

Federal Register in accordance with 21 CFR 25.40(c).

Dated: October 4, 1996.

Alan M. Rulis,

*Director, Office of Premarket Approval,
Center for Food Safety and Applied Nutrition.*

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BILLING CODE 4160-01-F

Health Resources and Services Administration

Announcement of Technical Assistance Workshops for Programs Administered by the Division of Disadvantaged Assistance, Bureau of Health Professions

SUMMARY: The Health Resources and Services Administration (HRSA) announces that technical assistance workshops will be held for the FY 1997 competitive grant cycles for the Health Careers Opportunity Program and the Minority Faculty Fellowship Program.

FOR FURTHER INFORMATION CONTACT: Dr. William S. Brooks, Division of Disadvantaged Assistance, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8A-09, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-4493.

SUPPLEMENTARY INFORMATION: The Division of Disadvantaged Assistance will be conducting two (2) technical assistance workshops for potential applicants for the FY 1997 competitive grant cycles for the Health Careers Opportunity Program and the Minority Faculty Fellowship Program.

A workshop will be conducted on November 13 and will be repeated on November 14, 1996 in the Parklawn Building Conference Center, 5600 Fishers Lane, Rockville, Maryland 20857. Each workshop is limited to 100 attendees; therefore, individuals requesting to attend one (1) of these workshops must register in advance with Ms. Carolyn Robinson at (301) 443-4493 or by FAX on (301) 443-5242.

The program will commence at 8:30 a.m. each day and will conclude by 5:00 p.m. Attendees must make their own hotel reservations. Expenses incurred by attendees will not be supported by the Federal government. Participation in the technical assistance meetings does not assure approval and funding of applications submitted for competitive review.

Dated: October 9, 1996.

Ciro V. Sumaya,

Administrator.

[FR Doc. 96-27042 Filed 10-21-96; 8:45 am]

BILLING CODE 4160-15-M

Request for Nominations to the Advisory Committee to the Administrator

AGENCY: Health Resources and Services Administration, DHHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) is requesting nominations to fill the initial membership (16 members) of the Advisory Committee to the Administrator, HRSA.

DATES: Nominations must be received by close-of-business on December 12, 1996.

ADDRESSES: Nominations and the curricula vitae of nominees should be sent to Douglas S. Lloyd, M.D., M.P.H., Executive Secretary to the Advisory Committee to the Administrator, HRSA, Room 14-15, 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: Alexander F. Ross, Sc.D., at the above address, or phone (301) 443-4034 for further information.

SUPPLEMENTARY INFORMATION: The HRSA is requesting nominations for the Administrator's Advisory Committee, which was chartered on August 2, 1996. This notice is issued under the Federal Advisory Committee Act [5 U.S.C. app. 2] and 21 CFR part 14, relating to advisory committees.

The Administrator's Advisory Committee is a 16-member panel to be appointed by the Secretary, to assist the Administrator in developing major plans and policies and to provide guidance on the methods and resources required to address the current environment in the health services delivery system, and on improving HRSA's ability to monitor the health status of its service populations. The Committee will advise the Secretary and the Administrator regarding the organization and functioning of the Agency to ensure efficient and effective organizational relationships and internal management. It is anticipated that the majority of members for this Committee will have extensive knowledge and experience with the programs administered by HRSA.

Eleven of the Committee's members shall be authorities who are knowledgeable in the fields of health care delivery and finance, the health workforce and training of the workforce, public health, and the special needs of disadvantaged population. Five members shall be representatives of the general public.

Nominations Procedure

Any interested person may nominate for consideration no more than three qualified individuals for membership on the committee. Nominators shall note that the nominee is willing to serve as a member of the committee for the full, four-year term. Terms of office of the members first appointed to a newly initiated committee shall expire, as designated by the Secretary at the time of appointment, 4 at the end of 1 year, 4 at the end of 2 years, 4 at the end of 3 years and 4 at the end of 4 years. Nominated individuals should have no conflict of interest that would preclude this service. For each nominee, nominations must include a complete curriculum vitae, a current business address, and a daytime telephone number. Nominators are invited to state why they believe a nominee to be particularly well-qualified. Please note that due to time constraints, incomplete nominations (such as those without a curriculum vitae) will not be considered. The Department has a special interest in assuring that appropriately qualified citizens who are women, members of a minority, or who have a physical disability are adequately represented on advisory bodies. It therefore encourages the nomination of such candidates to the HRSA Administrator's Advisory Council. The Department will also give close consideration to an equitable geographic representation.

Final selections from among qualified candidates for each vacancy will be determined by the expertise required to meet specific agency needs and in a manner to ensure balance of membership.

Dated: October 17, 1996.

Ciro V. Sumaya,

Administrator.

[FR Doc. 96-27067 Filed 10-21-96; 8:45 am]

BILLING CODE 4160-15-P

Program Announcement for Grant Programs Funded Under Title VIII of the Public Health Service Act for Fiscal Year 1997

The Health Resources and Services Administration (HRSA) announces that applications will be accepted for fiscal year (FY) 1997 Grants funded under the authority of title VIII of the Public Health Service Act, as amended by the Nurse Education and Practice Improvement Amendments of 1992, title II of Pub. L. 102-408, Health Professions Education Extension Amendments of 1992, dated October 13, 1992. These grant programs include:

1. Nursing Special Projects (section 820)
2. Advanced Nurse Education Programs (section 821)
3. Nurse Practitioner and Nurse-Midwifery Programs (section 822)
4. Nursing Education Opportunities for Individuals from Disadvantaged Backgrounds (section 827)
5. Professional Nurse Traineeships (section 830)
6. Grants for Nurse Anesthetists (section 831)
 - a. Nurse Anesthetist Traineeships
 - b. Nurse Anesthetist Education
 - c. Nurse Anesthesia Faculty Fellowships

This program announcement is subject to reauthorization of this legislative authority and to the appropriation of funds. The Administration's budget request for FY 1997 includes a single line item of \$70,000,000 for these programs. Applicants are advised that this program announcement is a contingency action being taken to assure that should authority and funds become available for this purpose, awards can be made in a timely fashion consistent with the needs of the program as well as to provide for even distribution of funds throughout the fiscal year. Listed below are the average award amounts for programs funded under Title VIII of the Public Health Service Act for FY 1996:

1. Nursing Special Projects	\$159,000
2. Advanced Nurse Education Programs	189,700
3. Nurse Practitioner and Nurse-Midwifery Programs	243,600
4. Nursing Education Opportunities for Individuals from Disadvantaged Backgrounds	170,400
5. Professional Nurse Traineeships	55,000
6. Nurse Anesthetists:	
a. Traineeships	14,400
b. Education Programs	153,900
c. Faculty Fellowships	23,300

National Health Objectives for the Year 2000

The Public Health Service urges applicants to submit work plans that address specific objectives of Healthy People 2000. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017-001-00474-0) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (Telephone 202-783-3238). Additional information on this publication is available on the Internet at <http://odphp.osophs.dhhs.gov/pubs/hp2000>.

Academic and Community Partnerships

As part of its cross-cutting program priorities, HRSA will be targeting its efforts to strengthening linkages between U.S. Public Health Service education programs and programs which provide primary care services to the underserved.

Smoke-Free Workplace

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Other Considerations

In addition, funding factors may be applied in determining funding of approved applications. Please see specific information regarding each of the grant programs listed later in this notice. Definitions of three types of funding factors are listed below.

A funding preference is defined as the funding of a specific category or group of approved applications ahead of other categories or groups of approved applications in a discretionary program, or favorable adjustment of the formula which determines the grant award in a formula grant program.

A funding priority is defined as the favorable adjustment of aggregate review scores of individual approved applications when applications meet specified criteria in a discretionary program, or favorable adjustment of the formula which determines the grant award in a formula grant program.

Special consideration is defined as the enhancement of priority scores by merit reviewers based on the extent to which applications address special areas of concern in a discretionary program, or favorable adjustment of the formula which determines the grant award in a formula grant program.

It is not required that applicants request consideration for a funding factor. Applications which do not request consideration for funding factors will be reviewed and given full consideration for funding.

Statutory General Preference

Grant programs which are subject to the statutory general preference include Advanced Nurse Education, Nurse Practitioner and Nurse-Midwifery Programs, Professional Nurse Traineeships and Grants for Nurse Anesthetists. As provided in section 860(e)(1) of the PHS Act, statutory preference will be given to any qualified applicant that—

(A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or

(B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings.

This statutory preference will only be applied to applications that rank above the 20th percentile of applications recommended for approval by the peer review group.

Specific information concerning the implementation of this statutory preference for each of these grant programs is included later in this notice. Additional general information regarding the implementation of this statutory preference has been published in the Federal Register at 59 FR 15741, dated 4/4/94.

Information Requirements Provision

Grant programs which are subject to the information requirements provision include Advanced Nurse Education, Nurse Practitioner and Nurse-Midwifery Programs, Professional Nurse Traineeships and Grants for Nurse Anesthetists. Under section 860(e)(2) of the Act, the Secretary may make an award under certain title VIII grant programs only if the applicant for the award submits to the Secretary the following required information:

1. A description of rotations, preceptorships or clinical training programs for students/trainees, that have the principal focus of providing health care to medically underserved communities.

2. The number of faculty on admissions committees who have a clinical practice in community-based ambulatory settings in medically underserved communities.

3. With respect to individuals who are from disadvantaged backgrounds or from medically underserved communities, the number of such individuals who are recruited for academic programs of the applicant, the number of such individuals who are admitted to such programs, and the number of such individuals who graduate from such programs.

4. If applicable, the number of recent graduates who have chosen careers in primary health care.

5. The number of recent graduates whose practices are serving medically underserved communities.

6. A description of whether and to what extent the applicant is able to operate without Federal assistance under this title.

Additional details concerning the implementation of this information requirement have been published in the Federal Register at 58 FR 43642, dated August 17, 1993, and will be provided in the application materials.

Definitions

The following definitions shall apply for Grant Programs funded under Title VIII of the Public Health Service Act for Fiscal Year 1997.

Accredited means a program accredited by a recognized body or bodies, or by a State agency, approved for such purpose by the Secretary of Education and when applied to a hospital, school, college or university (or unit thereof) means a hospital, school, college or university (or unit thereof) which is accredited by a recognized body or bodies, or by a State agency, approved for such purpose by the Secretary of Education.

Advanced Nurse Education Program means a program of study in a collegiate school of nursing which leads to a master's and/or doctoral degree and which prepares nurses to serve as nurse educators, or public health nurses, or in other clinical nurse specialties determined by the Secretary to require advanced education.

Assistive Nursing Personnel refers to unlicensed individuals who assist nursing staff in the provision of basic care to clients and who work under the supervision of licensed nursing personnel. Included in this category are nurse aides, nursing assistants, orderlies, attendants, personal care aides, and home health aides.

Associate Degree School of Nursing means a department, division or other administrative unit in a junior college, community college, college, or university which provides primarily or exclusively a two-year program of education in professional nursing and allied subjects leading to an associate degree, but only if such program, or such unit, college or university is accredited as provided in section 853(4) of the Act.

Clinical nursing specialty means a specific area of advanced clinical nursing theory and practice addressed through graduate education in nursing. Clinical nursing specialties prepare the nurse to provide direct patient/client nursing care to individuals or to population groups.

Collegiate School of Nursing means a department, division, or other administrative unit in a college or university which provides primarily or exclusively a program of education in professional nursing and allied subjects leading to the degree of bachelor of arts,

bachelor of science, bachelor of nursing, or to an equivalent degree, or to a graduate degree in nursing, and including advanced training related to such program of education provided by such school, but only if such program, or such unit, college or university is accredited.

Cultural Competence means a set of academic and interpersonal skills that allow an individual to effectively utilize research and health status data to provide clinically competent care to racial/ethnic minority populations and to incorporate cultural knowledge into health education and preventive initiatives, as well as into operational policies and administrative activities.

Cultural Diversity means differences in race, ethnicity, language, nationality, or religion among various groups within a community, an organization, or a nation.

Diploma School of Nursing means a school affiliated with a hospital or university, or an independent school, which provides primarily or exclusively a program of education in professional nursing and allied subjects leading to a diploma or to equivalent indicia that such program has been satisfactorily completed, but only if such program, or such affiliated school or such hospital or university or such independent school is accredited as provided in section 853(5) of the Act.

Fellow means a Certified Registered Nurse Anesthetist (CRNA) faculty member enrolled in a formal program of study which leads to a master's or doctoral degree and supported with funds provided under section 831(b).

Fellowship recipient means a student appointed by the grantee to receive a long term care fellowship for certain paraprofessionals as authorized by section 820(d) of the Act.

Full-time Student means a student who is enrolled on a full-time basis as defined by the institution.

Graduate means an individual who has successfully completed all institutional requirements necessary to be granted a degree/certificate.

Graduate Education, Program or Training means a formal program administered by an institution of higher learning, leading to a master's or higher degree.

Home Health Agency as defined by the Social Security Act, section 1861(o), means a public agency or private organization, or a subdivision of such an agency or organization, which:

- (1) is primarily engaged in providing skilled nursing services and other therapeutic services;
- (2) has policies, established by a group of professional personnel

(associated with the agency or organization), including one or more physicians and one or more registered professional nurses, to govern the services by a physician or registered professional nurse;

(3) maintains clinical records on all patients;

(4) in the case of an agency or organization in any State in which State or applicable local law provides for the licensing of agencies or organizations of this nature, (A) is licensed pursuant to State law or (B) is approved by the agency of such State or locality responsible for licensing agencies or organizations of this nature as meeting the standards established for such licensing;

(5) has in effect an overall plan and budget that meets the requirements of subsection z of this section;

(6) meets the conditions of participation specified in section 1395bbb(a) of the Social Security Act and such other conditions of participation as the Secretary may find necessary in the interest of the health and safety of individuals who are furnished services by such agency or organization; and

(7) meets such additional requirements (including conditions relating to bonding or establishing of escrow accounts as the Secretary finds necessary to the financial security of the program) as the Secretary finds necessary for the effective and efficient operation of the program, except that for purposes of Part A of this subchapter such term shall not include any agency or organization which is primarily for the care and treatment of mental diseases.

Individual from a Disadvantaged Background as authorized under section 827 of the Act refers to an individual who: (1) Comes from an environment that has inhibited the individual from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a school of nursing; or (2) comes from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index, and multiplied by a factor to be determined by the Secretary for adaptation to this program (42 CFR 57.2904).

Licensed Practical/Vocational Nurse (LPN/LVN) means an individual who is currently licensed as a licensed practical nurse or a licensed vocational nurse in at least one jurisdiction of the United States and employed in a nursing facility or home health agency.

Medically Underserved Community as defined in section 799(6) of the law, means an urban or rural area or population that:

(1) is eligible for designations under section 332 as a health professional shortage area;

(2) is eligible to be served by a migrant health center (MHC) under section 329, a community health center (CHC) under section 330, a grantee under section 340 (relating to homeless individuals), or a grantee under section 340A (relating to residents of public housing); or

(3) has a shortage of personal health services, as determined under criteria issued by the Secretary under section 1861(aa)(2) of the Social Security Act (relating to rural health clinics).

In keeping with the Congressional intent that eligible entities should not be limited to formally designated Health Professional Shortage Areas (HPSA's) and populations served by CHCs, MHCs, or homeless health centers, the list of types of practice sites that can be claimed under this provision has been expanded to include the following:

Community Health Centers (CHC) (section 330)

Migrant Health Centers (MHC) (section 329)

Health Care for the Homeless Grantees (section 340)

Public Housing Primary Care Grantees (section 340A)

Rural Health Clinics, federally designated (section 1861(aa)(2) of the Social Security Act)

National Health Service Corps (NHSC) Sites, freestanding (section 333)

Indian Health Services (IHS) Sites (Pub. L. 93-638 for tribal governed sites and Pub. L. 94-437 for IHS operated sites)

Federally Qualified Health Centers (section 1905 (a) and (1) of the Social Security Act)

Primary Medical Care Health

Professional Shortage Areas (HPSA'S) (facilities and geographic) (designated under section 332) for primary care physicians, other health personnel except dentists and nurses

Dental HPSA'S (facilities and geographic) (designated under section 332) for dentists only

Nurse Shortage Areas (old section 836, currently section 846) for nurses only

State or Local Health Departments (regardless of sponsor—for example, local health departments who are funded by the state would qualify)

Ambulatory practice sites designated by State Governors as serving medically underserved communities

Information on HPSAs, CHCs, MHCs, and/or homeless health centers is

available on HRSA's Web Site under BPHC Databases on the internet at <http://www.bphc.hrsa.dhhs.gov>.

In addition, information on rural health clinics and IHS sites can also be found on HRSA's Web Site at <http://www.hrsa.dhhs.gov/bhpr/grants.html>.

National of the United States means a citizen of the United States or a person who, though not a citizen of the United States, owes permanent allegiance to the United States (as defined in 8 U.S.C. 110(a)(22), the Immigration and Nationality Act).

Nurse Anesthetist means a registered nurse who has successfully completed a nurse anesthetist education program.

Nurse Anesthetist Trainee means a student enrolled in a graduate program and who is receiving traineeship support from a nurse anesthetist traineeship grant.

Nurse-Midwife is an individual educated in the two disciplines of nursing and midwifery who has successfully completed a nurse-midwifery education program approved by the American College of Nurse-Midwives. The nurse-midwife delivers primary health care, including nurse-midwifery services, using abilities to:

—Assess the health status of women and children, with a family-centered approach to care

—Institute and provide continuity of health care to clients (patients), with a focus on health education and promotion and management of selected acute and chronic health problems.

—Provide instruction and counseling to individuals, families, and groups in health promotion and maintenance, including involving such persons in planning for their health care;

—Work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families.

—Independent management of primary health care for women, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client.

Nurse Practitioner means a registered nurse who has successfully completed a formal program of study designed to prepare registered nurses to perform in an expanded role in the delivery of primary health care including the ability to:

(1) Assess the health status of individuals and families through health

and medical history taking, physical examination, and defining of health and developmental problems;

(2) Institute and provide continuity of health care to clients (patients), work with the client to ensure understanding of and compliance with the therapeutic regimen within the established protocols, and recognize when to refer the client to a physician or other health care provider;

(3) Provide instruction and counseling to individuals, families, and groups in the areas of health promotion and maintenance, including involving such persons in planning for their health care; and

(4) Work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families

Nursing Facility as defined by the Social Security Act, section 1919(a), means an institution (or a distinct part of an institution which—

(1) is primarily engaged in providing to residents—

(A) skilled nursing care and related services for residents who require medical or nursing care;

(B) rehabilitation services for the rehabilitation of injured, disabled, or sick persons, or

(C) on a regular basis, health-related care and services to individuals who because of their mental or physical condition require care and services (above the level of room and board) which can be made available to them only through institutional facilities, and is not primarily for the care and treatment of mental diseases;

(2) has in effect a transfer agreement (meeting the requirements of section 1395x(1) of this title) with one or more hospitals having agreements in effect under section 1395cc of this title; and

(3) meets the requirements for a nursing facility described in subsections (b), (c), and (d) of this section.

Such term also includes any facility which is located in a state or an Indian reservation and is certified by the Secretary as meeting the requirements of paragraph (1) and subsections (b), (c), and (d) of this section.

Paraprofessional refers to a person who is specially trained to assist professional nursing staff in the provision of nursing care and is employed, permanently and full-time, by a nursing facility or home health agency as either a licensed practical/vocational nurse (LPN/LVN) or other assistant nursing personnel.

Primary Health Care means care which may be initiated by the client or provider in a variety of settings and

which consists of a broad range of personal health care services including:

- (1) Promotion and maintenance of health;
- (2) Prevention of illness and disability;
- (3) Basic care during acute and chronic phases of illness;
- (4) Guidance and counseling of individuals and families;
- (5) Referral to other health care providers and community resources when appropriate; and,
- (6) Nurse-midwifery services when appropriate.

In providing such services:

- (1) physical, emotional, social, and economic status, as well as the cultural and environmental backgrounds of individuals, families and communities (where applicable) are considered;
- (2) the client is provided access to the health care system;
- (3) a single provider or team of providers, along with the client, is responsible for the continuing coordination and management of all aspects of basic health services needed for individual and family care.

Professional Nurse means a registered nurse who has received initial nursing preparation from a diploma, associate degree, or collegiate school of nursing as defined in section 853 of the Act and who is currently licensed in a State to practice nursing.

Professional Nurse Trainee means a student enrolled in a graduate program and who is receiving traineeship support from a professional nurse traineeship grant.

Program means a combination of identified courses and other educational or training experiences at a specified academic level, the sum of which provides the required competence to practice.

Program for the Education of Nurse Practitioners or Nurse-Midwives means a full-time educational program for registered nurses (irrespective of the type of school of nursing in which the nurses received their training) which meets the regulations and guidelines prescribed by the Secretary and which has as its objective the education of nurses who will, upon completion of their studies in such program, be qualified to effectively provide primary health care, including primary health care in homes and in ambulatory care facilities, long-term care facilities, where appropriate, and other health care institutions.

Project refers to all proposed activities, including educational programs, specified or described in a grant application as approved for funding.

Rapid Transition Program as authorized under section 820(d) of the Act, means an accredited, innovative, professional nursing program that provides for expeditious progression from the status of an employed nursing paraprofessional to the status of a professional nurse and exhibits the following characteristics:

- (1) work study component including full-time study and part-time work;
- (2) financial considerations by the employer for costs of the educational program and for costs of living; and,
- (3) selected support services for the Rapid Transition Program students to assure successful program completion.

Reappointment is any subsequent appointment in the same course of study of the same recipient of a long term care fellowship for certain paraprofessionals authorized by section 820(d) of the Act.

Registered Nurse means a person who has graduated from a school of nursing and is licensed to practice as a registered or professional nurse in a State.

Rural Area means an area other than a Metropolitan Statistical Area (MSA) as designated by the Office of Management and Budget based on current census data. Census tracts in certain metropolitan areas may also be eligible if they are located at a significant distance from the major city in the Standard Metropolitan Area (SMA).

Rural Clinical Experience means a structured primary care clinical experience in any appropriate outpatient, home health, public health agency setting or hospital located in a rural area.

Rural Health Facility means a hospital of less than 100 beds or other patient care facility located outside Office of Management and Budget (OMB) designated metropolitan areas. Census tracts in certain metropolitan areas may also be eligible if they are located at a significant distance from the major city in the SMA.

School of Medicine means a school which provides education leading to a degree of doctor of medicine and which is accredited by a recognized body or bodies approved for such purpose by the Secretary of Education.

School of Nursing means a collegiate, associate degree, or diploma school of nursing as defined in Section 853(2) of the Act.

School of Public Health means a school which provides education leading to a graduate degree in public health and which is accredited by a recognized body or bodies approved for such purpose by the Secretary of Education.

Structured Clinical Experience in Primary Care At the undergraduate level, this refers to the planned basic clinical nursing practice component of primary health care as provided by students of professional nursing and supervised by licensed registered nurses, in a variety of settings including urban or rural outpatient facilities, home health agencies, public health agencies or rural hospitals. At the graduate level, this refers to the planned advanced clinical nursing practice component of primary health care as provided by graduate students in nursing in their supervised clinical specialization curriculum beyond the basic requirements in a variety of settings as described above. For section 820(b), the setting for this experience is restricted to the proposed nurse practice arrangement.

The purpose, eligibility, review criteria, and funding factors for each of the six grant programs funded under title VIII are listed below.

1. Nursing Special Projects

Purpose: Section 820(a) of the PHS Act authorizes the Secretary to make grants for the purpose of assisting schools in increasing the number of students enrolled in programs of professional nursing.

Section 820(b) of the PHS Act authorizes the Secretary to make grants for the establishment or expansion of nursing practice arrangements in noninstitutional settings to demonstrate methods to improve access to primary health care in medically underserved communities.

Section 820(c) of the PHS Act authorizes the Secretary to make grants for the purpose of providing continuing education for nurses serving in medically underserved communities.

Section 820(d) of the PHS Act authorizes the Secretary to make grants for the purpose of providing fellowships to individuals who are employed by nursing facilities or home health agencies as nursing paraprofessionals.

The request for initial support may not exceed three years for applications submitted under sections 820(a), 820(b), 820(c) and 820(d).

This program is governed by regulations at 42 CFR part 57, subpart T to the extent to which these regulations are not inconsistent with the amended statute. The purposes, eligibility and statutory funding preferences have been changed by the Nurse Practice Improvement Amendments of 1992. Reference to the purposes, eligibility and statutory funding preferences in the regulations are superseded by the law. The current purposes, eligibility and

statutory funding preference are identified in this notice.

Eligibility: Eligible applicants for projects under section 820(a) are public and nonprofit private schools of nursing with programs of education in professional nursing. To receive support under 820(a) the school must agree to make available non-Federal contributions in an amount that is at least 10 percent of the project costs for the first fiscal year, at least 25 percent of the project costs for the second fiscal year, at least 50 percent of the project costs for the third fiscal year, and at least 75 percent of the project costs for the fourth or fifth fiscal years.

Eligible applicants for projects under section 820(b) are public and nonprofit private schools of nursing. To receive support under 820(b) the program proposed must be operated and staffed by the faculty and students of the school and must be designed to provide at least 25 percent of the students of the school with a structured clinical experience in primary health care.

Eligible applicants for projects under section 820(c) are public and nonprofit private entities.

Eligible applicants for projects under section 820(d) are public and nonprofit private entities that operate accredited programs of education in professional nursing, or State-board approved programs of practical or vocational nursing.

To receive support under 820(d), the applicant must agree that, in providing fellowships, preference will be given to eligible individuals who (A) are economically disadvantaged individuals, particularly such individuals who are members of a minority group that is underrepresented among registered nurses; or (B) are employed by a nursing facility that will assist in paying the costs or expenses. The applicant must also agree that the fellowships provided will pay all or part of the costs of (A) the tuition, books, and fees of the program of nursing with respect to which the fellowship is provided; and (B) reasonable living expenses of the individual during the period for which the fellowship is provided.

Review Criteria: The review of applications will take into consideration the following criteria:

1. The national or special local need which the particular project proposes to serve;
2. The potential effectiveness of the proposed project in carrying out such purposes;
3. The administrative and managerial capability of the applicant to carry out the proposed project;

4. The adequacy of the facilities and resources available to the applicant to carry out the proposed project;

5. The qualifications of the project director and proposed staff;

6. The reasonableness of the proposed budget in relation to the proposed project; and

7. The potential of the project to continue on a self-sustaining basis after the period of grant support.

Funding Factors

Statutory Funding Preferences: In making awards of grants under section 820(a), preference will be given to any qualified school that provides students of the school with clinical training in the provision of primary health care in publicly-funded (A) urban or rural outpatient facilities, home health agencies, or public health agencies; or (B) rural hospitals.

In making awards of grants under section 820(d), preference will be given to any qualified applicant operating an accredited program of education in professional nursing that provides for the rapid transition to status as a professional nurse from status as a nursing paraprofessional.

Established Funding Priorities: The following funding priorities were established in FY 1993 after public comment (58 FR 35020, dated 6/30/93) and the Administration is extending these funding priorities in FY 1997. A priority will be given to schools that offer generic baccalaureate programs. A priority will also be given to schools that offer both generic baccalaureate nursing programs and RN completion programs. These priorities apply to applications for grants under section 820(a).

A funding priority will be given to programs which demonstrate either substantial progress over the last 3 years or a significant experience of 10 or more years in enrolling and graduating trainees from those minority or low-income populations identified as at-risk of poor health outcomes. This priority applies to applications for grants under sections 820(a), 820(b), and 820(d).

Finally, a funding priority will be given to applications for continuing education programs for nurses from medically underserved communities to increase their knowledge and skills in care of persons who are HIV positive or who have AIDS. This priority applies to applications for grants under section 820(c).

2. Advanced Nurse Education Programs

Purpose: Section 821 of the Public Health Service Act, as implemented by 42 CFR part 57, subpart Z, authorizes

assistance to meet the costs of projects to: (1) Plan, develop and operate new programs, or (2) significantly expand existing programs leading to advanced degrees that prepare nurses to serve as nurse educators or public health nurses, or in other clinical nurse specialties determined by the Secretary to require advanced education. The period of Federal support should not exceed 3 years.

Eligibility: To be eligible to receive a grant, a school must be a public or nonprofit private collegiate school of nursing and be located in a state.

Review Criteria: The review of applications will take into consideration the following criteria:

(1) The need for the proposed project including, with respect to projects to provide education in professional nursing specialties determined by the Secretary to require advanced education:

(a) The current or anticipated national and/or regional need for professional nurses educated in the specialty; and

(b) The relative number of programs offering advanced education in the specialty;

(2) The need for nurses in the specialty in which education is to be provided in the State in which the education program is located, as compared with the need for these nurses in other states;

(3) The potential effectiveness of the proposed project in carrying out the educational purposes of section 821 of the Act and 42 CFR part 57, subpart Z;

(4) The capability of the applicant to carry out the proposed project;

(5) The soundness of the fiscal plan for assuring effective utilization of grant funds;

(6) The potential of the project to continue on a self-sustaining basis after the period of grant support; and

(7) The degree to which the applicant proposes to attract, retain and graduate minority and financially needy students.

Funding Factors

Statutory General Preference: As provided in section 860(e)(1) of the PHS Act, preference will be given to any qualified applicant that—

(A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or

(B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings.

This preference will only be applied to applications that rank above the 20th

percentile of proposals recommended for approval by the peer review group.

Minimum Percentages for "High Rate" and "Significant Increase in the Rate." "High rate" is defined as a minimum of 30 percent of graduates in academic year 1993-94, 1994-95 or academic year 1995-96, who spend at least 50 percent of their worktime in clinical practice in the specified settings. Public health nurse graduates can be counted if they identify a primary work affiliation at one of the qualified work sites. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

Significant increase in the rate means that, between academic years 1994-95 and 1995-96 the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and that not less than 15 percent of graduates from the most recent year are working in these settings.

Established Funding Priorities: The following funding priority was established in FY 1989 after public comment (54 FR 11570, dated March 21, 1989) and the Secretary is extending this priority in FY 1997.

A funding priority will be given to applications which develop, expand or implement courses concerning ambulatory, home health care and/or inpatient case management services for individuals with HIV disease.

The following funding priority was established in FY 1993 after public comment (58 FR 32710, dated June 11, 1993) and the Administration is extending this funding priority in FY 1997. In determining the order of funding of approved applications a funding priority will be given to applicant institutions which demonstrate either substantial progress over the last three years or a significant experience of ten or more years in enrolling and graduating trainees from those minority or low-income populations identified as at risk of poor health outcomes.

3. Nurse Practitioner and Nurse-Midwifery Programs

Purpose: Section 822 of the Public Health Service Act, as amended, authorizes grants to meet the costs of projects to:

- (1) plan, develop and operate new programs; or
- (2) maintain or significantly expand existing programs for the training of nurse practitioners and/or nurse-midwives who will, upon completion of their studies, be qualified to effectively provide primary health care, including

primary health care in homes and in ambulatory care facilities, long-term care facilities and other health care institutions.

The period of Federal support should not exceed 3 years.

Eligibility: Eligible applicants are public and nonprofit private schools of nursing or other public and nonprofit private entities. Eligible applicants must be located in a State.

Review Criteria: The review of applications will take into consideration the following criteria:

1. The degree to which the project plan adequately provides for meeting the requirements set forth in Section 57.2405 of the program regulations and the Appendix;
2. The potential effectiveness of the proposed project in carrying out the education purposes of section 822 of the Act and 42 CFR part 57, subpart Y;
3. The capability of the applicant to carry out the proposed project;
4. The soundness of the fiscal plan for assuring effective utilization of grant funds; and
5. The potential of the project to continue on a self-sustaining basis after the project period.

Funding Factors

Statutory Program Specific Preference: Preference will be given to any qualified applicant that agrees to expend the award to plan, develop, and operate new programs or to significantly expand existing programs.

Statutory General Preference: As provided in section 860(e)(1) of the PHS Act, preference will be given to any qualified applicant that—

- (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or
- (B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings.

This preference will only be applied to applications that rank above the 20th percentile of proposals recommended for approval by the peer review group.

Minimum Percentages for "High Rate" and "Significant Increase in the Rate." "High rate" is defined as a minimum of 30 percent of graduates in academic years 1993-94, 1994-95 or academic year 1995-96, who spend at least 50 percent of their worktime in clinical practice in the specified settings. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

Significant increase in the rate means that, between academic years 1994-95 and 1995-96, the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and that not less than 15 percent of graduates from the most recent year are working in these settings.

Statutory Special Considerations: Special consideration will be given to qualified applicants that agree to expend the award to train individuals as nurse practitioners and nurse-midwives who will practice in health professional shortage areas designated under section 332.

Established Funding Priority: The following funding priority was established in FY 1993 after public comment (58 FR 5009, dated 1/19/93) and the Administration is extending this funding priority in FY 1997.

Funding priority will be given to applicant institutions which demonstrate either substantial progress over the last three years or a significant experience of ten or more years in enrolling and graduating trainees from those minority or low-income populations identified as at risk of poor health outcomes.

4. Nursing Education Opportunities for Individuals From Disadvantaged Backgrounds

Purpose: Section 827 of the Public Health Service Act authorizes grants to increase opportunities for individuals from disadvantaged backgrounds to pursue a nursing education. Students who may have an associate degree in nursing would be eligible to receive funding under this section if they are financially, educationally or socially disadvantaged.

For purposes of Grants for Nursing Education Opportunities for Individuals from Disadvantaged Backgrounds, "an individual from a disadvantaged background" is one who: (1) Comes from an environment that has inhibited the individual from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a school of nursing; or (2) comes from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and multiplied by a factor to be determined by the Secretary for adaptation to this program (42 CFR 57.2904).

The following income figures determine what constitutes a low income family for purposes of Grants for Nursing Education Opportunities for

Individuals from Disadvantaged Backgrounds for FY 1997.

Size of parents' family ¹	Income level ²
1	\$10,200
2	13,200
3	15,700
4	20,200
5	23,800
6 or more	26,700

¹ Includes only dependents listed on Federal income tax forms.

² Adjusted gross income for calendar year 1995, rounded to \$100.

Grants may be awarded to eligible applicants to meet the costs of projects to increase nursing education opportunities for individuals from disadvantaged backgrounds:

1. By identifying, recruiting and selecting such individuals;
2. By facilitating the entry of such individuals into schools of nursing;
3. By providing counseling or other services designed to assist such individuals to complete successfully their nursing education;
4. By providing, for a period prior to the entry of such individuals into the regular course of education at a school of nursing, preliminary education designed to assist them to complete successfully such regular course of education;
5. By paying such stipends as the Secretary may determine for such individuals for any period of nursing education;
6. By publicizing, especially to licensed vocational or practical nurses, existing sources of financial aid available to persons enrolled in schools of nursing or who are undertaking training necessary to qualify them to enroll in such schools; and
7. By providing training, information or advice to the faculty of such schools with respect to encouraging such individuals to complete the programs of nursing education in which the individuals are enrolled. The initial period of federal support should not exceed 3 years.

Eligibility: Public and nonprofit private schools of nursing and other public or nonprofit private entities are eligible for grant support.

Review Criteria: The review of applications will take into consideration the following criteria:

1. The national or special local need which the particular project proposes to serve;
2. The potential effectiveness of the proposed project in carrying out such purposes;

3. The administrative and managerial capability of the applicant to carry out the proposed project;

4. The adequacy of the facilities and resources available to the applicant to carry out the proposed project;

5. The qualifications of the project director and proposed staff;

6. The reasonableness of the proposed budget in relation to the proposed project; and

7. The potential of the project to continue on a self-sustaining basis after the period of grant support.

5. Professional Nurse Traineeships

Purpose: Section 830 of the Public Health Service Act authorizes the Secretary to award grants to meet the cost of traineeships for individuals in advanced-degree programs in order to educate the individuals to serve in and prepare for practice as nurse practitioners, nurse midwives, nurse educators, public health nurses, or in other clinical nursing specialties determined by the Secretary to require advanced education. Federal support must be requested annually.

Eligibility: Eligible applicants are public or private nonprofit entities which provide (1) advanced-degree programs to educate individuals as nurse practitioners, nurse-midwives, nurse educators, public health nurses or as other clinical nursing specialists; or (2) nurse-midwifery certificate programs that conform to guidelines established by the Secretary under section 822(b).

Applicants must agree that:

- (a) in providing traineeships, the applicant will give preference to individuals who are residents of health professional shortage areas designated under section 332 of the Act;
- (b) the applicant will not provide a traineeship to an individual enrolled in a master's of nursing program unless the individual has completed basic nursing preparation, as determined by the applicant; and

(c) traineeships provided with the grant will pay all or part of the costs of the tuition, books, and fees of the program of nursing with respect to which the traineeship is provided and reasonable living expenses of the individual during the period for which the traineeship is provided.

Funding Factors

Statutory Preference: In making awards of grants under this section, preference will be given to any qualified applicant that—

- (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or

(B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings.

Minimum Percentages for "High Rate" and "Significant Increase in the Rate:" "High rate" is defined as a minimum of 20 percent of graduates in academic years 1993–94, 1994–95 or 1995–96 who spend at least 50 percent of their worktime in clinical practice in the specified settings. Public health nurse graduates can be counted if they identify a primary work affiliation at one of the qualified work sites. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

Significant increase in the rate means that, between academic years 1994–95 and 1995–96, the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and that not less than 15 percent of graduates from the most recent year are working in these settings.

Statutory Special Consideration: Special consideration will be given to applications for traineeship programs for nurse practitioner and nurse midwife programs which conform to guidelines established by the Secretary under section 822(b)(2) of the PHS Act. A copy of these guidelines will be included with the application materials for this program.

Established Funding Priority: The following funding priority was established in FY 1993 after public comment (58 FR 32712, dated 6/11/93) and the Administration is extending this funding priority in FY 1997. A funding priority will be given to programs which demonstrate either substantial progress over the last three years or a significant experience of ten or more years in enrolling and graduating students from those minority populations identified as at-risk of poor health outcomes.

6. Grants for Nurse Anesthetists

Purpose: Section 831 of the Public Health Service Act authorizes the Secretary to award grants to (1) cover the costs of traineeships for licensed registered nurses to become nurse anesthetists (traineeships); (2) cover the costs of projects to develop and operate, maintain or expand programs for the education of nurse anesthetists (education programs); and (3) provide financial assistance to certified registered nurse anesthetists (CRNA) who are faculty members in accredited programs to enable such nurse anesthetists to obtain advanced education relevant to their teaching

functions (faculty fellowships). To receive support for traineeships, programs must meet the requirements of regulations as set forth in 42 CFR 57, subpart F. For education program grants, the period of Federal support may not exceed 3 years. For traineeship or faculty fellowship grants, applicants must compete for Federal support annually.

Eligibility: Eligible applicants for Grants for Nurse Anesthetists are public or private nonprofit institutions which provide registered nurses with full-time nurse anesthetist training and are accredited by an entity or entities designated by the Secretary of Education.

Review Criteria: Applications for traineeship grants will be reviewed and award amounts will be calculated by staff in the Division of Nursing and in the Grants Management Branch of the Bureau of Health Professions based on the formula set forth in 42 CFR 57, subpart F.

The review of applications for education program grants will take into consideration the following criteria:

1. The national or special local need which the particular project proposes to serve with special emphasis on meeting shortages in underserved areas;
2. The potential effectiveness and impact of the proposed project including its potential contribution to nursing;
3. The administrative and managerial capability of the applicant to carry out the proposed project;
4. The appropriateness of the plan, including the timetable for carrying out the activities of the proposed project and achieving and measuring the project's stated objectives;
5. The capability of the applicant to carry out the proposed project;
6. The reasonableness of the budget for the proposed project, including the justification of the grant funds requested; and
7. The potential of the nurse anesthetist program to continue on a self-sustaining basis after the period of grant support.

Applications for faculty fellowships will be reviewed and award amounts will be calculated by staff in the Division of Nursing and in the Grants Management Branch of the Bureau of Health Professions. The review of applications for faculty fellowships will take into consideration the following criteria which were established in 1990 (55 FR 36325, 9/5/90):

1. The eligibility of applicants;
2. The eligibility of faculty; and
3. The extent to which an applicant meets the funding preferences.

The following criteria for fellows were established in FY 1993 after public comment (58 FR 40658, 7/29/93), and will be extended in fiscal year 1997.

To be eligible for fellowship support an individual must be:

1. A United States citizen, noncitizen national, or foreign national who possesses a visa permitting permanent residence in the United States;
2. A certified registered nurse anesthetist with current licensure to practice, and with teaching responsibilities in an accredited nurse anesthetist education program;
3. Enrolled or accepted for enrollment in a formal program of study which leads to a master's or doctoral degree;
4. Proposed for a fellowship in the applicant institutions' grant proposal; and
5. A faculty member employed by, or affiliated with, the applicant institution during the period of approved fellowship support.

The following policy on payment of stipends for faculty fellowships was established in FY 1990 after public comment (55 FR 36325, dated 9/5/90) and is being extended in FY 1997. A faculty member may be paid a stipend for living costs if attending an educational institution as a full-time student; no stipend would be available for a faculty member who is enrolled in part-time study or who is employed on a full-time basis. This policy is designed to target stipend assistance to the individuals who are most in need of such aid.

Funding Factors

Statutory Funding Preference: Section 860(e) of the PHS Act, as amended by the Nurse Education and Practice Improvement Amendments of 1992, title II of the Health Professions Education Extension Amendments of 1992, Public Law 102-408, enacted on October 13, 1992, provides for the following statutory preference for this program of Grants for Nurse Anesthetists, as well as for certain other programs under titles VII and VIII of the PHS Act.

Statutory preference will be given to qualified applicants that:

- (A) have a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or
- (B) have achieved, during the 2-year period preceding the fiscal year for which such an award is sought, a significant increase in the rate of placing graduates in such settings.

Minimum Percentages for "High Rate" and "Significant Increase in the Rate" for Traineeship and Education Program Grants: "High rate" is defined

as a minimum of 20 percent of graduates in academic years 1993-94, 1994-95 or 1995-96 who spend at least 50 percent of their worktime in clinical practice in the specified setting. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

Significant increase in the rate means that, between academic years 1994-95 and 1995-96, the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and that not less than 15 percent of graduates from the most recent year are working in these settings.

Established Funding Priority for Traineeship and Education Program Grants: The following funding priority was established in FY 1993 after public comment (58 FR 42079, dated 8/6/93 and 58 FR 40657, dated 7/29/93) and the Administration is extending this funding priority in FY 1997. A funding priority will be given to programs which demonstrate either substantial progress over the last 3 years or a significant experience of 10 or more years in enrolling and graduating students from those minority populations identified as at-risk of poor health outcomes.

Established Funding Preference for Faculty Fellowship Grants: The following funding preference was established in FY 1990 after public comment (55 FR 36325, dated 9/5/90). A revised version is being extended in FY 1997. A funding preference will be given first to faculty who will be completing degree requirements before or by the end of the funded budget year, second to faculty who are full-time students, and third to faculty who are part-time students.

Application Availability

Application materials are available on the World Wide Web at address: "<http://www.hrsa.dhhs.gov/bhpr/grants.html>". In Fiscal Year 1997, the Bureau of Health Professions (BHP) will use Adobe Acrobat to publish the grants documents on the Web page. In order to download, view and print these grants documents, you will need a copy of Adobe Acrobat Reader. This can be obtained without charge from the Internet by going to the Adobe Web page ("<http://www.adobe.com>") and downloading the version of the Adobe Acrobat Reader which is appropriate for your operating system, i.e., Windows, Unix, Macintosh, etc. A set of more detailed instructions on how to download and use the Adobe Acrobat Reader can be found on the BHP Grants Web page under "Notes on this WWW Page."

Questions regarding grants policy and business management issues should be directed to Ms. Wilma Johnson, Acting Chief, Centers and Formula Grants Section (wjohnson@hrsa.dhhs.gov), Grants Management Branch, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8C-26, 5600 Fishers Lane, Rockville, Maryland 20857. Information for requesting hard copy of application materials:

Telephone Number: 888-300-HRSA

FAX Number: 301-309-0579

E-mail Address:

HRSA.GAC@ix.netcom.com

Completed applications should be returned to: Grants Management Officer (CFDA #), HRSA Grants Application Center, 40 West Gude Drive, Suite 100,

Rockville, Maryland 20850. If additional programmatic information is needed, please contact the Division of Nursing, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 9-36, 5600 Fishers Lane, Rockville, Maryland 20857. Please see Table 1 for specific names and phone numbers for each grant program.

Application Forms

The standard application form PHS 6025-1, HRSA Competing Training Grant Application, General Instructions and supplement for these grant programs have been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB Clearance Number is 0915-0060.

Deadline Dates

The deadline dates for receipt of applications for each of these grant programs are shown in Table 1. Applications will be considered to be "on time" if they are either:

(1) *Received on or before* the established deadline date, or

(2) *Sent on or before* the established deadline date and received in time for orderly processing. (Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

Late applications not accepted for processing will be returned to the applicant.

TABLE 1

PHS title VIII section No./program title/CFDA No.	Grants management contact/ phone No. (FAX: 301/443-6343)	Programmatic contact/phone No. (FAX: 301/443-8586)	Deadline date for competing applications
820, Nursing Special Projects, 93.359	Ms. Wilma Johnson (301) 443-6880.	Ms. Janet Clear (301) 443-6193.	02/03/97
821, Advanced Nurse Education, 93.299	Ms. Brenda Selser (301) 443-6960.	Dr. Madeleine Hess (301) 443-6333.	02/06/97
822(a), Nurse Practitioner and Nurse Midwifery, 93.298	Ms. Brenda Selser (301) 443-6960.	Dr. Irene Sandvold (301) 443-6333.	12/11/96
827, Nursing Education Opportunities for Individuals from Disadvantaged Backgrounds, 93.178.	Ms. Wilma Johnson (301) 443-6880.	Ms. Helen Lotsikas (301) 443-5763.	12/15/96
830, Professional Nurse Traineeships, 93.358	Ms. Wilma Johnson (301) 443-6880.	Ms. Marcia Starbecker (301) 443-6193.	12/17/96
831, Nurse Anesthetist Program	Ms. Wilma Johnson (301) 443-6880.	Ms. Marcia Starbecker (301) 443-6193.	
Nurse Anesthetist Traineeships, 93.124	12/16/96
Nurse Anesthetist Education Programs, 93.916	01/22/97
Nurse Anesthesia Faculty Fellowships, 93.907	12/16/96

These title VIII grant programs are not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100). Also, these grant programs are not subject to the Public Health System Reporting Requirements.

Dated: October 17, 1996.

Ciro V. Sumaya,
Administrator.

[FR Doc. 96-27068 Filed 10-21-96; 8:45 am]

BILLING CODE 4160-15-P

National Institutes of Health

National Institute of General Medical Sciences; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting:

Committee Name: Minority Program Review Committee MARC, Minority Access to Research Careers Sub-Committee.

Date: October 17-18, 1996.

Time: 8:30 a.m.

Place: Natcher Conference Center, Conference Room C-1&2, Bethesda, Maryland 20892-6200.

Contact Person: Richard I. Martinez, Ph.D., Office of Scientific Review, Scientific Review Administrator, NIGMS, 45 Center Drive, Room 1A5-19G, Bethesda, MD 20892-6200, 301-594-2849.

Purpose: To review institutional research training grant applications and proposals.

This meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5 U.S.C. The discussions of these applications could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the above meeting due to the

urgent need to meet timing limitations imposed by the review and funding cycle.

(Catalog of Federal Domestic Assistance Program Nos. 93.821, Biophysics and Physiological Sciences; 93.859, Pharmacological Sciences; 93.862, Genetics Research; 93.863, Cellular and Molecular Basis of Disease Research; 93.880, Minority Access Research Careers [MARC]; and 93.375, Minority Biomedical Research Support [MBRS])

Dated: October 15, 1996.

Paula N. Hayes,

Acting Committee Management Officer, NIH.

[FR Doc. 96-26969 Filed 10-21-96; 8:45 am]

BILLING CODE 4140-01-M

National Institute on Drug Abuse; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the National Institute on Drug Abuse Initial Review Group, Neurophysiology and Neuroanatomy Research Subcommittee, which was