PERSON TO CONTACT FOR INFORMATION:
Mr. Ron Harris, Press Officer,
Telephone: (202) 694–1220.
Mary W. Dove,
Acting Secretary of the Commission.
[FR Doc. 01–4670 Filed 2–21–01; 2:27 pm]
BILLING CODE 6715–01–M

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisition of Shares of Bank or Bank Holding Companies

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817[1]) and § 225.41 of the Board’s Regulation Y (12 CFR 225.41) to acquire a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817[7]).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the office of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842[c]). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than March 8, 2001.

A. Federal Reserve Bank of Minneapolis (JoAnne F. Lewellen, Assistant Vice President) 90 Hennepin Avenue, Minneapolis, Minnesota 55408–0291:
2. Grant County State Bancshares, Inc., Employees Stock Ownership Plan, Swayzee, Indiana; to acquire 30.02 percent of the voting shares of Grant County State Bancshares, Inc., Swayzee, Indiana, and thereby indirectly acquire Grant County State Bank, Swayzee, Indiana.


Jennifer J. Johnson
Secretary of the Board.
[FR Doc. 01–4477 Filed 2–22–01; 8:45 am]
BILLING CODE 6210–01–S

FEDERAL RESERVE SYSTEM

Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 et seq.) (BHC Act), Regulation Y (12 CFR Part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The application also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act (12 U.S.C. 1817[7]).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the office of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than March 8, 2001.

A. Federal Reserve Bank of Minneapolis (JoAnne F. Lewellen, Assistant Vice President) 90 Hennepin Avenue, Minneapolis, Minnesota 55408–0291:
2. Grant County State Bancshares, Inc., Employees Stock Ownership Plan, Swayzee, Indiana; to acquire 30.02 percent of the voting shares of Grant County State Bancshares, Inc., Swayzee, Indiana, and thereby indirectly acquire Grant County State Bank, Swayzee, Indiana.


Jennifer J. Johnson
Secretary of the Board.
[FR Doc. 01–4477 Filed 2–22–01; 8:45 am]
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FEDERAL RESERVE SYSTEM

Sunshine Act Meeting; Notice

AGENCY HOLDING THE MEETING: Board of Governors of the Federal Reserve System.


STATUS: Closed.

MATTERS TO BE CONSIDERED:
1. Personnel actions (appointments, promotions, assignments, reassignments, and salary actions)
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Request for Planning Ideas for the Development of the Children’s Health Outcomes Initiative

AGENCY: Agency for Healthcare Research and Quality (AHRQ), DHHS.

ACTION: Notice.

SUMMARY: AHRQ is exploring the feasibility of leading a significant research initiative (Initiative) that will examine the relationships between care management processes (including health systems and clinical care) and children’s health outcomes to produce information that can be incorporated into practice and policy. Consistent with research previously funded by AHRQ, outcomes are defined as important dimensions of health attributable to health care, including health perceptions, ability to function, and satisfaction with care. Interventions of interest are broadly defined to include both clinical interventions, organizational characteristics and strategies, and the intersection or combination of both. The purpose of this announcement is to solicit broad input from clinical and social scientists, researchers, clinicians, health systems leaders and others regarding priorities for focusing the Initiative. Recommendations received will be compiled and discussed at an expert meeting convened to discuss the initiative and plan a possible research strategy. This request for suggestions and the expert meeting are preparatory steps of the Initiative, which may lead to a study (or family of studies) commencing in FY 2002.

Nature of Recommendations

AHRQ requests written suggestions as to the priority issues in children’s health care that the Initiative should address. Issues should be considered priorities because their impact has not been adequately studied in other research or because their impact can only be evaluated in a large study such as this. Supporting rationale and suggestions for research strategies should be included. Suggestions should address one or more of the following categories:

- **Age of population to be studied:** Child health includes the health care needs of infants, preschoolers, school-age children and adolescents. Since their needs vary, should the Initiative focus on a particular group or the entire spectrum?
- **General population or priority populations to be studied:** Should the Initiative focus exclusively on the needs of priority populations (as defined by AHRQ: racial and ethnic minorities, low-income populations, people living in rural areas and inner-city, and people living with chronic illnesses and/or disabilities), the needs of children insured through public programs, or the general pediatric population?
- **General health or tracer conditions to be studied:** One approach used to assess care management in adult populations has involved the use of selected “tracer” or sentinel conditions (e.g., diabetes) to derive inferences about overall health system performance. (Kessner DM, Kaik CE, Singer J. Assessing health quality—the case for tracers. The New England Journal of Medicine. 1973;288(4): 189–194.) This strategy may or may not be suitable for children. AHRQ seeks input on the question: Should general health or tracer conditions be used to evaluate the health care organization’s impact on child health status? If tracer conditions should be the focus, which conditions (physical, mental or behavioral) should be examined? Examples of experience from research or clinical improvement programs would be particularly helpful.
- **Structures of the health care system to be studied:** What organizational and delivery components of typical child health care settings and characteristics should be examined for their impact on children’s health outcomes? Beyond the evolution of managed care arrangements, there is far less understood about practice settings likely to influence the content of care.
- **Clinical processes of care:** An important challenge for this Initiative is establishing priorities for clinical conditions or interventions to be assessed. When assessing clinical processes of care, should the focusing theme be “tracer” conditions (e.g., acute or chronic medical conditions, behavior problems, risk factors for adult disease, etc.) and the clinical processes that effect these conditions, or should the focusing theme be generic clinical processes (e.g., anticipatory guidance, specialty care, pediatric rehabilitation, etc.) and their impact on broader health outcomes, or should it be a combination of the two? Criteria for selecting priority topics would also be most welcomed. For example, conditions for which current evidence is exceeded by increasing need (e.g., obesity) are of particular interest, as are clinical processes that are broadly applied but for which there is little evidence (e.g., anticipatory guidance), as well as conditions relevant to children with special health care needs, such as rehabilitative services.
- **Outcomes to be measured:** What might be the most salient child health outcomes, long and short term, for which it would be important to elucidate the relationship with the structures and processes of health care under study?
- **Methodologic issues:** There are a number of study designs that are potentially suitable for this effort, including a multi-center study with a single protocol and coordinating center; centers of excellence with specific themes; a follow-back component added to an existing data collection effort; or focused individual projects that include common outcome measures and design features but allow local flexibility. Comments on the relative advantages or disadvantages to these approaches, or other designs, are also most welcomed.
- **Other issues in child health care that do not fit into the categories above.**

DATES: Submit comments on or before March 26, 2001.

ADDRESSES: Submissions should be brief (no more than three pages per recommendation) and may be in the form of a letter or e-mail, preferably with an electronic file in a standard word processing format on 3½ floppy disk or as an attachment. Responses to this request should be submitted to: Howard Bauchner, MD, Scholar in Residence, Agency for Healthcare Research and Quality, 6010 Executive Boulevard, Suite 201, Rockville, MD.