

public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institute of Allergy and Infectious Diseases (NIAID), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, *OIRA_submission@omb.eop.gov* or by fax to 202-395-6974, Attention: NIH Desk Officer.

DATES: Comment Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection

plans and instruments, or request more information on the proposed project, contact: Ms. Dione Washington, Health Science Policy Analyst, Office of Strategic Planning, Initiative Development and Analysis, 5601 Fishers Lane, Rockville, Maryland 20892, or call a non-toll-free number 240 669 2100 or Email your request, including your address to *washingtondi@niaid.nih.gov*. Formal requests for additional plans and instruments must be requested in writing. Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery (NIAID), 0925-0668, Expiration Date 1/31/2016, EXTENSION, National Institute of Allergy and Infectious Diseases (NIAID).

Need and Use of Information Collection: There are no changes being requested for this submission. The proposed information collection activity provides a means to garner qualitative customer and stakeholder feedback in an efficient, timely manner, in

accordance with the Administration's commitment to improving service delivery. By qualitative feedback we mean information that provides useful insights on perceptions and opinions, but are not statistical surveys that yield quantitative results that can be generalized to the population of study. This feedback will provide information about the NIAID's customer or stakeholder perceptions, experiences and expectations, provide an early warning of issues with service, or focus attention on areas where communication, training or changes in operations might improve delivery of products or services. These collections will allow for ongoing, collaborative and actionable communications between the NIAID and its customers and stakeholders. It will also allow feedback to contribute directly to the improvement of program management.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 16,100.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of collection	Number of respondents	Annual frequency per response	Hours per response	Total hours
Estimated Annual Reporting Burden				
Customer satisfaction surveys	25,000	1	30/60	12,500
In-Depth Interviews (IDIs) or Small Discussion Groups	500	1	90/60	750
Individual Brief Interviews	200	1	15/60	50
Focus Groups	1,000	1	2	2,000
Pilot testing surveys	200	1	30/60	100
Conferences and Training Pre- and Post-surveys	1,000	1	30/60	500
Website or Software Usability Tests	100	1	2	200
Total	28,000	16,100

Dated: December 15, 2015.
Brandie Taylor Bumgardner,
Project Clearance Liaison, NIAID, NIH.
 [FR Doc. 2015-31986 Filed 12-18-15; 8:45 am]
BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on

proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are 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 or other forms of information technology.

Proposed Project: Community Support Evaluation (CSE)—New

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), is requesting clearance for the new data collection associated with the CSE. The CSE is a multicomponent evaluation of two SAMHSA programs—Behavioral Health Treatment Court Collaborative (BHTCC) and Transforming Lives through Supported Employment (SE). SE intends to promote recovery for individuals with serious mental illness, substance

use, and co-occurring mental and substance use disorders. The programs are rooted in the belief that recovery is a holistic process bolstered by trauma-informed care and individual- and community-level support.

The purpose of the CSE is to (1) describe and assess BHTCC and SE grantee activities and procedures, including the intermediate or direct effects of the programs on participants; (2) document the application and sanctioned adaptations of BHTCC programs in the justice system and of the SE Program; and (3) design and implement plans to disseminate knowledge about how to replicate effective projects in other States, territories, tribal nations, and communities. Findings will inform current grantees, policymakers, and the field about ways to transform the behavioral health system to cultivate resiliency and recovery, actively collaborate with and engage, and improve service delivery for individuals with serious mental, substance, and co-occurring disorders who are in recovery.

Eight data collection activities compose the CSE—five for administration with BHTCC program grantees and three to be conducted with SE program grantees.

BHTCC Study Instruments

Biannual Program Inventory (BPI)—BHTCC: The BPI—BHTCC is a Web-based survey that will capture infrastructure development and direct services that are part of the BHTCC programs. Data include the types of planning, infrastructure, and collaboration grantees are implementing; trainings conducted; and direct services offered as part of the program. The BPI will be completed by grantee evaluation staff twice yearly (April and October) over the grant period.

System-Level Assessment (SLA) Key Informant Interviews (KIIs): The SLA KIIs will be conducted with five stakeholders from each BHTCC grantee to assess collaboration strategies to expand or better serve participants; processes for recruiting, screening, and retaining participants; practices to ensure treatment adherence and criminal justice compliance; and involvement of consumers in program planning and implementation. Data include implementation processes/outcomes; service infrastructure, capacity, entry, and delivery processes; management structure; reward and sanction models; trauma-informed practices; collaboration among BHTCC participants; and facilitators and barriers to collaboration. There are three

versions of the SLA KIIs: (1) Court personnel (administrators, coordinators, judges, attorneys), (2) service provider (case managers, BHTCC peer specialists), and (3) consumer (clients, family members). Grantee staff will assist with respondent recruitment by collecting consent to contact from potential participants and forwarding the forms to the CSE team. The SLA KIIs will be conducted in grant years two and four via telephone or Skype. The SLA KIIs will cover the same information across years; however, the Year 4 SLA KIIs also will ask for specific plans for future implementation.

Concept Mapping: A total of four concept mapping exercises will be conducted—one local and three cross-site concept maps will be created. All concept mapping exercises will be coordinated at the local level with assistance from the CSE team. Beginning in Year two, each grantee will identify and recruit up to 20 stakeholders (BHTCC peers, consumers, family members of consumers, and court personnel) to participate in the first exercise. Concept mapping will be conducted via a Web-based program; accommodations will be made for respondents who do not have access to computers via telephone or paper/pencil.

■ **Exercise 1—Local Concept Maps:** Between Years two and three, each BHTCC grantee will generate a local concept map identifying the priority supports for recovery. The exercise will take place in two parts. First, participants will be asked to brainstorm as many responses as they wish to a focus prompt about system-level change (*e.g., one way that this BHTCC collaborative provides support to consumers is . . .*). At a later date, local staff will ask participants to sort and rate the full list of responses from the brainstorming activity in “any way that makes sense” to them. Respondents will sort/rate the responses—once for importance and once for frequency—into groups and name them. The resulting information will be entered into Concept System software to generate a local map identifying the most important aspects of the grantee program that support recovery.

■ **Exercise 2—Keys to Recovery (KTR) Map 1:** In Year four, up to 20 stakeholders from each BHTCC grantees will participate in a second sorting/rating of local concept mapping information. Grantee staff will develop a list of the most common brainstormed responses to the original local concept mapping exercise. The information will be used to generate a cross-site map on

the basis of input from the 17 BHTCC sites.

■ **Exercises 3 and 4—Keys to Recovery Maps 2 and 3:** In Year four, two groups of up to five BHTCC grantees with a particular court structure or program focus (*e.g., veterans’ court and other BHTCC types of court models, such as key recovery supports addressing a specific aspect or type of severe mental illness*) will participate in two concept mapping exercises to generate KTR maps. The program focus will be determined after the initial site-specific maps have been analyzed. Up to 20 stakeholders from each participating grantee will engage in brainstorming and sorting/rating activities. Respondents will participate via Web, telephone, or paper/pencil.

18-Month Client Level Abstraction Tool: The 18-Month Tool is an Excel-based tool that collects existing data on long-term client outcomes on recidivism. Data include (1) rearrest dates (from the National Crime Information Center database), (2) recommitment dates (from State departments of corrections and local/county jails and corrections), (3) revocation dates (from State and local corrections), and (4) risk assessment quantitative score. Grantee staff will complete the tool at 18 months from the baseline period for any client enrolled in the BHTCC program. Beginning in year two, grantees will upload all extracted data on a quarterly basis. In their final upload (last month of grant activity), grantees will include data for all clients not currently submitted including those enrolled less than 18 months. The 18-Month Tool will be completed by BHTCC grantee evaluation staff using existing sources. In addition, court staff (*e.g., court clerks*) from two BHTCC comparison courts will complete the tool for non-BHTCC participants as part of a comparison study.

Comparison Study Client Level Abstraction Tool: The Comparison Study Tool is an Excel-based tool that collects existing data on comparison cases (individuals who are not participating in the BHTCC program but are comparable in program eligibility) at baseline and six months. Baseline data include demographics and status of screening for co-occurring disorders, employment, and probation/parole. Data abstracted through the six-month tool include employment status, probation/parole status, services received (*e.g., case management, treatment, medical care, after care, peer-to-peer recovery support, and education*) and number of days services were received. Respondents will include court staff

(e.g., court clerks) at comparison courts who have regular interaction with clients during their involvement in the justice system. Respondents will complete the tool on the basis of (1) court paperwork and (2) information discussed during regular court-related interactions.

SE Study Instruments

Biannual Program Inventory–SE: The BPI–SE is a Web-based survey that captures the infrastructure development and direct services that are part of the SE programs. Data include the types of planning that SE grantees and local implementation sites are implementing and activities and infrastructure developed as part of the project. The BPI is administered twice yearly (April and October) over the grant period and will be completed by SE grantee program staff.

Scalability/Sustainability Assessment (SSA) KIIs: The SSA KIIs will be conducted with various stakeholders to assess local SE program resources, infrastructure, outcomes, sustainability, and scalability from stakeholders. Data include changes in outcomes, workforce

development, State-level collaboration, partnerships and policies, and scalability and sustainability. There are two versions of the SSA KIIs—each is tailored to the intended audience: (1) State-level administrator (project directors, agency directors, SECC members) and (2) local, pilot-level service provider (local service provider). The SSA KIIs will be conducted remotely by telephone and/or Skype technology in years two and four of the evaluation with five stakeholders from each SE grantee. The KIIs cover the same information across years; however, Year four KIIs will follow up on how the infrastructure and activities taking place in Year two come to fruition.

Employment Needs Focus Groups (FGs): The employment needs FGs will be conducted to gather information about the needs and experiences of employment specialists, consumers, and employers as they relate to supported employment principles and program goals. Data include local program implementation, the adoption of policies and practices for sustainability and scalability, and recommendations for program improvement and

implementation best practices. Employment Needs FGs will be conducted with employment specialists and employers (who have and have not participated in the program) virtually using a Web-based platform (such as JoinMe) in years two and four of grant funding. Specific topics are tailored to respondent type.

- *Employment specialists* will discuss training received and techniques used to engage employers, the needs and experiences of clients and employers, facilitators and barriers to program implementation, and program scalability and sustainability. The employment specialist FG will take 90 minutes.

- *Employers* (e.g., hiring managers, supervisors) will discuss experiences and satisfaction with the program, factors that facilitate and pose barriers to their participation, and program scalability and sustainability. The employer FG will take 60 minutes.

The estimated response burden to collect this information associated with the CSE is as follows, annualized over the requested three-year clearance period, as presented below:

TOTAL AND ANNUALIZED AVERAGES: RESPONDENTS, RESPONSES, AND HOURS

Instrument	Number of respondents	Responses per respondent	Total Number of responses	Burden per response (hours)	Annual burden (hours)*
BHTCC Study Instruments					
Biannual Program Inventory–BHTCC	17	2	34	0.75	26
System Level Assessment KIIs	58	1	58	1	58
18-Month Abstraction Tool	19	1	19	5.40	102.6
Comparison Study Abstraction Tool (BL)	2	1	2	7	14
Comparison Study Tool (6 Mo)	2	1	2	7	14
Concept Mapping Brainstorm/Sort/Rate	180	1	180	1	180
Concept Mapping Sort/Rate	115	1	115	0.5	58
SE Study Instruments					
Biannual Program Inventory–SE	7	2	14	0.75	11
Sustainability/Scalability KIIs	28	1	28	1	28
Employer FG	28	1	28	1	28
Employment Specialist FG	28	1	28	1.5	42
Total	467		508		562

* Rounded to the nearest whole number.

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 2–1057, One Choke Cherry Road, Rockville, MD 20857 OR email a copy to summer.king@samhsa.hhs.gov. Written comments should be received by February 19, 2016.

Summer King,
Statistician.

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BILLING CODE 4162–20–P

DEPARTMENT OF HOMELAND SECURITY

U.S. Customs and Border Protection

[1651–0138]

Agency Information Collection Activities: Biometric Identity

AGENCY: U.S. Customs and Border Protection, Department of Homeland Security.

ACTION: 30-Day notice and request for comments; extension of an existing collection of information.

SUMMARY: U.S. Customs and Border Protection (CBP) of the Department of Homeland Security will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act: Biometric Identity. This is a proposed extension of an