

- AR-1 Human Subjects Requirements
- AR-2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
- AR-8 Public Health System Reporting Requirements
- AR-9 Paperwork Reduction Act Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2010
- AR-12 Lobbying Restrictions
- AR-13 Prohibition on Use of CDC Funds for Certain Gun Control Activities
- AR-14 Accounting System Requirements
- AR-15 Proof of Non-Profit Status
- AR-21 Small, Minority, and Women-Owned Business
- AR-22 Research Integrity
- AR-23 States and Faith-Based Organizations
- AR-24 Health Insurance Portability and Accountability Act Requirements
- AR-25 Release and Sharing of Data

Starting with the December 1, 2003, receipt date, all NCIPC funded investigators seeking more than \$250,000 in total costs in a single year are expected to include a plan describing how the final research data will be shared/released or explain why data sharing is not possible. Details on data sharing/release, including the timeliness and name of the project data steward, should be included in a brief paragraph immediately following the Research Plan Section of the PHS 398 form. References to data sharing/release may also be appropriate in other sections of the application (*e.g.*, background and significance, human subjects requirements, etc.) The content of the data sharing/release plan will vary, depending on the data being collected and how the investigator is planning to share the data. The data sharing/release plan will not count towards the application page limit and will not factor into the determination of scientific merit or priority scores. Investigators should seek guidance from their institutions, on issues related to institutional policies, local IRB rules, as well as local, state and Federal laws and regulations, including the Privacy Rule.

Further detail on the requirements for addressing data sharing in applications for NCIPC funding may be obtained by contacting NCIPC program staff or visiting the NCIPC Internet Web site at http://www.cdc.gov/ncipc/osp/sharing_policy.htm.

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at

the following Internet address: <http://www.access.gpo.gov/nara/cfr-table-search.html>.

3. Reporting

You must provide CDC with an original, plus two copies of the following reports:

1. Interim progress report, (PHS 2590, OMB Number 0925-0001, rev. 5/2001) no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Activities and Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
 - f. Measures of Effectiveness.
2. Financial status report, no more than 90 days after the end of the budget period.
3. Final financial and performance reports, no more than 90 days after the end of the project period.

At the completion of the project, the grant recipient will submit a brief (2500 to 5000 words) summary highlighting the findings and their implications for injury prevention programs, policies, *etc.*, that includes a plan for dissemination of the research findings. The results dissemination plan will include publications in peer-reviewed journals and other methodologies for sharing results with stakeholders outside of academic settings (*e.g.*, state and community groups, public health injury prevention practitioners).

These reports must be sent to the Grants Management Specialist listed in the "Agency Contacts" section of this announcement.

VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2700.

For scientific/research program technical assistance, contact: Linda Anne Valle, PhD, Prevention Development and Evaluation Branch, Division of Violence Prevention, National Center for Injury Prevention and Control, 4770 Buford Hwy, MS K-60, Atlanta, GA 30341, Telephone: 770-488-4297, E-mail: adv2@cdc.gov.

For questions about peer review, contact: Gwen Cattledge, Science Review Administrator, National Center

for Injury Prevention and Control, 4770 Buford Hwy, Mailstop K-02, Atlanta, GA 30341, Phone: 770-488-1430, E-mail: gxc8@cdc.gov.

For budget assistance, contact: Jim Masone, Grants Management (or Contract) Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2736, E-mail: zft2@cdc.gov.

VIII. Other Information

References

- Chaffin, M. (2001). Programs to prevent child abuse and neglect. *Newsletter of the Society of Pediatric Psychology*, 25(3), 6-7.
- Gomby, D. S., Culross, P. L., & Behrman, R. E. (1999). Home visiting: Recent program evaluations: Analysis and recommendations. *Future of Children*, 9(1), 4-26.
- Guide to Community Preventive Services. New findings prove early childhood home visitation prevents child maltreatment. Retrieved October 17, 2002 from www.thecommunityguide.org.
- Guterman, N. B. (1997). Early prevention of physical child abuse and neglect: Existing evidence and future directions. *Child Maltreatment*, 2, 12-34.
- MacLeod, J., & Nelson, G. (2000). Programs for the promotion of family wellness and the prevention of child maltreatment: A meta-analytic review. *Child Abuse & Neglect*, 24, 1127-1149.
- MacMillan, H. L., MacMillan, J. H., Offord, D. R., Griffith, L., & MacMillan, A. (1994). Primary prevention of child physical abuse and neglect: A critical review. Part I. *Journal of Child Psychology and Psychiatry*, 35, 835-856.
- Roberts, R. (1997). Preventing child abuse and neglect through home visiting: Informing practice with research. *The APSAC Advisor*, 10(1), 7-9.
- Thornton, T. N., Craft, C. A., Dahlberg, L. L., Lynch, B. S., Baer, K. (2000). *Best practices of youth violence prevention: A sourcebook for community action*. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.
- United States General Accounting Office, (1990). *Home visiting: A promising strategy for at-risk families*. (GAO/HRD Publication No. 90-83). Gaithersburg, MD: U.S. General Accounting Office.

Dated: November 24, 2003.

Edward Schultz,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 03-29788 Filed 11-28-03; 8:45 am]

BILLING CODE 4163-18-P