workers compliance with recommended infection control practices.

2. Study Design (40%)

Steps proposed in planning, implementing, and evaluating a project. The quality of the plans to coordinate and conduct the project, including a description of techniques for data collection, management, and analysis and a schedule for accomplishing the program activities, including time frames. The quality and feasibility of the proposed program activities for achieving the objectives, including the applicant's ability to conduct control technology or behavioral intervention studies with sufficient numbers to draw meaningful conclusions in a reasonable time period. The extent to which the intervention is specific and practical to implement in a hospital or other appropriate clinical setting.

If the outcome variable could be affected by confounding variables or biases, the extent to which the proposal addressed these confounding variables or biases to ensure that they do not call into question the results of the intervention assessment. Extent to which the outcome variable(s) chosen represents potentially important risks for large numbers of HCWs and/or

patients in U.S. hospitals.

In addition, applications targeting the behavioral component should specifically address: The extent to which the appropriate methodology is proposed so that the targeted compliance behavior(s) (outcome variable) measured is reliably quantifiable.

The extent to which the proposed evaluation system will document program process, efficacy, effectiveness, impact, and outcome, and, if applicable, measure surveillance system sensitivity, timeliness, representativeness, predictive values, and ability to detect the impact of specific intervention on morbidity, mortality, severity, disability, and cost of related diseases, injuries and prevention interventions. The extent to which a feasible plan for reporting evaluation results and using evaluation information for programmatic decisions is included.

3. Program Personnel (25%)

Qualifications and time allocation of the professional staff to be assigned to a project and applicant's ability to provide the knowledgeable staff required to perform the applicant's responsibilities in this project, and to describe the approach to be used in carrying out those responsibilities. How the study will be administered, including the size, qualifications,

duties, responsibilities, and time allocation, of the proposed staff. A statement of the applicant's demonstrated capabilities and experience in conducting such a project.

4. Facilities and Resources (20%)

The adequacy of the applicants facilities, equipment, and other resources available for performance of a project.

5. Budget and Justification (Not Scored)

The budget will be evaluated to the extent that it is reasonable, clearly justified, and consistent with the intended use of the funds.

Executive Order 12372 Review

This program is not subject to review by Executive Order 12372.

Public Health System Reporting Requirements

This program is not subject to the Public Health System reporting Requirements.

Catalog of Federal Domestic Assistance

The Catalog of Federal Domestic Assistance number is 93.262.

Other Requirements

Paperwork Reduction Act

Projects that involve the collection of information from 10 or more individuals and funded by this cooperative agreement will be subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction

Human Subjects

If the proposed project involves research on human subjects, the applicants must comply with the Department of Health and Human Services Regulations, 45 CFR Part 46, regarding the protection of human subjects. Assurance must be provided to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing assurance in accordance with the appropriate guidelines and forms provided in the application kit.

In addition to other applicable committees, Indian Health Service (IHS) institutional review committees also must review the project if any component of IHS will be involved or will support the research. If any American Indian community is involved, its tribal government must also approve that portion of the project applicable to it.

Application Submission and Deadline

The original and two copies of the application PHS form 5161-1 (revised 7/92, OMB Number 0937–0189) must be submitted to Henry S. Cassell, III, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, N.E., Mailstop E-13, Atlanta, GA 30305 on or before July 17, 1995.

- 1. 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 objective review group. (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 mailings.)
- 2. Late Applications: Applications which do not meet the criteria in 1.(a) or 1.(b) above are considered late applications. Late applications will not be considered in the current competition and will be returned to the applicant.

Where to Obtain Information

To receive additional written information call (404) 332-4561. You will be asked to leave your name, address, telephone number and will need to refer to Announcement 560. You will receive a complete program description, information on application procedures, and application forms.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from David Elswick, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mailstop E-13, Atlanta, GA 30305, telephone (404) 842-6521. Programmatic technical assistance may be obtained from Linda S. Martin, Ph.D., National Institute for Occupational Safety and Health, HIV Activity, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, Mailstop F-40, Atlanta, GA 30333, telephone (404) 639 - 2377.

Please refer to Announcement Number 560, when requesting information and submitting an application.

Copies of A Framework for Assessing the Effectiveness of Disease and Injury