

FEDERAL RESERVE SYSTEM**Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are Engaged in Permissible Nonbanking Activities**

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y (12 CFR Part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. 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 the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than March 31, 2005.

A. Federal Reserve Bank of New York (Jay Bernstein, Bank Supervision Officer) 33 Liberty Street, New York, New York 10045-0001:

1. *HSH Nordbank*, AG, Hamburg, Germany; to engage *de novo* through NY Credit Real Estate Fund, L.P., and New York Credit Advisors LLC, a joint venture investment, in extending credit and servicing loans and acting as an investment or financial advisor, pursuant to sections 225.28(b)(1) and (b)(6) of Regulation Y.

Board of Governors of the Federal Reserve System, March 11, 2005.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 05-5270 Filed 3-17-05; 8:45 am]

BILLING CODE 6210-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Agency for Healthcare Research and Quality****Notice of Meeting**

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of a Health Care Policy and Research Special Emphasis Panel (SEP) meeting.

A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by the Agency for Healthcare Research and Quality (AHRQ), and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly-scheduled meetings and do not serve for fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

Substantial segments of the upcoming SEP meeting listed below will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications for Partnerships in Implementing Patient Safety (RFA-HS-05-012) are to be reviewed and discussed at this meeting. These discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory disclosure under the above-cited statutes.

SEP Meeting on: Partnerships in Implementing Patient Safety.

Date: April 6-8, 2005 (Open on April 6 from 2 p.m. to 3 p.m. and closed for the remainder of the meeting).

Place: John M. Eisenberg Building, AHRQ Conference Center, 540 Gaither Road, Rockville, Maryland 20850.

Contact Person: Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of this meeting should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, AHRQ, 540 Gaither Road, Room 2038, Rockville, Maryland 20850, Telephone (301) 427-1554.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: March 10, 2005.

Carolyn M. Clancy,

Director.

[FR Doc. 05-5334 Filed 3-16-05; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention****Cooperative Agreement With the Kenya Medical Research Institute (KEMRI); Notice of Intent To Fund Single Eligibility Award****A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2005 funds for a cooperative agreement program to:

1. To conduct field and laboratory research and implement public health programs on important human infectious diseases, with an emphasis on HIV/AIDS, malaria, emerging and other emerging and re-emerging infectious diseases as well as other identifiable public health problems.

2. To provide training for students and public health professionals in basic and applied public health research, public health program planning, implementation and evaluation and other related issues such as data collection, financial planning and management.

3. To strengthen the Kenya Medical Research Institute (KEMRI) institutional capacity to conduct research, plan, implement and evaluate public health programs, provide surveillance, and develop interventions as well as support national and regional infectious disease identification and control efforts.

4. To incorporate the results of research into operational disease prevention and control programs in the Republic of Kenya and ensure sharing of expertise and research findings with other nations.

The Catalog of Federal Domestic Assistance number for this program is 93.283.

B. Eligible Applicant

Assistance will be provided only to KEMRI. No other applications are solicited. KEMRI is the most appropriate and qualified agency to conduct the activities specified under this cooperative agreement because:

1. KEMRI is the only research organization in Kenya that possesses the requisite scientific and technical expertise, the infrastructure capacity and who has conducted malaria and

HIV research in areas of high morbidity (20 years for malaria and 10 years for HIV/AIDS). These combined attributes make them uniquely qualified as the only organization in Kenya capable of effectively conducting the research and public health program activities proposed for this cooperative agreement.

2. A major operational unit of KEMRI is located in an area of western Kenya with intense and perennial malaria transmission and where incidence and prevalence is very high, and thus is ideally located to evaluate approaches to preventing and controlling these public health problems.

3. KEMRI was established through the Science and Technology Act of the Republic of Kenya and has a Board of Management appointed by the Minister of Health which is responsible for overseeing all research and which has a well-developed secretariat to provide administrative and technical support to research services.

4. KEMRI has been collaborating with health agencies on priority infectious disease research for over 20 years on the grounds of KEMRI facilities in Nairobi, Kisumu and other locations in Kenya. KEMRI has experienced staff, equipment, and facilities to support the collaboration.

C. Funding

Approximately \$5,000,000 is available in FY 2005 to fund this award. It is expected that the award will begin on or before August 15, 2005, and will be made for a 12-month budget period within a project period of up to five years. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146. Telephone: 770-488-2700.

For program issues, contact: Ron Stoddard, Division of Parasitic Diseases, 4770 Buford Highway, Atlanta, GA 30341. Telephone: (770) 488-7707. E-mail: RStoddard@cdc.gov.

Dated: March 11, 2005.

William P. Nichols,

Director, Procurement and Grants Office,
Centers for Disease Control and Prevention.
[FR Doc. 05-5287 Filed 3-16-05; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Building Comprehensive Prevention Program Planning and Evaluation Capacity for Rape Prevention and Education Funded Programs

Announcement Type: New.

Funding Opportunity Number: RFA 05037.

Catalog of Federal Domestic Assistance Number: 93.136.

Key Dates:

Letter of Intent Deadline: April 18, 2005.

Application Deadline: May 16, 2005.

I. Funding Opportunity Description

Authority: This program is authorized under section 393B of the Public Health Service Act (42 U.S.C. section 280b).

Purpose: The Centers for Disease Control and Prevention (CDC) announces the availability of a fiscal year 2005 cooperative agreement to build comprehensive prevention program planning and evaluation capacity among selected Rape Prevention and Education (RPE) funded sexual violence prevention programs and to assess short-term and intermediate capacity building outcomes for each program. Prevention program planning and evaluation will be focused on the national Rape Prevention and Education Program logic model as well as comprehensive primary prevention strategies. In May 2004 CDC completed an evaluability assessment of the national RPE program. One of the key recommendations of the evaluability assessment is to build capacity for prevention program planning and evaluation among funded recipients.

Specific purposes of this funding are to:

1. Increase the capacity of selected Rape Prevention and Education funded programs to engage in comprehensive prevention program planning for their state Rape Prevention and Education Program.
2. Increase the capacity of selected Rape Prevention and Education funded programs to develop and implement an evaluation of their state Rape Prevention and Education Program.
3. Increase the capacity of selected Rape Prevention and Education funded programs to sustain program planning and evaluation efforts after this cooperative agreement has ended.
4. Assess short-term and intermediate program planning and evaluation capacity building outcomes for each program.

5. Disseminate lessons learned to assist sexual violence prevention practitioners in programmatic decision making and evaluation.

For the purposes of this program announcement the following definition applies:

Sexual Violence: Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home or work (Jewkes, R., Sen, P. and Garcia-Moreno, C., 2002).

This program addresses the "Healthy People 2010" focus area(s) of Injury and Violence Prevention.

Measurable outcomes of the program will be in alignment with the following performance goal for the National Center for Injury Prevention and Control (NCIPC):

Increase the capacity of injury prevention and control programs to address the prevention of injuries and violence.

This announcement is only for non-research activities supported by CDC/ATSDR. If research is proposed, the application will not be reviewed. For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/ads/opspoll1.htm>.

Activities:

Awardee activities for this project are as follows:

- a. Maintain current or increased level of program activities and staffing.
- b. Convene a state prevention team that includes agencies, organizations and individuals who can inform the program planning and evaluation process.
- c. Collaborate with CDC, CDC identified consultant(s) and the state prevention team in developing a comprehensive prevention program and evaluation plan for their state Rape Prevention and Education Program.
- d. Contract with an in-state evaluator to assist the state prevention team in comprehensive program planning and evaluation efforts. The evaluator should operate from an empowerment evaluation framework to increase state capacity regarding comprehensive program planning and evaluation. The evaluator is expected to attend program planning and evaluation trainings provided by CDC and CDC identified consultant(s). The evaluator should be hired, or an internal evaluator identified, by March 2006.
- e. Collaborate with CDC, the CDC identified consultant(s), the in-state