FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and 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 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 each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than October 20, 2006.

A. Federal Reserve Bank of St. Louis (Glenda Wilson, Community Affairs Officer) 411 Locust Street, St. Louis, Missouri 63166-2034:

1. Citizens First Corporation, Bowling Green, Kentucky; to acquire 100 percent of the voting shares of Kentucky Banking Centers, Inc., Glasgow, Kentucky.

Board of Governors of the Federal Reserve System, September 20, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. E6–15660 Filed 9–22–06; 8:45 am] BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Request for Measures of Consumers' Home Health Care Experiences

AGENCY: Agency for Healthcare Research and Quality (AHRQ), DHHS. **ACTION:** Notice of request for measures.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is soliciting the submission of instruments or items that measure perceptions of patients and their informal caregivers regarding the quality of home health care these patients received from home health providers, health plans, other health care providers, stakeholders, vendors, researchers who include home health care as part of their research, and other interested parties. This initiative is in response to the need to develop a new CAHPs® home health care survey. The Centers for Medicare & Medicaid Services is interested in incorporating this survey as part of its Home Health Quality Initiative which is intended to empower consumers with quality of care information to make more informed decisions about their health care while also encouraging Medicare certified home health agencies to improve the quality of care they deliver to all patients regardless of payer source. The survey is likely to assess the quality of care and services provided by nurses, therapists, home heath aides, medical social workers, and home health agency administrative staff.

Based on the agency's prior consumer assessment of health care work, there are several functional areas that this instrument could assess such as: Communication; courtesy and respect; information provided and shared decision making; coordination/ integration of care; time related issues (e.g., arrived and departed according to schedule, amount of time spent, visit frequency); competence: influence/ control over care giver activities; unmet need issues, and customer service. DATES: Please submit instruments and supporting information on or before October 25, 2006. AHRQ will not respond individually to submitters, but will consider all submitted instruments and publicly report the results of the review of the submissions in aggregate. ADDRESSES: Submissions should include

a brief cover letter, a copy of the instrument or items for consideration and supporting information as specified under the Submission Criteria below. Submissions may be in the form of a letter or e-mail, preferably with an electronic file as an E-mail attachment. Responses to this request should be submitted to: Charles Darby, Center for Quality Improvement and Patient Safety, Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, MD 20850, Phone: (301) 427– 1324, Fax: (301) 427–1341, E-mail: charles.darby@ahrq.hhs.gov.

To facilitate handling of submissions, please include full information about the instrument developer and/or a designated contact: (a) Name, (b) title, (c) organization, (d) mailing address, (e) telephone number, (f) fax number, and (g) e-mail address. Also, please submit a copy of the instrument or items for consideration, and evidence that meets the criteria below. It is requested that citation of a peer-reviewed journal article pertaining to the instrument to include the title of the article, author(s), publication year, journal name, volume, issue, and page numbers where article appears, be included, but is not required. Submitters must also provide a statement of willingness to grant to AHRQ the right to use and authorize others to use submitted measures and their documentation as part of a CAHPS®-trademarked instrument. This final CAHPS® instrument for collecting patient perspectives on the quality of home health care and services will be made publicly available, free of charge. Electronic submissions are encouraged. FOR FURTHER INFORMATION CONTACT: Charles Darby, at the address above.

Submission Criteria

Instruments submitted should focus on home health care or closely related care areas (e.g., home care; personal assistant services/community based care) and address areas of interest such as: communication, information provided and shared decision making, courtesy and respect, coordination/ integration, time related issues (e.g., arrival an departed according to schedule, amount of time spent: visit frequency competence) influence/ control over care giver activities, unmet need issues, and customer service.

Measures submitted must meet these criteria to be considered: capture the patients' experience of home health care workers and agency administrative and demonstrate a high degree of reliability and validity. Submitters' willingness to grant to AHRQ the right to use and authorize others to the instrument or item means that the CAHPS® trademark will be applied to a new instrument combining the best features of all the submissions as well as any ideas that may develop from reviewing them. This will ensure free access to the