expected. This has delayed early exploratory site visits under the evaluation, which in turn has delayed development of the protocols for indepth site visits which draw on information gathered from exploratory visits. Following normal clearance procedures would affect later phases of contract work and cause delays in the delivery of future reports.

DHHS is requesting that OMB grant 180 day emergency approval by May 14, 1999

Title and Description of Information Collection: Site Visit Protocols for the Multi-site Evaluation of the Welfare-to-Work Grants Program—NEW—As required by the Balanced Budget Act of 1997, DHHS is conducting an evaluation of the effectiveness of welfare-to-work initiatives undertaken through competitive and formula grants awarded by the US Department of Labor (DoL). DHHS' Office of the Assistant Secretary for Planning and Evaluation, in conjunction with DoL and the US Department of Housing and Urban Development (HUD), has designed an evaluation that will involve several rounds of data collection from grantees, affiliated agencies and grant program participants. The information collection instruments in this request for OMB approval consist of discussion protocols and focus group guides for site visits to WtW grantees that are part of the core evaluation's process and implementation analysis, and protocols for the tribal component of the evaluation. *Respondents:* State, Local, or Tribal Governments, Not-for-profit Institutions; Burden Information for the Discussion Protocols—Number of Respondents: 300; Number of Responses per Respondent: one; Average Burden per Response: one hour; Total Burden for Discussion Protocols: 300 hours-Burden Information for Focus Groups— Number of Respondents: 360; Number of Responses per Respondent: one; Average Burden per Response: 1.5 hours; Total Burden for Focus Groups: 540 hours. Burden Information for the Tribal Evaluation Instruments—Number of Respondents: 220; Number of Responses per Respondent: one; Average Burden per Response: .86 hour; Total Burden for Tribal Evaluation Instruments: 190 hours. Total Burden:

To request more information or a copy of the proposed data collection, please contact Alana Landey on 202–401–6636.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Written comments and recommendations for the proposed information collections should be immediately sent directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503. Comments may be faxed to Ms. Eydt at 202–395–5167.

Please send a copy of your comments to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue SW, Washington, DC, 20201.

Dated: April 21, 1999.

#### Dennis P. Williams,

Deputy Assistant Secretary, Budget. [FR Doc. 99–10568 Filed 4–27–99; 8:45 am] BILLING CODE 4150–04–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99088]

State Grants To Support the Evaluation of 5 A Day Nutrition Programs; Notice of Availability of Funds

#### A. Purpose

The Centers for Disease Control and Prevention (CDC) in partnership with the National Cancer Institute (NCI) announces the availability of fiscal year (FY) 1999 funds for a grant program to support the evaluation of 5 A Day Nutrition Programs. This program addresses the "Healthy People 2000" priority area of Nutrition (please see background section included in appendix).

The purpose of the program is to support State efforts to evaluate 5 A Day nutrition intervention programs.

#### **B.** Eligible Applicants

Eligible applicants are the official public health agencies of States or their bona fide agents. This includes the District of Columbia, American Samoa, the Commonwealth of Puerto Rico, the Virgin Islands, the Federated States of Micronesia, Guam, the Northern

Mariana Islands, the Republic of the Marshall Islands, the Republic of Palau, and federally recognized Indian tribal governments, that are licensed by NCI for the 5 A Day Program; and have established, clearly-defined, measurable, long-range 5 A Day for Better Health projects in a specific community channel (e.g., supermarkets, schools, etc.).

# C. Availability of Funds

Approximately \$535,000 is available in FY 1999, to fund approximately 7 awards. It is expected that the average award will be \$75,000, ranging from \$55,000 to \$90,000. It is expected that the awards will begin on or about September 30, 1999, and will be made for a 12-month budget period within a project period of up to 1 year. Funding estimates may change.

Recipient Financial Participation

Awards under this announcement will not be sufficient to fully support an applicant's proposed activities, but are meant to be used in conjunction with other resources—whether direct funding or in-kind contributions—that the applicant may have available.

#### **D. Program Requirements**

Applicants should propose an evaluation plan for a clearly defined, established, long-range effort (e.g., sustainable after program funding under this announcement ends) in one or more specific community channels in accordance with the following definitions:

## 1. Clearly Defined Objectives

Intervention objectives are clearly stated; activities necessary to accomplish objectives are described, to include who is responsible for each activity and when they will be accomplished; and work is done within a specific channel with a defined target audience.

# 2. Established 5 A Day Program

The applicant has a developed, ongoing 5 A Day Program. Evaluating pretested or piloted interventions is desirable.

#### 3. Evaluation Plan

Clear, measurable evaluation objectives and expected outcomes are defined with appropriate statistical power. Use of current theoretical frameworks to guide the evaluation study is desirable. A combination of process and impact objectives is also desirable, with outcome objectives where feasible. In designing the study, consideration should be given to the

number of individuals or groups needed to detect realistic changes in postintervention outcome measures when compared with pre-intervention measures. Sample sizes should give adequate power (80 percent) to detect these changes. If the appropriate design expertise does not exist within the State health department, inclusion of an organization with the necessary design expertise on the project team, such as a university affiliate, is recommended.

# 4. Long Range Sustainability

The program is not just a single activity at one point in time, but sustained effort and on-going program plans involving appropriate behavior change strategies that are capable of continuing after funding under this announcement ends. Programs including environmental approaches and administrative changes are encouraged.

# 5. Program Emphasis Will be Placed on

- (a) Evaluation of a community intervention's impact on knowledge, attitude, awareness and behavioral change in minority-based population groups (such as elderly, young children or low-income groups, and ethnic groups such as, but not exclusive to, American Indians, Asians, Pacific Islanders, African Americans or Hispanics) which have low fruit and vegetable intakes or have a disproportionately greater risk for cancer;
- (b) Testing the effects of culturally sensitive and linguistically appropriate strategies within a community intervention designed to increase the consumption of fruits and vegetables in minority population subgroups and promote other related lifestyle behaviors which are recognized covariates that influence fruit and vegetable consumption; or

(c) Evaluation of communication channels (radio, tv, print media) which target the specific minority population subgroups identified as part of 5 A Daybased community intervention campaigns.

#### E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. Your application will be evaluated on the criteria listed, so it is important to follow them in laying out your program plan. The narrative should be no more than 10 double-spaced pages, printed on one side, with one inch margins, and unreduced font and must contain the following information:

### 1. Background

Provide a brief but clear description of a current project in one or more specific community channels including project goals and objectives, target group, methodology of intervention, and length of time of the current project.

## 2. Program Plan

Provide a realistic, time phased, and specific work plan including evaluation goals, objectives, methods, and outcomes to be achieved during the 12month period; and a clear plan to evaluate the current long-range effort in a particular channel or channels and assess the impact of those activities with measures of process and outcomes related to the targeted audience. Examples of potential evaluation projects might include but are not limited to the following:

- a. Evaluation of the process and impact of instituting a community neighborhood 5 A Day project targeting for example minority, elderly, youth, or low-income groups and its effect on perceived barriers, attitudes, beliefs, dietary behaviors and fruit and vegetable consumption.
- b. Evaluation of innovative measurement techniques appropriate for targeted minority audiences and their perceptions/response to the current 5 A Day Program recommendations of 5 to 9 servings of fruits and vegetables daily.
- c. Evaluate the impact of a 5 A Day media and/or education campaign on knowledge, attitudes, and behaviors of targeted minority community members, with a focus on issues of awareness translating to action/behavioral stages of change and changes in fruit and vegetable consumption. (e.g. food assistance program like Women Infant Children (WIC) or other communitybased program combined with a media intervention).
- d. Evaluate an intervention that promotes healthy dietary choices (5 A Day) and physical activity in a defined community setting with a focus on the effect of affiliated environmental change(s) on behavior.

## 3. Capacity

Document the expertise of the evaluation team by including the curriculum vitae (limited to 1 page attachment per person) for key members of the team. If sufficient evaluation expertise is not available in the State health department, States are strongly encouraged to work with an academic institution in the design, data collection, and analysis activities for this evaluation. For interventions involving administrative changes, describe the

infrastructure that is or will be in place to support the administrative change once made in the defined setting.

### 4. Human Subjects

Documentation that human subject assurances are met, either through copies of approved protocols or notation of the institutional review committee that will review the project. Should human subjects review be required, the proposed work plan should incorporate time lines for such development and review activities.

### 5. Women, Racial, and Ethnic Minorities

Describe and provide for the inclusion of women, ethnic, and racial groups in the proposed research to include:

 The proposed plan for the inclusion of both sexes and racial and ethnic minority populations for appropriate representations.

b. The proposed justification when representation is limited or absent.

c. A statement whether the design of the study is adequate to measure differences when warranted.

#### 6. Budget

Provide a detailed budget and lineitem justification that is consistent with the stated objectives, purpose, and planned activities of the project. (Not to be counted as part of the 10 page narrative.)

An original and two copies of the application are required. Pages should be numbered, and an index to the application and appendix must be included. The original and each copy of the application must be submitted unstapled and unbound. Materials that should be part of the basic plan will not be accepted if placed in the appendix. Appendix material should not exceed 25 pages. Please do not include reports (or portions thereof), journal articles, mass media articles, or presentations of national statistical data.

# F. Submission and Deadline

# Application

Submit the original and two copies of CDC Form 0.1246(E). Forms are in the application kit. On or before June 28, 1999, submit the application to: Lucy Picciolo, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99088. Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Room 3000, Atlanta, Georgia 30341-4146.

Deadline: Applications shall be considered as meeting the deadline if

they are either:

(a) Received on or before the deadline date; or

(b) Sent on or before the deadline date and received in time for submission to the review panel. (Applicants must 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: Applications which do not meet the criteria in (a) or (b) above are considered late applications, will not be considered, and will be returned to the applicant.

## G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC.

Applications will be reviewed and evaluated according to the following criteria:

#### 1. Background: (25 Points)

The degree to which the applicant clearly describes a long-range, clearly defined, measurable project, including a description of the intervention targeted population, method, and community channel(s).

#### 2. Program Plan: (40 Points)

The adequacy of the applicant's plan to carry out the evaluation within the 12-month time period, including the specific objectives, methods, and measures to be used in the evaluation.

# 3. Capacity: (30 Points)

The capabilities of the personnel (including consultants where appropriate) to carry out the evaluation.

# 4. Women, Racial, and Ethnic Minorities (5 Points)

The degree to which the applicant has met the CDC Policy requirements regarding the inclusion of women, ethnic, and racial groups in the proposed research.

This includes:

- a. The proposed plan for the inclusion of both sexes and racial and ethnic minority populations for appropriate representations.
- b. The proposed justification when representation is limited or absent.
- c. A statement whether the design of the study is adequate to measure differences when warranted.

# 5. Human Subjects: (Not Weighted)

Whether or not exempt from the Department of Health and Human Services (HHS) regulations, are procedures adequate for the protection of human subjects? Recommendations on the adequacy of protections include: (1) Protections appear adequate and there are no comments to make or concerns to raise, (2) protections appear adequate, but there are comments regarding the protocol, (3) protections appear inadequate and there are concerns related to human subjects, or (4) disapproval of the application is recommended because the research risks are sufficiently serious and protection against the risks are inadequate as to make the entire application unacceptable.

Does the application adequately address the requirements of Title 45 CFR Part 46 for the protection of human subjects?

\_\_\_\_Yes \_\_\_\_No Comments: \_\_\_\_

# 6. Budget: (Not Weighted)

The extent to which the applicant provides a detailed budget and line-item justification that is consistent with the evaluation plan.

#### **H. Other Requirements**

Technical Reporting Requirements

Provide CDC with original plus two copies of

- 1. Annual progress report; The progress reports must include the following for each program, function, or activity involved: (1) A comparison of the actual accomplishments to the goals established for the period; (2) the reasons for slippage if established goals were not met; and (3) other pertinent information including, when appropriate, analysis and explanation of unexpectedly high costs for performance.
- 2. Financial status report, no more than 90 days after the end of the budget period; and
- 3. Final financial status and performance reports, no more than 90 days after the end of the project period.

Send all reports to: Lucy Picciolo, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Room 3000, Atlanta, GA 30341–4146.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I in the application kit.

AR-1 Human Subjects Requirements AR-2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research

AR-7 Executive Order 12372 Review

- AR-9 Paperwork Reduction Act Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2000
- AR-12 Lobbying Restrictions

# I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under section 301 (a) and 317(k)(2) [42 U.S.C. 241 (a) and 247b (k)(2)] of the Public Health Service Act, as amended. The Catalog of Federal Domestic Assistance number is 93.283.

# J. Where to Obtain Additional Information

Please refer to Program
Announcement [99088] when you
request information. For a complete
program description, information on
application procedures and business
management assistance, contact: Lucy
Picciolo, Grants Management Specialist,
Grants Management Branch,
Procurement and Grants Office,
Announcement 99088, Centers for
Disease Control and Prevention (CDC),
2920 Brandywine Road, Room 3000,
Atlanta, GA 30341–4146, Telephone
(770) 488–2757, Email address
lip6@cdc.gov.

See also the CDC home page on the Internet in order to find information on application procedures and an application package: http://www.cdc.gov.

For program technical assistance, contact: Sarah Kuester, MS, RD, Public Health Nutritionist, Division of Nutrition and Physical Activity, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC), 3005 Chamblee-Tucker Road, Room 5157, Atlanta, GA, 30341–4133, Telephone (770) 488–6019, Fax (770) 488–6000, Email address: sak2@cdc.gov.

To receive additional written information and to request an application kit, call 1–888–GRANTS4 (1–888–472–6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest.

Dated: April 22, 1999.

### John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–10616 Filed 4–27–99; 8:45 am] BILLING CODE 4163–18–P