

Phase	Number of respondents	Number of responses per respondent	Average time burden (hours) per response	Total burden (hours)
Pilot Study	375	1	30/60	187.5
Field Study	2,880	3	30/60	4,320
Total				4,867.5

Dated: December 18, 2000.

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Planning and Evaluation, Centers for Disease
Control and Prevention, (CDC).*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-13-01]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these

requests, call the CDC Reports Clearance Officer at (404) 639-7090. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

Nursing Homes' Access to Influenza Vaccine and Use of Rapid Influenza Tests and Antivirals—New—National Center for Infectious Diseases (NCID)—Uncontrolled nursing home influenza outbreaks can result in illness in ≥ 10 percent of residents. Vaccine is the primary means to prevent influenza and its complications. However, outbreaks can occur despite high vaccination levels. The use of rapid diagnostic tests and the timely administration of antiviral medications can lessen the impact of influenza outbreaks. In 1998, a study was conducted among nursing

homes in nine states to determine the use of rimantadine. Since that time, new rapid diagnostic tests and neuraminidase inhibitor antiviral medications have been approved. In addition, a substantial delay in the distribution of influenza vaccine and a possible vaccine shortage are anticipated for the 2000-01 influenza season.

The purpose of this study is to assess nursing homes' access to vaccine in 2000-01, the use of rapid influenza diagnostic tests, and the influenza inhibitor antivirals. A survey will be mailed to sample of randomly selected nursing homes in the same nine states surveyed in 1998. The results will be used to evaluate resident and staff vaccination levels and the use of rapid influenza tests and antiviral medications. We will also assess the relationship between access to vaccine and the concurrence of outbreaks. The total annual burden hours are 573.

Respondents	Number of respondents	Number of responses per respondent	Avg. burden/ respondents (in hrs)
NH Infection Control Nurse—mailed survey	1108	1	20/60
NH Infection Control Nurse—Validation study	204	1	1

Dated: December 18, 2000.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control And Prevention

[60Day-01-13]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the

Paperwork reduction Act of 1995, the Center for Disease Control and Prevention is providing opportunity for public comment on proposed data collection projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639-7090.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the

burden of the collection of information on respondents, including through the use of automated collection techniques for other forms of information technology. Send comments to Anne O'Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

Tailoring NIOSH Messages to Individual Health Construal —NEW— National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC). The mission of the the National Institute for Occupational Safety and Health is to promote safety and health at work for all people through research and prevention.

The overall goal of the current project is to examine the effectiveness of tailoring NIOSH web-based communications to the psychological characteristics of the individuals who receive the communications. Typically, NIOSH publications informing at-risk workers about health hazards and safety recommendations are distributed by mail using a printed format. However, the growing use of computers opens the door to a new format for distributing health and safety information to workers: communication of health information via the Web. Importantly, web-based communication makes it possible to tailor health information to particular users. Past research has demonstrated that health-related behavior may be construed positively by an individual, in terms of wellness, or negatively, in terms of illness. The current project tests the effectiveness of message tailoring on this dimension.

This project will examine the effectiveness of tailoring a web communication based on the NIOSH Alert "Preventing Needlestick Injuries in Health Care Settings" to the user's personal construal of this occupational safety issue in terms of wellness or

illness. Over 8 million workers in the United States are employed in health care settings, and it is estimated that between 600,000–800,000 needlestick injuries occur on an annual basis in these settings, mostly involving nurses [Henry and Campbell 1995; EPINet 1999]. These injuries pose both physical and emotional threats to health care workers, as serious infections from bloodborne pathogens may result. Through the use of message tailoring, the proposed project aims to increase health care workers' compliance with the safety recommendation provided in the NIOSH Alert "Preventing Needlestick Injuries in Health Care Settings."

In study 1, attitudinal predictors of needlestick injury prevention behaviors will be assessed for registered nurses who view this issue as a health maintenance issue versus an illness prevention issue. This data will be obtained from a sample of 500 registered nurses who will be asked to complete a mail survey assessing their attitudes and behaviors with regard to preventing needlestick injuries. In a second study, the NIOSH Alert "Preventing Needlestick Injuries in Health Care

Settings" will be modified from the original printed brochure to a web-based format. Two formats of this web-based document will be created that are tailored to nurses who construe the issue of needlestick injuries either positively (in terms of wellness) or negatively (in terms of illness). The impact of tailoring the message format to the nurse's construal of the issue of needlestick injury will be examined in a laboratory setting where 300 participants will indicate whether they construe this issue in terms of maintaining wellness (positively) or in terms of illness prevention (negatively), and will then be randomly assigned to gain or loss frame web communications. The impact of the tailored messages on participants' attitudes and behavioral intentions with regard to needle safety will be assessed.

The results of this project should provide NIOSH with information about how to develop effective Web-based communication strategies. This should have the consequence of enhancing occupational safety and health attitudes and behaviors among at-risk workers. The total cost to respondents is \$8000.

Respondents	No. of respondents	No. of responses/ respondent	Avg. burden per response	Total burden
Registered Nurses	800	1	30/60	400

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Chuck Gollmar,

*Deputy Associate Director for Policy,
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 01013]

Grants for Acute Care, Rehabilitation and Disability Prevention Research; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces that grant applications are being accepted for Injury Prevention and Control Research Grants for fiscal year (FY) 2001. This announcement is related to the Healthy

People 2010 focus areas of Injury and Violence Prevention.

The purposes of this program announcement are to:

1. Solicit research applications that address the priorities reflected under the heading, "Programmatic Interests."
2. Build the scientific base for the prevention of injuries, disabilities, and deaths.
3. Encourage professionals from a wide spectrum of disciplines such as engineering, bioengineering, medicine, health care, public health, health care research, behavioral and social sciences, and others, to undertake research to prevent and control injuries.

B. Eligible Applicants

Applications may be submitted by public and private nonprofit and for-profit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit and for-profit organizations, State and local governments or their bona fide agents, and federally recognized Indian tribal

governments, Indian tribes, or Indian tribal organizations, and small, minority, and women-owned businesses.

Current holders of CDC R49 Research grants and R49 Injury Control Research Center (ICRC) grants are eligible to apply for supplemental funding to enhance or expand existing projects or to conduct one year pilot studies. Grantees currently funded under announcements 00024 (Grants for Injury Control Training and Demonstration Center) and 00043 (Grants for National Academic Centers of Excellence on Youth Violence Prevention) are not eligible to apply for supplements.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan or any other form.

Applications that are incomplete or non-responsive to the below requirements will be returned to the applicant without further consideration.