

*(Priority consideration will be given to Registered Nurses employed by the Indian Health Service; in a program assisted under a contract entered into under the Indian Self-Determination Act; or in a program assisted under title V of the Indian Health Care Improvement Act.)

Q. Optometry.

R. Para-Optometric.

S. Pharmacy: B.S.

T. Physician Assistant: B.S.

U. Physical Therapy.

V. Podiatry: D.P.M.

W. Public Health: M.P.H. only.

(Applicants must be enrolled or accepted in a school of public health in specialty areas such as Dietetics and Community Development in health).

X. Public Health Nutrition: Masters level only.

Y. Radiologic Technology: Associate and B.S.

Z. Respiratory Therapy: Associate.

AA. Sonography.

Interested individuals are reminded that the list of eligible health and allied health professions is effective for the applicants for the 2 academic years covered by this standing announcement. These priorities will remain in effect until superseded.

Dated: February 7, 1995.

Michael H. Trujillo,

Assistant Surgeon General, Director.

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BILLING CODE 4160-16-M

Health Resources and Services Administration

Federal Financial Assistance for Rural Regional Trauma and Emergency Medical Services System Demonstration Project in South Central Florida

AGENCY: Health Resources and Services Administration, PHS.

ACTION: Notice of availability of funds.

SUMMARY: The Office of Rural Health Policy, Health Resources and Services Administration (HRSA), Public Health Service, Department of Health and Human Services, announces the availability of funds in Fiscal Year (FY) 1995 for a grant to support the development of a rural regional Trauma and Emergency Medical Services (EMS) System in South Central Florida for a one year project period. The successful applicant will develop a plan to integrate existing rural emergency services (EMS), local community hospitals, a metropolitan tertiary care

center/level I trauma center and its medical helicopter to develop a regionalized system of care. This project is intended to serve as a model for other rural, underserved areas of the United States.

Authority

The award will be made from funds appropriated under Pub. L. 103-333 (HHS Appropriation Act for FY 1995). The Senate Committee on Appropriations Report 103-318, included a set-aside to support the Rural Regional Trauma and EMS System Demonstration Project under the FY 1995 appropriations to support Outreach grants. Grants for these projects are authorized under Section 301 of the Public Health Service Act.

Eligible Applicants

Justification for Other Than Full and Open Competition

In the Senate Committee on Appropriations Report 103-318, the Senate directed this demonstration project grant award to be made only to an entity located in South Central Florida. Specifically, the eligible applicant must be located either in an urban-based, level I trauma hospital in Florida, or in one of the Florida counties comprising the demonstration grant service area (Okeechobee, Highlands, Hendry, DeSoto, Glades, or Hardee County). The applicant can be a public or private, not-for profit entity. The Department agrees that this set-aside will further program objectives.

Funds Available

An estimated total award of up to \$600,000 will be available to support a single grant project for a one-year grant period.

Cost Participation

Cost participation serves as an indicator of community and institutional support for the project and the likelihood that the project will continue after Federal grant support has ended. The successful applicant must share in the project costs by providing equipment, personnel, building space, indirect costs, other in-kind contributions, or cash.

DATES: Applications for the program must be received by the close of business on April 25, 1995. Completed applications must be sent to the Bureau of Primary Health Care at the address shown below. Applications shall be considered as meeting the deadline if they are either (1) received on or before the deadline date; or (2) postmarked on or before the deadline date and received

in time for orderly processing. Applicants must obtain a legible dated receipt from a commercial carrier or the U.S. Postal Service in lieu of a postmark. Private metered postmarks will not be acceptable as proof of timely mailing. Late applications will be returned to the sender.

ADDRESSES: Requests for grant application kits should be directed to Lt. Colleen Hennessy, Program Management, Office of Rural Health Policy, 5600 Fishers Lane, Room 9-05, Rockville, Maryland, 20857, telephone: 301/443-0835. Completed applications and requests for additional information regarding business or fiscal issues should be directed to Ms. Opal McCarthy, Grants Management, at the Bureau of Primary Health Care, East West Building, 11th Floor, 4350 East West Highway, Bethesda, Maryland 20857, telephone: (301) 594-4260. The standard application form and general instructions for completing applications (Form PHS 5161-1, OMB 0937-0189) have been approved by the Office of Management and Budget (OMB).

FOR FURTHER INFORMATION CONTACT:

Requests of a programmatic nature should be directed to Lt. Colleen Hennessy, at the Office of Rural Health Policy, 5600 Fishers Lane, Room 9-05, Rockville, Maryland, 20857, telephone: 301/443-0835.

SUPPLEMENTARY INFORMATION:

Program Objectives

The purpose of the Rural Regional Trauma and EMS System Demonstration Project is to support the development of a regional trauma and EMS system to serve rural communities. The successful applicant will integrate existing rural prehospital providers (EMS), local community hospitals, and rural community providers, with a metropolitan tertiary care center/level I trauma center and its aeromedical transport services, into a services network that is capable of improving emergency services to rural populations. Specifically, these rural populations are located in the Florida counties of Okeechobee, Highlands, Hendry, DeSoto, Glades, and Hardee; and are comprised of medically underserved populations, such as migrant laborers and Native Americans. Currently these populations do not receive timely, comprehensive trauma care.

Consistent with the requirements of the Rural Health Outreach Program, under which this demonstration project is funded, all qualified applicants must develop consortia of three or more participatory entities, each of which must play an active contributory role in