.osophs.dhhs.gov* and clicking on Grant Announcements or *http://www.grants.gov/* or by writing to Ms. Karen Campbell, Director, Office of Grants Management, OPHS, HHS Tower Building, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852; or contact the Office of Grants Management at (240) 453–8822. Please specify the OGHA program(s) for which you are requesting an application kit.

2. Content and Form of Application Submission

Application Materials

A separate budget page is required for the budget year requested. A line item budget (SF 424A) with coinciding justification to support each of the budget years must be submitted with the proposal. These forms will represent the full project period of Federal assistance requested. Proposals submitted without a budget and justification for each budget year requested in the application may not be favorably considered for funding. Specific instructions for submitting a detailed budget for this application will be included in the application packet. If additional information and/or clarification are required, please contact the OPHS Office of Grants Management identified in Section VII of this announcement.

All applications must be accompanied by a Project Abstract submitted on 3.5 inch floppy disk. The abstract must be typed, single-spaced, and not exceed 2 pages. Reviewers and staff will refer frequently to the information contained in the abstract, and therefore it should contain substantive information about the proposed projects in summary form. A list of suggested keywords and a format sheet for your use in preparing the abstract will be included in the application packet.

All grant applications must be accompanied by a Project Narrative. In addition to the instructions provided in OPHS–1 (Rev 8/2004) for project narrative, the specific guidelines for the project narrative are provided in the program guidelines. Format requirements are the same as for the Project Abstract Section; margins should be 1 inch at the top and 1 inch at the bottom and both sides; and typeset must be no smaller than 12 cpi and not reduced. Biographical sketches should be either typed on the appropriate form or plain paper and should not exceed two pages, with publications listed being limited only to those that are directly relevant to this project.

Application Format Requirements

If applying on paper, the entire application may not exceed 80 pages in length, including the abstract, project and budget narratives, face page, attachments, any appendices and letters of commitment and support. Pages must be numbered consecutively.

Applications submitted electronically that exceed 80 pages when printed will be deemed non-compliant. All non-compliant applications will be returned to the applicant without further consideration.

a. Number of Copies

Please submit one (1) original and two (2) unbound copies of the application. Please do not bind or staple the application. Application must be single sided.

b. Font

Please use an easily readable serif typeface, such as Times Roman, Courier, or CG Times. The text and table portions of the application must be submitted in not less than 12 point and 1.0 line spacing. Applications not adhering to 12 point font requirements may be returned.

c. Paper Size and Margins

For scanning purposes, please submit the application on 8½″ x 11″ white paper. Margins must be at least one (1) inch at the top, bottom, left and right of the paper. Please left-align text.

d. Numbering

Please number the pages of the application sequentially from page 1 (face page) to the end of the application, including charts, figures, tables, and appendices.

e. Names

Please include the name of the applicant on each page.

f. Section Headings

Please put all section headings flush left in bold type.

Application Format: Applications for funding must consist of the following documents in the following order:

i. Application Face Page

Public Health Service (PHS) Application Form OPHS–1, provided with the application package. Prepare this page according to instructions provided in the form itself.

DUNS Number

All applicant organizations are required to have a Data Universal Numbering System (DUNS) number in order to apply for a grant from the Federal Government. The DUNS number is a unique nine-character identification number provided by the commercial company, Dun and Bradstreet. There is no charge to obtain a DUNS number. Information about obtaining a DUNS number can be found at *https://www.dnb.com/product/eupdate/requestOptions.html* or call 1–866–705–5711. Please include the DUNS number next to the OMB

Approval Number on the application face page. Applications will not be reviewed without a DUNS number.

Additionally, the applicant organization will be required to register with the Federal Government's Central Contractor Registry (CCR) in order to do electronic business with the Federal Government. Information about registering with the CCR can be found at *http://www.hrsa.gov/grants/ccr.htm.*

Finally, applicants applying electronically through Grants.gov are required to register with the Credential Provider for Grants.gov. Information about this requirement is available at *http://www.grants.gov/CredentialProvider.*

Applicants applying electronically throughthe OPHS E-Grants System are required to register with the provider. Information about this requirement is available at. *https://egrants.osophs.dhhs.gov.*

ii. Table of Contents

Provide a Table of Contents for the remainder of the application (including appendices), with page numbers.

iii. Application Checklist

Application Form OPHS–1, provided with the application package.

iv. Budget

Application Form OPHS–1, provided with the application package.

v. Budget Justification

The amount of financial support (direct and indirect costs) that an applicant is requesting from the Federal granting agency for the first year is to be entered on the Face Sheet of Application Form PHS 5161–1, Line 15a. Each application should include funds for electronic mail capability unless access by Internet is already available. The amount of financial support (direct and indirect costs) entered on the SF 424 is the amount an applicant is requesting from the Federal granting agency for the project year. Please note that if indirect costs are requested, the applicant must submit a copy of the latest negotiated rate agreement. The indirect costs rate refers to the Other Sponsored Program/Activities rate and to neither the research rate, nor the education/training program rate. Those applicants without an established indirect cost rate for sponsored programs will be held at 26% of total direct costs except, in cases where there is no established rate, applicants may only request of 10% of salaries and wages. However, if an applicant's established rate for other sponsored programs exceeds 26%, but would be advantageous to the government, the OGHA/HHS may honor that indirect rate cost.

Personnel Costs: Personnel costs should be explained by listing each staff member who will be supported from funds, name (if possible), position title, percent full time equivalency, annual salary, and the exact amount requested.

Indirect Costs: Indirect costs are those costs incurred for common or joint objectives which cannot be readily identified but are necessary to the operations of the organization, *e.g.*, the cost of operating and maintaining facilities, depreciation, and administrative salaries. For institutions subject to OMB Circular A–21, the term ''facilities and administration'' is used to denote indirect costs. If the applicant does not have an indirect cost rate, you may obtain one by visiting the Division of Cost Allocation website: *http://rates.psc.gov.*

Fringe Benefits: List the components that comprise the fringe benefit rate, for example health insurance, taxes, unemployment insurance, life insurance, retirement plan, tuition reimbursement. The fringe benefits should be directly proportional to that portion of personnel costs that are allocated for the project.

Travel: List travel costs according to local and long distance travel. For local travel, the mileage rate, number of miles, reason for travel and staff member/consumers completing the travel should be outlined. The budget should also reflect the travel expenses associated with participating in meetings and other proposed trainings or workshops.

Equipment: List equipment costs and provide justification for the need of the equipment to carry out the program's goals. Extensive justification and a detailed status of current equipment must be provided when requesting funds for the purchase of computers and furniture items.

Supplies: List the items that the project will use. In this category, separate office supplies from medical and educational purchases. Office supplies could include paper, pencils, and the like; medical supplies are syringes, blood tubes, plastic gloves, etc., and educational supplies may be pamphlets and educational videotapes. Remember, they must be listed separately.

Subcontracts: To the extent possible, all subcontract budgets and justifications should be standardized, and contract budgets should be presented by using the same object class categories contained in the Standard Form 424A. Provide a clear explanation as to the purpose of each contract, how the costs were estimated, and the specific contract deliverables.

Other: Put all costs that do not fit into any other category into this category and provide an explanation of each cost in this category. In some cases, grantee rent, utilities and insurance fall under this category if they are not included in an approved indirect cost rate.)

vi. Staffing Plan and Personnel Requirements

Applicants must present a staffing plan and provide a justification for the plan that includes education and experience qualifications and rationale for the amount of time being requested for each staff position. Position descriptions that include the roles, responsibilities, and qualifications of proposed project staff must be included in Appendix XX. Copies of biographical sketches for any key employed personnel that will be assigned to work on the proposed project must be included in Appendix XX.

vii. Project Abstract

Provide a summary of the application. Because the abstract is often distributed to provide information to the public and Congress, please prepare this so that it is clear, accurate, concise, and without reference to other parts of the application. It must include a brief description of the proposed grant project including the needs to be addressed, the proposed services, and the population group(s) to be served.

Please place the following at the top of the abstract:

- Project Title
- Applicant Name
- Address
- Contact Phone Numbers (Voice, Fax)
- E-Mail Address
- Web Site Address, if applicable

The project abstract must be single-spaced and limited to two pages in length.

vii. Program Narrative

This section provides a comprehensive framework and description of all aspects of the proposed program. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

- Introduction.

This section should briefly describe the purpose of the proposed project.

- Work Plan.

Describe the activities or steps that will be used to achieve each of the

activities proposed in the methodology section. Use a time line that includes each activity and identifies responsible staff.

• Resolution of Challenges.

Discuss challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges.

• Evaluation and Technical Support Capacity.

Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature.

• Organizational Information.

Provide information on the applicant agency's current mission and structure, scope of current activities, and an organizational chart, and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations.

iii. Appendices

Please provide the following items to complete the content of the application. Please note that these are supplementary in nature, and are not intended to be a continuation of the project narrative. Be sure each appendix is clearly labeled.

(1) Appendix A: Tables, Charts, etc.

To give further details about the proposal.

(2) Appendix B: Job Descriptions for Key Personnel.

Keep each to one page in length as much as is possible. Item 6 in the Program Narrative section of the PHS 5161–1 Form provides some guidance on items to include in a job description.

(3) Appendix C: Biographical Sketches of Key Personnel.

Include biographical sketches for persons occupying the key positions described in Appendix B, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

(4) Appendix D: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific) Provide any documents that describe working relationships between the applicant agency and other agencies and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the subcontractors and any deliverable. Letters of agreements must be dated.

(5) Appendix E: Project Organizational Chart.

Provide a one-page figure that depicts the organizational structure of the project, including subcontractors and other significant collaborators.

(6) Appendix F: Other Relevant Documents.

Include here any other documents that are relevant to the application, including letters of supports. Letters of support must be dated.

3. Submission Dates and Times

Notification of Intent To Apply

A letter of intent is not required. However, if a letter of intent is submitted, the letter should identify the applicant organization and its intent to apply, and briefly describe the proposal to be submitted. Receipt of Letters of Intent will not be acknowledged.

This letter should be sent by September 9, 2005 by mail or fax to: Department of Health and Human Services, Office of the Secretary, Office of Global Health Affairs, 5600 Fishers Lane, Suite 18–101, Rockville, MD 20857, Facsimile Number: 301–443–2820.

Application Submission. The OPHS provides multiple mechanisms for submission of applications as described in the following sections.

Electronic Submission: The OPHS electronic grants management system, eGrants, provides for applications to be submitted electronically. While applications are accepted in hard copy, the use of the electronic application submissions capabilities provided by the eGrants system is encouraged. Information about this system is available on the Office of Population Affairs Web site at *http://opa.osophs.dhhs.gov,* or may be requested from the OPHS Office of Grants Management at 240–453–8822. Applications sent via any other means of electronic communication, including facsimile or electronic mail, outside of the OPHS eGrants system will not be accepted for review.

The body of the application and required forms can be submitted using the e-Grants system. In addition to electronically submitted materials, applicants are required to provide a hard copy of the application face page (Standard Form 424 [Revised 07/03]) with the original signature of an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the grant award. The application is not considered complete until both the electronic application and the hard copy of the face page with the original signature are received.

Electronic grant application submissions must be submitted no later than 5 p.m. eastern time on the deadline date specified in the **DATES** section of the announcement. All required hard copy original signatures and mail-in items must be received by the OPHS Office of Grants Management no later than 5 p.m. eastern time on the next business day after the deadline date specified in the **DATES** section of the announcement.

Applications will not be considered valid until all electronic application components, hard copy original signatures, and mail-in items are received by the OPHS Office of Grants Management according to the deadlines specified above. Any application submitted electronically after 5 p.m. eastern time on the deadline date specified in the **DATES** section of the announcement will be considered late and will be deemed ineligible. Failure of the applicant to submit all required hard copy original signatures to the OPHS Office of Grants Management by 5 p.m. eastern time on the next business day after the deadline date specified in the **DATES** section of the announcement will result in the electronic application being deemed ineligible.

Upon completion of a successful electronic application submission, the eGrants system will provide the applicant with a confirmation page indicating the date and time (eastern time) of the electronic application submission. This confirmation page will also provide the receipt status of all indicated signatures and items to be mailed to the OPHS Office of Grants Management. As items are received by the OPHS Office of Grants Management, the electronic application status will be updated to reflect the receipt of mail-in items. It is recommended that the applicant monitor the status of their application to ensure that all signatures and mail-in items are received.

Applicants are encouraged to initiate electronic applications early in the application development process, and to submit early on the due date or before. This will aid in addressing any problems with submission prior to the application deadline.

Mailed Hard Copy Applications: Applications submitted in hard copy must include an original and two copies of the application. The original application must be signed by an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the grant award.

Mailed applications will be considered as meeting the deadline if

they are received by the OPHS Office of Grants Management on or before 5 p.m. eastern time on the deadline date specified in the **DATES** section of the announcement. The application deadline date requirement specified in this announcement supercedes the instructions in the OPHS–1. Applications that do not meet the deadline will be returned to the applicant unread.

Hand-Delivered Applications: Hand-delivered applications must be received by the OPHS Office of Grants Management, 1101 Wootten Parkway, Suite 550, Rockville, Maryland 20852, no later than 5 p.m. eastern time on the deadline date specified in the **DATES** section of the announcement. Hand-delivered applications must include an original and two copies of the application. The original application must be signed by an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the grant award.

Applications will be screened upon receipt. Those that are judged to be incomplete or arrive after the deadline will be returned without review or comment. Applications that exceed the requested amount may also be returned without review or comment. Applicants that are judged to be in compliance will be notified by the OPHS Office of Grants Management. Accepted applications will be reviewed for technical merit in accordance with DHHS policies.

Applications should be submitted to: Director, Office of Grants Management, OPHS, HHS, 1101 Wootten Parkway, Suite 550, Rockville, MD 20852. Technical assistance on budget and business aspects of the application may be obtained from the Office of Grants Management, OPHS, HHS, 1101 Wootten Parkway, Suite 550, Rockville, MD 20852, telephone: (240) 453–8822.

4. Internal Government Review

This program is not subject to the review requirements of Executive Order 12372, Intergovernmental Review of Federal Programs.

5. Funding Restrictions

Allowability, allocability, reasonableness, and necessity of direct and indirect costs that may be charged are outlined in the following documents: OMB–21 (Institutes of Higher Education); OMB Circular A–122 (Nonprofit Organizations) and 45 CFR Part 74, Appendix E (Hospitals). Copies of these circulars can be found on the Internet at: *http://www.whitehouse.gov/omb.*

6. Other Submission Requirements: N/A

V. Application Review Information

1. Criteria

Applications will be screened by OGHA staff for completeness and for responsiveness to the program guidance. Applicants should pay strict attention addressing these criteria, as they are the basis upon which their applications will be judged. Those applications judged to be non-responsive or incomplete will be returned to the applicant without review.

Applications that are complete and responsive to the guidance will be evaluated for scientific and technical merit by an appropriate peer review group specifically convened for this solicitation and in accordance with HHS policies and procedures. As part of the initial merit review, all applications will receive a written critique. All applications recommended for approval will be discussed fully by the ad hoc peer review group and assigned a priority score for funding. Eligible applications will be assessed according the following criteria:

(1) *Technical Approach (40 points):*

• The applicant's presentation of a sound and practical technical approach for executing the requirements with adequate explanation, substantiation and justification for methods for handling the projected needs of the partner institution.

• The successful applicant must demonstrate a clear understanding of the scope and objectives of the cooperative agreement, recognition of potential difficulties that may arise in performing the work required, presentation of adequate solutions, and understanding of the close coordination necessary between the OGHA/HHS, Afghanistan Ministry of Public Health, U.S. Agency for International Development, and other organizations, such as the World Health Organization and United Nations Children's Fund.

• Applicants must submit a strategic plan that outlines the schedule of activities and expected products of the Group's work with benchmarks at months six, 12. The strategic plan should specifically address the expected progress of the Quality of Care program.

(4) *Personnel Qualifications and Experience (20 points):*

• Project Leadership—For the technical and administrative leadership of the project requirements, successful applicants must demonstrate documented training, expertise, relevant experiences, leadership/management skills, and availability of a suitable overall project manager and surrounding management structure to successfully plan and manage the project. Successful applicant will provide documented history of leadership in the establishment and management of training programs that involve training of health care professionals in countries other than the United States. Expertise in maternal and child health care and services including documented training, expertise, relevant experience, leadership skills, and maternal and child health specific medical expertise. Documented managerial ability to achieve delivery or performance requirements as demonstrated by the proposed use of management and other personnel resources and to successfully manage the project, including subcontractor and/or consultant efforts, if applicable, as evidence by the management plan and demonstrated by previous relevant experience.

• Partner Institutions and other Personnel—Applicants should provide documented evidence of availability, training, qualifications, expertise, relevant experience, education and competence of the scientific, clinical, analytical, technical and administrative staff and any other proposed personnel (including partner institutions, subcontractors and consultants), to perform the requirements of the work activities as evidenced by resumes, endorsements and explanations of previous efforts.

• Staffing Plan—Applicants should submit a staffing plan for the conduct of the project, including the appropriateness of the time commitment of all staff and partner institutions, the clarity and appropriateness of assigned roles, lines of authority. Applicants should also provide an organizational chart for each partner institution named in the application showing relationships among the key personnel.

• Administrative and Organizational Framework—Adequacy of the administrative and organizational framework, with lines of authority and responsibility clearly demonstrated, and adequacy of the project plan, with proposed time schedule for achieving objectives and maintaining quality control over the implementation and operation of the project. Adequacy of back-up staffing and the evidence that they will be able to function as a team. The framework should identify the institution that will assume legal and financial responsibility and accountability for the use and disposition of funds awarded on the basis of this RFA.

(5) *Experience and Capabilities of the Organization (30 Points):*

• Applicants should submit documented relevant experience of the organization in managing projects of similar complexity and scope of the activities.

• Clarity and appropriateness of lines of communication and authority for coordination and management of the project. Adequacy and feasibility of plans to ensure successful coordination of a multiple-partner collaboration.

• Documented experience recruiting qualified medical personnel for projects of similar complexity and scope of activities.

(4) *Facilities and Resources (10 Points):*

Documented availability and adequacy of facilities, equipment and resources necessary to carry out the activities specified under Program Requirements.

2. Review and Selection Process

Applications will be reviewed in competition with other submitted applications, by a panel of peer reviewers. Each of the above criteria will be addressed and considered by the reviewers in assigning the overall score. Final award will be made by the Deputy Director, Asia and Pacific Division of the Office Global Health Affairs on the basis of score, program relevance and, availability of funds.

VI. Award Administration Information

1. Award Notices

OGHA/HHS does not release information about individual applications during the review process until final funding decisions have been made. When these decisions have been made, applicants will be notified by letter regarding the outcome of their applications. The official document notifying an applicant that an application has been approved and funded is the Notice of Award, which specifies to the awardee the amount of money awarded, the purpose of the agreement, the terms and conditions of the agreement, and the amount of funding, if any, to be contributed by the awardee to the project costs.

2. Administrative and National Policy Requirements

The regulations set out at 45 CFR parts 74 and 92 are the Department of Health and Human Services (HHS) rules and requirements that govern the administration of grants. Part 74 is applicable to all recipients except those covered by part 92, which governs awards to state and local governments. Applicants funded under this announcement must be aware of and comply with these regulations. The CFR volume that includes parts 74 and 92 may be downloaded from *http://www.access.gpo.gov/nara/cfr/waisidx_03/45cfrv1_03.html.*

3. Reporting

Each party to this Cooperative Agreement has agreed to undertake the following obligations:

The applicant (recipient) agrees to:

a. Provide a budget for the acquisition and installation of the necessary equipment to complete the HHS Project, using the provided HHS Guidelines on Medical Equipment Donation;

b. Facilitate the acquisition, refurbishment and calibration of the necessary equipment at a reduced cost;

c. Prepare the necessary items for shipping including preparation of shipping documents for entry into partner country;

d. Provide manuals for the donated equipment which can be translated into the primary language, at a sixth grade reading level and contain illustrations. Manuals must include content on the proper storage, cleaning and care and repair of the equipment;

e. Ensure that the training method or module includes essential content regarding the adherence to established infection control principles;

f. Provide technical training and examination of proficiency by the user on agreed upon technologies and supplied equipment;

g. Ensure that training is provided by a certified trainer at a time closely coordinated with the delivery of the equipment or materials; and,

h. Accompany the equipment and supplies for the purpose of overseeing the distribution, installation, and training in partner institution.

HHS agrees to:

a. Identify the funds necessary for the acceptance of the necessary equipment in keeping with the approved budget; and,

b. Identify the funds or transportation necessary for the shipping of goods to partner country.

All projects are required to have an evaluation plan, consistent with the scope of the proposed project and funding level that conforms to the project's stated goals and objectives. The evaluation plan should include both a process evaluation to track the implementation of project activities and an outcome evaluation to measure changes in knowledge and skills that can be attributed to the project. Project funds may be used to support evaluation activities.

In addition to conducting their own evaluation of their projects, successful applicants must be prepared to participate in an external evaluation, to be supported by OGHA/HHS and conducted by an independent entity, to assess efficiency and effectiveness for the project funded under this announcement.

Within 30 days following the end of each of quarter, submit a performance report no more than ten pages in length must be submitted to OGHA/HHS. A sample monthly performance report will be provided at the time of notification of award. At a minimum, monthly performance reports should include:

• Concise summary of the most significant achievements and problems encountered during the reporting period, *e.g.* number of training courses held and number of trainees.

• A comparison of work progress with objectives established for the quarter using the grantee's implementation schedule, and where such objectives were not met, a statement of why they were not met.

• Specific action(s) that the grantee would like the OGHA/HHS to undertake to alleviate a problem.

• Other pertinent information that will permit monitoring and overview of project operations.

• A quarterly financial report describing the current financial status of the funds used under this award. The awardee and OGHA will agree at the time of award for the format of this portion of the report.

Within 90 days following the end of the project period a final report containing information and data of interest to the Department of Health and Human Services, Congress, and other countries must be submitted to OGHA/HHS. The specifics as to the format and content of the final report and the summary will be sent to successful applicants. At minimum, the report should contain:

• A summary of the major activities supported under the agreement and the major accomplishments resulting from activities to improve mortality in partner country.

• An analysis of the project based on the problem(s) described in the application and needs assessments, performed prior to or during the project period, including a description of the specific objectives stated in the grant application and the accomplishments and failures resulting from activities during the grant period.

Quarterly performance reports and the final report may be submitted to: Ms. Karen Campbell, Director, Office of Grants Management, OPHS, HHS, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, phone (240) 453–8822.

VII. Agency Contacts

For assistance on administrative and budgetary requirements, please contact: Ms. Karen Campbell, Director, Office of Grants Management, OPHS, HHS 1101 Wootton Parkway, Suite 550, Rockville, MD 20852, phone (240) 453–8822.

For assistance with questions regarding program requirements, please contact: Dr. Amar Bhat, Asia-Pacific Division, Office of Global Health Affairs, Office of the Secretary, Department of Health and Human Services, 5600 Fishers Lane, Suite 18–101, Rockville, MD 20857. Phone Number: 301–443–1410.

VIII. Tips for Writing a Strong Application

Include DUNS Number. You must include a DUNS Number to have your application reviewed. Applications will not be reviewed without a DUNS number. To obtain a DUNS number, access *www.dunandbradstreet.com* or call 1–866–705–5711. Please include the DUNS number next to the OMB Approval Number on the application face page.

Keep your audience in mind. Reviewers will use only the information contained in the application to assess the application. Be sure the application and responses to the program requirements and expectations are complete and clearly written. Do not assume that reviewers are familiar with the applicant organization. Keep the review criteria in mind when writing the application.

Start preparing the application early. Allow plenty of time to gather required information from various sources.

Follow the instructions in this guidance carefully. Place all information in the order requested in the guidance. If the information is not placed in the requested order, you may receive a lower score.

Be brief, concise, and clear. Make your points understandable. Provide accurate and honest information, including candid accounts of problems and realistic plans to address them. If any required information or data is omitted, explain why. Make sure the information provided in each table, chart, attachment, etc., is consistent with the proposal narrative and information in other tables.

Be organized and logical. Many applications fail to receive a high score because the reviewers cannot follow the thought process of the applicant or because parts of the application do not fit together.

Be careful in the use of appendices. Do not use the appendices for information that is required in the body of the application. Be sure to cross-reference all tables and attachments located in the appendices to the appropriate text in the application.

Carefully proofread the application. Misspellings and grammatical errors will impede reviewers in understanding the application. Be sure pages are numbered (including appendices) and that page limits are followed. Limit the use of abbreviations and acronyms, and define each one at its first use and periodically throughout application.

Dated: August 26, 2005.

Mary Lou Valdez,

Deputy Director for Policy, Office of Global Health Affairs.

Cristina V. Beato,

Acting Assistant Secretary for Health, Office of Public Health and Science.

[FR Doc. 05–17546 Filed 9–1–05; 8:45 am]

BILLING CODE 4150–38–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Federal Guidelines for Requesting, Stockpiling, Distributing Potassium Iodide (KI) From the Strategic National Stockpile (SNS); Correction

AGENCY: Office of Public Health Emergency Preparedness (OPHEP), HHS.

SUMMARY: This document corrects the notice that appeared in the **Federal Register** on August 29, 2005, (70 FR 51065), entitled ''Federal Guidelines for Requesting, Stockpiling, Distributing Potassium Iodide (KI) From the Strategic National Stockpile (SNS)'.

We inadvertently omitted the **DATES** section of the notice to inform the public of how long we will be receiving comments.

We are adding the **DATES** section to read as follows:

DATES: Submit comments on or before November 1, 2005.

Robert G. Claypool,

Deputy Assistant Secretary, Office of Public, Health Emergency Preparedness.

[FR Doc. 05–17556 Filed 9–1–05; 8:45 am]

BILLING CODE 4150–37–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement DP05–133]

Mind/Body Research and Chronic Disease Conditions; Notice of Intent To Fund a Sole Source Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2005 funds for a grant program to support research on the impact and effectiveness of relaxation and stress reduction on chronic health conditions. This announcement will build on research currently being conducted in this area by the Beth Israel Deaconess Medical Center (BIDMC), Mind/Body Medical Institute (MBMI). The results from this study will continue to generate new knowledge on the physiologic mechanisms of the relaxation response, mechanisms of acute changes, and identification of those most likely to benefit in a specific clinical model.

The Catalog of Federal Domestic Assistance number for this program is 93.283.

B. Eligible Applicant

Assistance will be provided only to the Beth Israel Deaconess Medical Center (BIDMC), Mind/Body Medical Institute (MBMI), Harvard Medical School, 824 Boylston Street, Chestnut Hill, MA 02467. No other applications will be solicited.

The BIDMC, MBMI is specifically referenced in the House of Representatives 2nd Session Conference Report 108–792. Page 1161 of the report states: ''Within amounts provided for Community Health Promotion: * * * $1,974,000 is for the Mind-Body Institute in Boston, Massachusetts to continue practice-based assessments, identification, and study of promising and heavily-used mind/body practices.''

The BIDMC, MBMI is a non-profit scientific and educational organization dedicated to the study of mind/body interactions, including the relaxation response. The institute uses its expertise to enhance the recognition and understanding of mind/body medicine's role in the practice of medicine to foster and expand the uses of mind/body interaction in health care and other appropriate settings, thereby advancing health and well-being throughout the world. Today over 9,000 patients throughout the United States participate in the institutes clinical programs.