

World Wide Web via the Internet. However, if you are unable to obtain the application materials electronically, you may obtain application materials in the mail by sending a written request to the Grants Management Branch at the address above. Written requests may also be sent via FAX (301) 443-6343 or via the internet listed above. Completed applications should be returned to the Grants Management Branch at the above address.

If additional programmatic information is needed, please contact Meribeth Reed, PhD, RN, Division of Nursing, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 9-35, 5600 Fishers Lane, Rockville, Maryland 20857. Dr. Reed may be reached by telephone at (301) 443-5763, by fax at (301) 443-8586, or by e-mail at: (mreed@hrsa.ssw.dhhs.gov).

#### Paperwork Reduction Act

The standard application form PHS 6025-1, HRSA Competing Training Grant Application, has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act. The OMB Clearance Number is 0915-0060.

The deadline date for receipt of applications is August 19, 1996. 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 will not be acceptable as proof of timely mailing.)

Late applications not accepted for processing will be returned to the applicant. In addition, applications which exceed the page limitation and/or do not follow format instructions will not be accepted for processing and will be returned to the applicant.

This program is not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100). This program is also not subject to the Public Health System Reporting Requirements.

Dated: July 10, 1996.

Ciro V. Sumaya,  
Administrator.

[FR Doc. 96-17998 Filed 7-15-96; 8:45 am]

BILLING CODE 4160-15-P

#### Availability of Funds for Cooperative Agreement to Create a Primary Care Resource Center

**AGENCY:** Health Resources and Services Administration.

**ACTION:** Notice of available funds.

**SUMMARY:** The Health Resources and Services Administration (HRSA) announces that applications will be accepted in fiscal year (FY) 1996 to create a university-based Primary Care Resource Center. The purpose of the Center is to study the organization, financing, and delivery of primary health care services to underserved and vulnerable populations, in order to develop materials and information which will assist and benefit Community Health Centers (CHCs) in their analysis of the need for primary health services, the development of clinical practices, and the refinement of fiscal and administrative systems. Funding of this activity is authorized under Section 330(f)(1) of the Public Health Service (PHS) Act.

The PHS is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity for setting priority areas. HRSA programs, and CHCs in particular, are related to the objectives cited for special populations, particularly minorities, people with low income, and other types of vulnerable populations. 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, DC 20402-9325 (telephone 202-783-3238).

The PHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, day care, health care, or early childhood development services are provided to children.

**DUE DATES:** Applications are due August 30, 1996. Applications will be considered to have met the deadline if they are: (1) Received on or before the deadline date; or (2) postmarked 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 the U.S. Postal

Service. Private metered postmarks are not acceptable as proof of timely mailing. Applications received after the announced deadline will not be considered for funding.

**ADDRESSES:** Application kits (Form PHS 5161-1) with revised face sheet DHHS Form 424, as approved by the Office of Management and Budget under control number 0937-0189, may be obtained from, and completed applications should be mailed to: BPHC Grants Management Officer, c/o Houston Associates, Inc., 1010 Wayne Avenue, Suite 1200, Silver Spring, MD 20910, Telephone 800/523-2192.

**FOR FURTHER INFORMATION CONTACT:** For information on programmatic and research issues, contact: Ms. Bonnie Lefkowitz, Associate Bureau Director, Office of Data, Evaluation, Analysis, and Research, Bureau of Primary Health Care, HRSA, 4350 East-West Highway, Bethesda, Maryland 20814, Telephone 301/594-4280 (FAX 301/594-4986).

For information on business management issues, please contact Nancy Benson in the Office of Grants Management, Bureau of Primary Health Care, 301/594-4232.

#### SUPPLEMENTARY INFORMATION: Program Requirements

HRSA's Bureau of Primary Health Care (BPHC) is seeking to enter into a cooperative agreement with a university or university-based organization for the purpose of operating a Primary Care Resource Center. The activities to be performed under this cooperative agreement are intended to assure that relevant knowledge about the health care environment and about methods of clinical and management improvement is made available to the health centers and other primary care providers; and that this knowledge is disseminated throughout those programs, and is conveyed to policymakers, program planners and administrators, care providers, and the user populations. Toward that goal, the Primary Care Resource Center will communicate effectively and regularly with these audiences through instruments it develops and disseminates.

Areas and topics for study will be determined jointly by BPHC and the Center, with emphasis on the ability to respond to changing needs of BPHC programs. The Center will be responsible for:

1. Producing short-term (e.g., 3-4 weeks turn-around) analytic reports, white papers, and monographs, for dissemination, as appropriate, to the public;

2. Conducting longer-term (e.g., 6–12 months turn-around), more comprehensive applied policy research studies;

3. Developing informational and educational materials, including monographs and summary reports, to help link policymakers and the BPHC audiences identified above with sources of information about primary care.

Subjects of such papers, studies, and reports are expected to include, for example:

- Monitoring the impact of changes in financing and delivery of health care on vulnerable populations;
- Access to care for underserved populations—status of “safety net” services;
- The changing role of Federal programs in health care generally, and adaptation to managed care;
- Prevention strategies for underserved and vulnerable populations (e.g., homeless and persons with HIV disease);
- Assessing quality of care and quality of service;
- Approaches to studying performance and health outcomes;
- Design of program evaluations in primary care; and
- Recruitment and retention of primary care providers.

#### Criteria for Evaluating Applications

Applications for cooperative agreement support will be reviewed based upon the following evaluation criteria:

- a. Extent to which the applicant shows understanding of policy issues that have a significant effect on primary care for underserved populations, particularly in light of the changing health care and government environment;
- b. Extent to which the applicant demonstrates flexibility to provide quick response to requests and inquiries, for example, as indicated in a management plan and personnel table, and in evidence of ongoing relationships with appropriate personnel so as to minimize start-up time;
- c. Appropriateness and adequacy of qualifications and experience of the proposed project staff and consultants;
- d. Extent to which the applicant demonstrates prior evidence of organizational ability to conduct high-quality policy-relevant studies and disseminate materials in an appropriate format in a timely manner, and to appropriate audiences; and
- e. Reasonableness of costs in relation to the value of proposed activities, including how the proportion of the

proposed budget for direct production of deliverables has been maximized.

#### Eligible Applicants

Any public or private university or university-based organization may apply. Less than maximum competition is necessary in order to ensure academic rigor and depth of skills, and to gain optimal access to current information, professional research, and informed opinion regarding the delivery of primary health care for minority and vulnerable populations and those with special health care needs. The experience and attributes of a university or university-based organization are essential to the timely and successful completion of the products required.

#### Number of Awards

It is anticipated that one award will be made. The cooperative agreement for a Primary Care Resource Center will be awarded for a three-year period, and the initial budget period will be eight months. Funding during FY 1996 will be approximately \$200,000; BPHC will consider continuation funding during FY 1997 based on the availability of funds and performance in the first budget period.

#### Federal Responsibilities Under Cooperative Agreements

Federal responsibilities under the cooperative agreement, in addition to the usual monitoring and technical assistance, will include: (1) Participation in the development and approval of an initial workplan, in accord with changing events in government policies and in the health care environment, and modification thereof, as appropriate; (2) participation in meetings conducted under the cooperative agreement; (3) consultation to and cooperation with the grantee regarding the grantee's preparation and dissemination of materials; and (4) approval of specific studies and projects.

#### Other Award Information

This program is not subject to review under Executive Order 12372 or the Public Health System Reporting Requirements.

Dated: July 10, 1996.

Ciro V. Sumaya,  
*Administrator.*

[FR Doc. 96–17999 Filed 7–15–96; 8:45 am]

BILLING CODE 4160–15-P

#### National Institutes of Health

##### National Institute on Drug Abuse; Notice of Cancellation of Meeting

Notice is given of the cancellation of the meeting of the AIDS Biomedical and Clinical Research Subcommittee, National Institute on Drug Abuse Initial Review Group on July 16–17, 1996 at the Bethesda Marriott, 5151 Pooks Hill Road, Bethesda, MD 20814 which was published in the Federal Register on June 20, 1996, Volume 61 FR 31540.

The meeting was canceled due to a scheduling conflict.

Dated: July 10, 1996.

Susan K. Feldman,

*Committee Management Officer, NIH.*

[FR Doc. 96–18100 Filed 7–12–96; 11:28 am]

BILLING CODE 4140–01-M

#### Substance Abuse and Mental Health Services Administration

##### Cancellation of Receipt Date for SAMHSA Conference Grant Applications

**AGENCY:** Center for Substance Abuse Prevention and Center for Substance Abuse Treatment, SAMHSA.

**ACTION:** Cancellation of September 10, 1996 application receipt date.

**SUMMARY:** As a result of a substantial reduction in appropriations in fiscal year 1996 and uncertainty concerning future funding availability, SAMHSA's Center for Substance Abuse Prevention (CSAP) and Center for Substance Abuse Treatment (CSAT) are canceling the September 10, 1996, receipt date for applications for the following grant programs:

CSAP's Knowledge Dissemination Conference Grants (CFDA No. 93.174)  
CSAT's Substance Abuse Treatment Conference Grants (CFDA No. 93.218)

To be placed on a mailing list for an application kit and current programmatic guidelines, potential applicants should contact: National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, Maryland 20847–2345, Tele: 1–800–729–6686; TDD: 1–800–487–4889, Web Address: [www.health.org](http://www.health.org).

For information regarding future receipt dates or for programmatic assistance, potential applicants should contact the following individuals:

CSAP: Ms. Luisa del Carmen Pollard,  
Division of Community Education,  
CSAP, Rockwall II Building, Suite  
800, 5600 Fishers Lane, Rockville,  
Maryland 20857, Tele: (301) 443–8824.