

inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether consummation of the proposal can "reasonably be expected to produce benefits to the public, such as greater convenience, increased competition, or gains in efficiency, that outweigh possible adverse effects, such as undue concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices." Any request for a hearing on this question must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of a hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal.

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 February 23, 1989.

A. Federal Reserve Bank of New York (William L. Rutledge, Vice President) 33 Liberty Street, New York, New York 10045:

1. *National Westminster Bank PLC*, London, England; *NatWest Holdings, Inc.*, Wilmington, Delaware; and *National Westminster Bancorp, Inc.*, Wilmington, Delaware; to engage *de novo* through its subsidiary, *NatWest Equity Corporation*, New York, New York, in making, acquiring, or servicing loans or other extensions of credit for the subsidiary's account or for the account of others such as would be made by a commercial finance company pursuant to § 225.25(b)(1) of the Board's Regulation Y. Comments on this application must be received by February 21, 1989.

B. Federal Reserve Bank of Cleveland (John J. Wixted, Jr., Vice President) 1455 East Sixth Street, Cleveland, Ohio 44101:

1. *Society Corporation*, Cleveland, Ohio; to engage *de novo* through a proposed wholly-owned subsidiary, *Society Community Development Corporation*, in certain loan and investment activities pursuant to § 225.25(b)(1); and community development related activities pursuant to § 225.25(b)(6) of the Board's Regulation Y.

C. Federal Reserve Bank of Chicago (David S. Epstein, Vice President) 230 South LaSalle Street, Chicago, Illinois 60690:

1. *Hasten Bancorp*, Indianapolis, Indiana; to engage *de novo* through its subsidiary, *Hasten Financial Services*, Indianapolis, Indiana, in securities

brokerage activities pursuant to § 225.25(b)(15) of the Board's Regulation Y.

Board of Governors of the Federal Reserve System, January 31, 1989.

Jennifer J. Johnson,

Associate Secretary of the Board.

[FR Doc. 89-2624 Filed 2-3-89; 8:45 am]

BILLING CODE 6210-01-M

North Central Investment Co.; Formation of, Acquisition by, or Merger of Bank Holding Companies; and Acquisition of Nonbanking Company

The company listed in this notice has applied under § 225.14 of the Board's Regulation Y (12 CFR 225.14) for the Board's approval under section 3 of the Bank Holding Company Act (12 U.S.C. 1842) to become a bank holding company or to acquire voting securities of a bank or bank holding company. The listed company has also applied under § 225.23(a)(2) of Regulation Y (12 CFR 225.23(a)(2)) for the Board's approval under section 4(c)(8) of the Bank Holding Company Act (12 U.S.C. 1843 (c)(8)) and § 225.21(a) of Regulation Y (12 CFR 225.21(a)) to acquire or control voting securities or assets of a company engaged in a nonbanking activity that is listed in § 225.25 of Regulation Y as closely related to banking and permissible for bank holding companies, or to engage in such an activity. Unless otherwise noted, these activities will be conducted throughout the United States.

The application is available for immediate inspection at the Federal Reserve Bank indicated. Once the application has been accepted for processing, it will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether consummation of the proposal can "reasonably be expected to produce benefits to the public, such as greater convenience, increased competition, or gains in efficiency, that outweigh possible adverse effects, such as undue concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices." Any request for a hearing on this question must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal.

Comments regarding the application must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than February 23, 1989.

A. Federal Reserve Bank of Chicago (David S. Epstein, Vice President), 230 South LaSalle Street, Chicago, Illinois 60690:

1. *North Central Investment Co.*, Corwith, Iowa; to become a bank holding company by acquiring 83.2 percent of the voting shares of *Farmers State Bank*, Grafton, Iowa.

In connection with this application, Applicant also proposes to acquire *North Central Insurance Services*, Corwith, Iowa, and thereby engage in the sale of insurance primarily in crop hail and multi peril products in a town of approximately 270 people pursuant to § 225.25(b)(8)(iii) of the Board's Regulation Y. These activities will be conducted in the town of Grafton, Iowa, and the surrounding area.

Board of Governors of the Federal Reserve System, January 31, 1989.

Jennifer J. Johnson,

Associate Secretary of the Board.

[FR Doc. 89-2625 Filed 2-3-89; 8:45 am]

BILLING CODE 6210-01-M

GENERAL SERVICES ADMINISTRATION

Intent To Prepare a Draft Environmental Impact Statement and Notice of Project Scoping Public Hearing

Notice is hereby given that the General Services Administration (GSA) intends to prepare a Draft Environmental Impact Statement (DEIS) documenting the assessment of effects related to development of a new Federal Courthouse and new Federal/Municipal Office Building within the Foley Square area, which would replace presently leased governmental office space in Manhattan. The proposed projects would be contained on sites bounded by Worth and Pearl Streets between the New York County Courthouse and Chatham Towers, and the block bounded by Broadway, Elk Street, Duane Street and Reade Street. Also evaluated will be a "No-Action" alternative in which affected governmental operations would remain in leased office space.

In conjunction with this intention to prepare a DEIS, GSA will conduct a project scoping public hearing on February 22, 1989 at 6:00 p.m. at the U.S. Court of International Trade-Ceremonial Courtroom, 1 Federal Plaza, Manhattan.

The purpose of this hearing is to obtain public comments leading to the preparation of the aforementioned DEIS for the new Federal Courthouse, Federal/Municipal Office Building, and alternatives. Comments regarding the proposed project will be accepted at the hearing from community groups, organizations and individuals, and will be limited to 5 minutes per presenter. Written comments will also be accepted at the hearing. It is suggested that organizations designate a spokesperson to present the comments to expedite the hearing process: Mr. Peter A. Sneed, General Services Administration, Region 2, Public Buildings Service, Jacob K. Javits Federal Building, Rm 1605, New York, NY 10278, (212) 264-3581.

Mr. Peter Sneed,

Director Planning Staff GSA, Region 2, Public Building Service.

January 31, 1989.

[FR Doc. 89-2632 Filed 2-3-89; 8:45 am]

BILLING CODE 6820-23-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary for Health; the Health Omnibus Programs Extension Act of 1988, Public Law 100-607; Delegation of Authority

Notice is hereby given that I have delegated to the Assistant Secretary for Health, with authority to redelegate, all the authorities vested in the Secretary of Health and Human Services as follows:

1. Title XXIII of the Public Health Service Act, "Research With Respect to Acquired Immune Deficiency Syndrome," (42 U.S.C. 300cc *et seq.*), as amended hereafter. (Section 201 of Pub. L. 100-607.)

2. Title XXIV of the Public Health Service Act, "Health Services With Respect to Acquired Immune Deficiency Syndrome," (42 U.S.C. 300dd *et seq.*), as amended hereafter. (Section 211 of Pub. L. 100-607.)

3. Title XXV of the Public Health Service Act, "Prevention of Acquired Immune Deficiency Syndrome," 42 U.S.C. 300ee *et seq.*, as amended hereafter. (Section 221 of Pub. L. 100-607.)

4. Section 203(a) of Title II, "Programs With Respect to Acquired Immune Deficiency Syndrome," of Pub. L. 100-607 (42 U.S.C. 300cc note), as amended hereafter.

5. Subtitle E of Title II, "Programs With Respect to Acquired Immune Deficiency Syndrome," of Pub. L. 100-

607 (42 U.S.C. 300ee-1-4), as amended hereafter.

6. Section 631 of Title VI, "Health Professions Reauthorization Act of 1988," of Pub. L. 100-607 (42 U.S.C. 295g-8 note), as amended hereafter.

7. Subtitle D of Title VII, "Nursing Shortage Reduction and Education Extension Act of 1988," of Pub. L. 100-607, as amended hereafter.

This delegation excluded the authority to promulgate regulations, to submit reports to the Congress, to establish advisory committees or national commissions, and to appoint members to such committees or commissions.

This delegation became effective upon the date of signature.

Date: January 27, 1989.

Don M. Newman,

Acting Secretary.

[FR Doc. 89-2639 Filed 2-3-89; 8:45 am]

BILLING CODE 4160-17-M

Food and Drug Administration

[Docket No. 89F-0011]

National Aeronautics and Space Administration; Filing of Food Additive Petition

AGENCY: Food and Drug Administration.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that the National Aeronautics and Space Administration has filed a petition proposing that the food additive regulations be amended to provide for the safe use of sources of radiation to process beef steaks for use in space flight programs.

FOR FURTHER INFORMATION CONTACT:

George H. Pauli, Center for Food Safety and Applied Nutrition (HFF-330), Food and Drug Administration, 200 C Street SW., Washington, DC 20204, 202-472-5740.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5), 72 Stat. 1786 (21 U.S.C. 348(b)(5))), notice is given that a petition (FAP 9M4125) has been filed by the National Aeronautics and Space Administration, Washington, DC 20546, proposing that the food additive regulations be amended in Part 179—Irradiation in the Production, Processing and Handling of Food (21 CFR Part 179) to provide for the safe use of sources of radiation to process beef steaks for use in space flight programs.

The potential environmental impact of this action is being reviewed. If the agency finds that an environmental impact statement is not required and

this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the **Federal Register** in accordance with 21 CFR 25.40(c).

Dated: January 27, 1989.

Richard J. Ronk,

Acting Director, Center for Food Safety and Applied Nutrition.

[FR Doc. 89-2619 Filed 2-3-89; 8:45 am]

BILLING CODE 4160-01-M

Health Resources and Services Administration

Availability of Funds for Community and Migrant Health Centers Activities Including Comprehensive Perinatal Care Program

AGENCY: Health Resources and Services Administration HHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) is announcing, for Fiscal Year (FY) 1989: (1) The availability of approximately \$414.8 million for community health center (CHC) activities and approximately \$45.6 million for migrant health center (MHC) activities funded under sections 330 and 329 of the Public Health Service Act (42 U.S.C. 254c and 254b, respectively); (2) the availability of approximately \$20.5 million under sections 329 and 330 for C/MHCs to undertake comprehensive perinatal care programs designed to reduce infant mortality; and (3) the criteria that will be used in evaluating applications for FY 1989 funding. Within the aforementioned section 330 funding, the following will occur: (1) Funds will be provided to maintain or expand the provision of essential services by existing grantees that are performing according to program requirements; (2) approximately \$20 million will be provided to enhance center efforts to retain and recruit essential health professionals, especially primary care physicians; (3) approximately \$3 million will be provided to award grants to provide technical and other non-financial assistance under section 330(f)(1) of the Act; and (4) limited funds will be provided to enhance/improve the range of services at existing access points and to support essential capital improvement programs. No new centers will be funded during this fiscal year.

DATE: Applications for funds to provide essential services by existing grantees are due in the appropriate Public Health Service Regional Office 120 days prior to

the expiration of the current grant award unless otherwise specified. Proposals for the comprehensive perinatal care program funds must be received no later than May 1, 1989. Proposals for grants to provide technical and other non-financial assistance under section 330(f)(1) must be received no later than June 1, 1989. All applications must be delivered to the contact designated in this announcement or be postmarked by the applicable deadline to be considered timely. Any application which does not meet the deadline date will be returned to the applicant.

FOR FURTHER INFORMATION CONTACT: Information on current services grant funding levels may be obtained from, and completed applications should be sent to, the appropriate Regional Grants Management Officer (see Appendix). For general information about the availability of funds, contact Richard C. Bohrer, (301) 443-2260. For information on funding for the comprehensive perinatal care program, contact Joan Holloway, (301) 443-8134.

SUPPLEMENTARY INFORMATION: The Community and Migrant Health Centers Amendments of 1988, Pub. L. 100-386, contains a provision that only the central office of the Health Resources and Services Administration may enter into, or issue approvals with respect to, grants and contracts awarded under sections 329 and 330 of the Public Health Service Act. The intent of this requirement is to ensure that national program goals and requirements are consistently and uniformly applied. Regional Offices are sending application kits to all grantees which incorporate new program requirements arising from recent changes in the program's authorizing legislation.

Criteria for Evaluating Competing and Noncompeting C/MHC Applications

When determining whether Federal support will be made available, the Department will review C/MHCs for compliance with standard criteria stipulated in the regulations (42 CFR Part 51c for CHC and Part 56 for MHC activities) and their use of previously awarded sections 330 and 329 funds. This year's reviews will emphasize need and community impact, health services, management and finance, and governance expectations as set out below:

(a) Need and Community Impact (42 CFR 51c.104(b), 51c.305(b) and 56.104(b))

C/MHCs must demonstrate the need for services in their communities based on geographic, demographic, and

economic factors, resources in the area, and health status. Within the defined community a C/MHC must target its resources on the neediest populations. Centers must describe the needs of their user population in terms of health, demographic, and economic status. With respect to the service area, existing centers must describe briefly the unique characteristics of their areas, focusing on location of major service providers, barriers to care, and significant changes in the area. With respect to the user population, centers must document poverty, demographics, major health problems defined in diagnostic terms, and special needs of major population groups for whom the centers are the primary care providers, including migrant and seasonal farmworkers, perinatal patients, the elderly, the homeless, HIV infected individuals, and substance abusers.

(b) Health Services (42 CFR 51c.102(c)(1)(i), 51c.303(a) and (p), 56.303(a) and (p), 56.603(a) and (n), and 56.102(g)(1)(i))

C/MHCs must ensure that basic primary care services, coordination of other levels of care, and support services appropriate to defined needs are available and accessible. They must have qualified providers with a clinical director responsible for providing clinical leadership and supervision of the health care staff and must have a clinical management system that assures quality and continuity of care. The center must demonstrate the integration of needs, the health care plan, staffing, budgeting and clinical management. Each C/MHC must have a Health Care Plan that describes the clinical program, based on the problems identified in the documentation of the needs of the user population, and includes measurable objectives appropriate to the five stages of life (perinatal, pediatric, adolescent, adult, and geriatric) incorporating health promotion/disease prevention activities. The Plan must describe clinical methods, strategies, and protocols to be used to meet the stated objectives and a program to measure the extent to which the objectives are accomplished. Further, the Plan must be consistent with the policies of the center's board of directors and with its available resources. Each C/MHC must have Principles of Practice designed to implement its board's policies and maximize acceptability and effective utilization of services.

(c) Management and Finance (42 CFR 51c.303(g), 51c.303 (r) and (s), and 56.305(a)(3))

C/MHCs must have appropriate leadership and management structures to enable them to operate efficiently and effectively. They must also have financial systems to maintain internal control, ensure stewardship of Federal funds, maximize non-Federal resources, and maintain solvency. With respect to the management structure, appropriateness of the organizational structure, staffing arrangements, a functional management process, and supporting data systems will be reviewed and considered. Annual audits, comparisons of revenues and expenditures and other administrative indices such as productivity will be reviewed in evaluating center performance.

(d) Governance (42 CFR 51c.304 and 56.304)

A C/MHC must be governed by a board which represents the community served, has a user majority, and functions fully and effectively in its fiduciary role. Appropriateness of the board's size, composition, committee structure, performance, and selection process will be reviewed and evaluated.

Any proposed increase in the required level of grant support (other than cost of living adjustments, inflation, and malpractice premium increases) must be accompanied by a justification describing the requirements for a particular activity which could be considered and funded separately. Priority for funding will be given to proposals to support physician retention and recruitment strategies, and limited funding will be available for other purposes such as capital expenditures, improvements in the delivery of essential services, and the expansion of service capacity. Eligibility and Criteria for Evaluating Applications to Provide Technical and Other Non-Financial Assistance under section 330(f)(1):

Eligibility to receive funds under this category is based on the provisions of section 330(f)(1) of the PHS Act, authorizing awards to entities which will provide a broad range of technical assistance to C/MHCs. A full explanation of the basis on which applications will be reviewed is included in the *Federal Register* Notice, Volume 50, July 8, 1985, page 27851, which will also be included in application kits. In addition, the performance of grant recipients in using previously awarded section 330(f)(1) funds will be considered in determining

whether Federal support will be made available to continuation applicants.

Criteria for Evaluating Applications for the Comprehensive Perinatal Care Program

The following will be considered when each proposal is reviewed and evaluated:

- Evidence that the center has demonstrated the ability to conduct directly or through contract or other specific arrangements an effective perinatal care program serving high-risk women, infants, and children in a manner that assures continuity of care.

- The extent to which the center is part of a system of care within its own community and/or region and has established linkages with referral sources and relevant organizations to supplement its own capacity. A center's ongoing objective should be to increase patient access to services that the State MCH program provides and to State Medicaid benefits, including those available under the Omnibus Budget Reconciliation Acts of 1986 and 1987.

- The extent to which the center has documented the continued requirement for perinatal services by residents of its community. This should include an assessment of the utilization of services for perinatal and infant care by center users during the previous calendar year. The center should demonstrate its knowledge of other resources available in its community, region, and State to serve at-risk, low income pregnant women and infants, and the extent to which these other providers are serving this population.

- The adequacy and feasibility of the health care plan and new or expanded efforts proposed to meet the needs of the population and to improve pregnancy outcomes by reducing the incidence of infant mortality and morbidity.

Particular attention will be focused on the applicant's ability to improve access to perinatal care while integrating a case management approach into overall patient care.

- The appropriateness of the proposed budget for this initiative.

- The adequacy of the center's plan to evaluate the results of this activity in terms of improved health status and the measurable objectives identified in the health care plan.

Executive Order 12372

All grants to be awarded under this notice are subject to the provisions of Executive Order 12372, as implemented by 45 CFR Part 100, which allows States the option of setting up a system for reviewing applications from within their States for assistance under certain

Federal programs. The application packages to be made available by DHHS (standard DHHS Form No. 424 which has been approved under OMB Control No. 0348-0006) will contain a listing of States which have chosen to set up such a review system and will provide a point of contact in the States for that review. Applicants are to contact their State single point of contact and follow their instructions for the review of applications.

In the OMB Catalog of Federal Domestic Assistance, the Community Health Center program is listed as Number 13.224; the Migrant Health Center program is Number 13.246; and the Technical and Other Non-Financial Assistance to Community Health Centers is Number 13.129.

Dated: December 15, 1988.

John H. Kelso,

Acting Administrator.

Appendix—Regional Grants Management Officers

Mary O'Brien, DHHS-Region I, John F. Kennedy Federal Building, Boston, MA 02203, (617) 565-1482

Thomas Butler, DHHS-Region II, 26 Federal Plaza, New York, NY 10278, (212) 264-4496
Walter H. Ihle, Jr., DHHS-Region III, P.O. Box 13716, 3535 Market Street, Philadelphia, PA 10101, (215) 596-6653

Wayne Cutchens, DHHS-Region IV, 101 Marietta Tower, Room 1106, Atlanta, GA 30323, (404) 331-2597

Lawrence Poole, DHHS-Region V, 300 South Wacker Drive, Chicago, IL 60606, (312) 353-8700

Frank Cantu, DHHS-Region VI, 1200 Main Tower Building, Dallas, TX 75202, (214) 767-3885

Hollis Hensley, DHHS-Region VII, 601 East 12th Street, Room 501, Kansas City, MO 64106, (816) 426-5841

Jerry F. Wheeler, DHHS-Region VIII, 1961 Stout Street, Denver, CO 80294, (303) 884-4461

Alan Harris, DHHS-Region IX, 50 United Nations Plaza, San Francisco, CA 94102, (415) 556-2595

Neal Adams, DHHS-Region X, 2201 Sixth Avenue, Mail Stop RX 20, Seattle, WA 98121, (206) 442-7997

[FR Doc. 89-2667 Filed 2-3-89; 8:45 am]

BILLING CODE 4160-15-M

National Institutes of Health

National Cancer Institute; Meeting (Division of Cancer Treatment Board of Scientific Counselors)

Pursuant to Pub. L. 92-463, notice is hereby given of the meeting of the Board of Scientific Counselors, DCT, National Cancer Institute, National Institutes of Health, February 13-14, 1989, Building 31C, Conference Room 10, 9000

Rockville Pike, Bethesda, Maryland 20892.

This meeting will be open to the public on February 13 from 8:30 a.m. to approximately 5 p.m., and again on February 14 from 8 a.m. until adjournment, to review program plans, contract recompetitions and budget for the DCT program. In addition, there will be scientific reviews by several programs in the Division. Attendance by the public will be limited to space available.

In accordance with the provisions set forth in sec. 552b(c)(6), Title 5, U.S.C. and sec. 10(d) of Pub. L. 92-463, the meeting will be closed to the public on February 13 from 5 p.m. to approximately 6 p.m., for the review, discussion and evaluation of individual programs and projects conducted by the National Institute of Health, including consideration of personnel qualifications and performance, the competence of individual investigators, and similar items, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Mrs. Winifred Lumsden, Committee Management Officer, National Cancer Institute, Building 31, Room 10A06, National Institutes of Health, Bethesda, Maryland 20892 (301-496-5708) will provide summaries of the meeting and rosters of committee members upon request.

Dr. Bruce A. Chabner, Director, Division of Cancer Treatment, National Cancer Institute, Building 31, Room 3A52, National Institutes of Health, Bethesda, Maryland 20892 (301-496-4291) will furnish substantive program information.

Dated January 25, 1989.

Betty J. Beveridge,

Committee Management Officer, NIH.

[FR Doc. 89-2669 Filed 2-3-89; 8:45 am]

BILLING CODE 4140-01-M

National Cancer Institute; Amended Notice of Meeting

An amendment is hereby given to the notice of the National Cancer Advisory Board meeting which was published in the Federal Register (54 FR 3857) on January 26, 1989.

An additional reason for closing the morning session of February 7 is that the presentation involves data that may include incomplete, preliminary and unpublished research findings which may involve commercially valuable information which is privileged and confidential.