

VI. Award Administration Information

1. *Award Notices:* Within a month of the review of all applications, applicants not scoring in the funding range will receive a letter stating that they have not been recommended for funding. Applicants selected for funding support will receive a Notice of Grant Award signed by the grants officer. This is the authorizing document to begin performing grant activities and it will be sent electronically and followed up with a mailed copy. Pre-award costs are not supported by the OWH.

2. *Administrative and National Policy Requirements:* (1) In accepting this award, the grantee stipulates that the award and any activities thereunder are subject to all provisions of the 45 CFR parts 74 and 92, currently in effect or implemented during the period of this grant. Requests that require prior approval from the awarding office (*see* Chapter 8, PHS Grants Policy Statement) must be submitted in writing to the OPHS Grants Management Office. Only responses signed by the Grants Management Officer are to be considered valid. Grantees who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the OWH. (2) Responses to reporting requirements, conditions, and requests for post-award amendments must be mailed to the Office of Grants Management at the address indicated below in "Agency Contacts." All correspondence requires the signature of an authorized business official and/or the project director. Failure to follow this guidance will result in a delay in responding to your correspondence. (3) The DHHS Appropriations Act requires that, when issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with Federal money, the issuance shall clearly state the percentage and dollar amount of the total costs of the program or project that will be financed with Federal money and the percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources. (4) A notice in response to the President's Welfare-to-Work Initiative was published in the **Federal Register** on May 16, 1997. This initiative is designed to facilitate and encourage grantees to hire welfare recipients and to provide additional training and/or mentoring as needed. The text of the notice is available electronically on the OMB home page at <http://www.whitehouse.gov/wh/eop/omb>.

3. *Reporting:* In addition to those listed above, a successful applicant will submit an annual technical report that includes a detailed discussion of the process, impact, outcome evaluation of the Ambassador program and a Financial Status Report in accordance with provisions of the general regulations which apply under "Monitoring and Reporting Program Performance," 45 CFR parts 74 and 92. An original and two copies of the annual report must be submitted by August 15. The annual report will serve as the non-competing continuation application and must cover all activities for the entire budget year. Therefore, this report must also include the budget request for the next grant year, with appropriate justification, and signatures, and be submitted using Form PHS 5161.

VII. Agency Contact(s)

For application kits and information on budget and business aspects of the application, please contact: Office of Grants Management, Office of Public Health and Science, Department of Health and Human Services, 1101 Wooten Parkway, Suite 550, Rockville, MD 20857. Telephone: (310) 594-0758.

Questions regarding programmatic information and/or requests for technical assistance in the preparation of the grant application by CCOEs should be directed in writing to Ms. Barbara James, Director, National Community Centers of Excellence in Women's Health Program, 5600 Fishers Lane, Room 16A-55, Rockville, MD 20859. Telephone: (301) 443-1402. E-mail: bjames1@osophs.dhhs.gov. Questions from the CoEs should be directed to Ms. Eileen Newman, Public Health Analyst at the same address. Her e-mail is enewman@osophs.dhhs.gov.

VIII. Other Information

Fourteen (14) CCOE programs are currently funded by the OWH. Information about these programs may be found at the following Web site: <http://www.4woman.gov/owh/CCOE/index.htm>. Twenty-one (21) CoE programs are currently funded by the OWH. Information about these programs may be found at the following Web site: <http://www.4woman.gov/COE/index.htm>.

Dated: June 15, 2005.

Wanda K. Jones,

Deputy Assistant Secretary for Health (Women's Health), Office of Public Health and Science.

[FR Doc. 05-12518 Filed 6-23-05; 8:45 am]

BILLING CODE 4150-33-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Government-owned Inventions; Availability for Licensing and Cooperative Research and Development Agreements (CRADAs)

AGENCY: Centers for Disease Control and Prevention, Technology Transfer Office, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The invention named in this notice is owned by agencies of the United States Government and is available for licensing in the United States (U.S.) in accordance with 35 U.S.C. 207, and is available for cooperative research and development agreements (CRADAs) in accordance with 15 U.S.C. 3710, to achieve expeditious commercialization of results of federally funded research and development. A U.S. provisional patent application has been filed and foreign patent applications are expected to be filed within the year to extend market coverage for U.S. companies and may also be available for licensing.

ADDRESSES: Licensing and CRADA information, and information related to the technology listed below, may be obtained by writing to Suzanne Seavello Shope, J.D., Technology Licensing and Marketing Scientist, Technology Transfer Office, Centers for Disease Control and Prevention (CDC), Mailstop K-79, 4770 Buford Highway, Atlanta, GA 30341, telephone (770) 488-8613; facsimile (770) 488-8615; or e-mail sshope@cdc.gov. A signed Confidential Disclosure Agreement (available under Forms at <http://www.cdc.gov/tto>) will be required to receive copies of unpublished patent applications and other information.

SOFTWARE—Family Healthware™

Familial Risk Analysis for Determining a Disease Prevention Plan

Family health history reflects the interactions of genetic, environmental, and behavioral risk factors and has been shown to help predict disease risk for a variety of disorders including cardiovascular disease, cancer, and diabetes. The Centers for Disease Control and Prevention has an ongoing initiative to evaluate the use of family history information for assessing risk for common diseases and influencing early detection and prevention strategies. The tools and methods currently used for taking family histories, however, are

inadequate for widespread use in preventive medicine and public health. As part of the family history initiative, CDC is developing an electronic, self-administered, Web-based tool that assesses familial risk for six diseases and recommends early detection and prevention strategies. The tool collects:

- Name, date of birth, gender, adoption status, Ashkenazi Jewish heritage.
- Current height and weight.
- Health behaviors: smoking, physical activity, fruit and vegetable consumption, alcohol use, aspirin use.
- Screening tests: clinical breast exam, mammogram, fecal occult blood test, sigmoidoscopy, colonoscopy, blood cholesterol, blood pressure, and blood sugar.
- Disease history of a person's first- and second-degree relatives (mother, father, grandparents, siblings, aunts and uncles) for coronary heart disease, stroke, diabetes, and colorectal, breast, and ovarian cancer.

Algorithms in the software analyze the data and assess risk based on the number of relatives affected, their age at disease onset, their gender, the closeness of the relatives to each other and the user, and the combinations of diseases in the family. The tool provides the user with a report that includes an assessment of familial risk for each disease (described as strong, moderate or weak), an explanation as to why the family history is a risk factor, and recommendations for disease prevention and screening that are targeted to the familial risk and based on answers to the health behavior and screening questions. An evaluation trial of Family Healthware™; set in primary practice clinics will begin in July 2005.

Inventors: Maren T. Scheuner, Paula W. Yoon, Muin J. Khoury, and Cynthia Jorgensen.

CDC Ref. #: I-004-04.

Dated: June 13, 2005.

James D. Seligman,

Associate Director for Program, Services, Centers for Disease Control and Prevention.
[FR Doc. 05-12498 Filed 6-23-05; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Health Promotion and Diabetes Prevention Projects for American Indian/Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Health Promotion and Diabetes Prevention Projects for American Indian/Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029.

Times and Dates: 9 a.m.–5 p.m., August 2, 2005 (Closed); 9 a.m.–5 p.m., August 3, 2005 (Closed); 9 a.m.–4 p.m., August 4, 2005 (Closed).

Place: Club House Inn and Suites, 1315 Menaul Boulevard NE., Albuquerque, NM 87107, Telephone Number (505) 345-0010.

Status: The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to: Health Promotion and Diabetes Prevention Projects for American Indian/Alaska Native Communities: Adaptations of Practical Community Environmental Indicators, Program Announcement Number AA029.

For Further Information Contact: Maria E. Burns, M.P.A., Senior Program Management Officer, National Center for Chronic Disease Prevention and Health Promotion, CDC, 1720 Louisiana Boulevard, NE., Albuquerque, NM 87110, Telephone (505) 232-9907.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: June 20, 2005.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 05-12499 Filed 6-23-05; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Availability of Opportunity to Provide Input for the National Occupational Research Agenda

The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following:

Availability of Opportunity for the Public to Provide Input for the National Occupational Research Agenda (NORA).

For the past nine years, NORA has served as a framework to guide occupational safety and health research in the nation. Approximately 500 participants outside NIOSH provided input into the development of the first agenda. Building on the success of NORA, the second decade of NORA will use a sector-based approach.

NIOSH and its partners under NORA are pleased to introduce a newly updated NORA Web site at <http://www.cdc.gov/niosh/nora>. An important feature of the updated page is an online feedback form. We hope both individuals and organizations will use this opportunity to submit comments and suggestions for guiding the design of future occupational safety and health research in the nation.

The Web site allows stakeholders to describe what they perceive to be the top research needs within each sector, sub-sector, or in multiple sectors. Stakeholders can submit comments on the approach to redesigning NORA as it enters its second decade. We invite partners and collaborators to use the electronic option to provide comments, which will automatically be entered into the NORA Docket maintained by NIOSH.

Experience gained in the first decade of NORA indicates that the following types of information may help identify the areas where new research will make the greatest contributions to preventing work-related injuries, illnesses, and deaths:

- Number of workers at risk
- Seriousness of the hazard
- Probability that new information and approaches will make a difference

Alternatively, comments may be e-mailed to NIOCINDOCKET@cdc.gov or mailed to: Docket NIOSH-047, Robert A. Taft Laboratories (C-34), 4676 Columbia Parkway, Cincinnati, OH 45226.

The public may also view the complete NORA Docket at this location.