

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of the Secretary****Findings of Scientific Misconduct**

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) and the Assistant Secretary for Health have taken final action in the following case:

Diana Layman, University of Oklahoma Health Sciences Center: Based on the report of an investigation conducted by the University of Oklahoma Health Sciences Center (OUHSC) and additional analysis conducted by the Office of Research Integrity during its oversight review, the U.S. Public Health Service (PHS) found that Ms. Diana Layman, Tribal Efforts Against Lead (TEAL) phlebotomist, OUHSC, engaged in scientific misconduct in research supported by National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health (NIH), grant R01 ES008755.

Specifically, Ms. Layman falsified research in the TEAL study by substituting or conspiring with another phlebotomist to substitute her blood or blood of another phlebotomist for blood samples of 10–15 child participants in the TEAL study. Ms. Layman has entered into a Voluntary Exclusion Agreement (Agreement) in which she has voluntarily agreed, for a period of three (3) years, beginning on May 30, 2007:

(1) To exclude herself from any contracting or subcontracting with any agency of the United States Government and from eligibility or involvement in nonprocurement programs of the United States Government as defined in HHS' implementation of OMB Guidelines to Agencies on Governmentwide Debarment and Suspension at 2 CFR part 376, *et seq.*; and

(2) To exclude herself from serving in any advisory capacity to PHS, including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant.

FOR FURTHER INFORMATION CONTACT:

Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8800.

John E. Dahlberg,

Acting Director, Office of Research Integrity.
[FR Doc. E7–12170 Filed 6–22–07; 8:45 am]

BILLING CODE 4150–31–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration on Aging****Availability of Funding Opportunity Announcement**

Purpose of Notice: Availability of funding opportunity announcement.

Funding Opportunity Title/Program Name: Nursing Home Diversion Modernization Grant.

Announcement Type: Initial Announcement.

Funding Opportunity Number: HHS–2006–AoA–CD–0713.

Statutory Authority: The Older Americans Act, Public Law 109–365.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.048, Title IV and Title II, Discretionary Projects.

DATES: The deadline date for the submission of applications is August 24, 2007.

I. Funding Opportunity Description

This Program Announcement provides an opportunity for State Units on Aging (SUA) in partnership with Area Agencies on Aging (AAA) to collaborate with aging service provider organizations, and other long-term care stakeholders to modernize and transform their existing Older Americans Act Title IIIB, IIIE, and Alzheimer's Disease Demonstration Grant (ADDGS) funds, and other non-Medicaid state revenue sources, into flexible, consumer directed service dollars that support nursing home diversion programs consistent with the standards described on the *Nursing Home Diversion Modernization Grant Announcement Resource Page* (http://www.aoa.gov/doingbus/fundopp/announcements/2007/NHDP_Resource_Page.doc).

While statewide implementation of nursing home diversion programs should be a long-term goal of programs funded under this announcement, a SUA, working with at least one AAA, may propose a project within the AAA's geographic area of the state. States with a single Planning and Service Area (PSA) may propose activities targeted to a single county or region of the state.

A detailed description of the funding opportunity may be found at <http://www.grants.gov> or at <http://www.aoa.gov> on the *AoA Grant Programs Funding Opportunity webpage* (<http://aoa.gov/doingbus/fundopp/fundopp.asp>).

II. Award Information**1. Funding Instrument Type**

These grants will be issued as Cooperative Agreements because AoA anticipates having substantial involvement with the recipients during performance of funded activities. This involvement may include: assisting the project leadership in understanding the strategic goals and objectives, policy perspectives, and priorities of the Assistant Secretary for Aging and the AoA by sharing such information on an ongoing basis via e-mail, conference calls, briefings, and other consultations; providing technical assistance and support on grant management and implementation issues, including execution of the cooperative agreement; defining project performance criteria and expectations; and, monitoring, evaluating and supporting the projects' efforts in achieving performance goals.

2. Anticipated Total Priority Area Funding per Budget Period

AoA intends to make available, under this program announcement, grant awards for up to \$500,000 each for up to 12 States at a total federal share of approximately \$5,000,000 for an 18 month project period.

III. Eligibility Criteria and Other Requirements**1. Eligible Applicants**

Eligibility for grant awards is limited to State Units on Aging.

2. Cost Sharing or Matching

Grantees are required to provide at least 25 percent of the total program costs from non-federal cash or in-kind resources in order to be considered for the award.

3. DUNS Number

All grant applicants must obtain a D–U–N–S number from Dun and Bradstreet. It is a nine-digit identification number, which provides unique identifiers of single business entities. The D–U–N–S number is free and easy to obtain from http://www.dnb.com/US/duns_update/.

4. Intergovernmental Review

Executive Order 12372, Intergovernmental Review of Federal Programs, is not applicable to these grant applications.

IV. Application and Submission Information**1. Address To Request Application**

Application kits are available by writing to the U.S. Department of Health