(Catalogue of Federal Domestic Assistance Program Nos. 93.271, Alcohol Research Career Development Awards for Scientists and Clinicians; 93.272, Alcohol National Research Service Awards for Research Training; 93.273, Alcohol Research Programs; 93.891, Alcohol Research Center Grants, National Institutes of Health, HHS)

Dated: September 5, 2007.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 07–4484 Filed 9–11–07; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Mental Health; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, Advanced Centers for Innovation in Services and Interventions Research.

Date: October 19, 2007.

Time: 2:30 p.m. to 4:15 p.m.

Agenda: To review and evaluate grant applications.

Place: Hilton Washington, 1919 Connecticut Avenue, NW., Washington, DC 20009.

Contact Person: Serena P. Chu, PhD, Scientific Review Administrator, Division of Extramural Activities, National Institute of Mental Health, NIH, Neuroscience Center, 6001 Executive Blvd., Room 6154, MSC 9609, Rockville, MD 20892, 301–443–0004, *sechu@mail.nih.gov*.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, Translational.

Date: October 31, 2007.

Time: 11:30 a.m. to 2:30 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: David I. Sommers, PhD, Scientific Review Administrator, Division of Extramural Activities, National Institute of Mental Health, National Institutes of Health, 6001 Executive Blvd., Room 6154, MSC 9609, Bethesda, MD 20892–9606, 301–443–7861, *dsommers@mail.nih.gov*.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, Eating Disorders.

Date: November 8, 2007.

Time: 10:30 a.m. to 2 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: David I. Sommers, PhD, Scientific Review Administrator, Division of Extramural Activities, National Institute of Mental Health, National Institutes of Health, 6001 Executive Blvd., Room 6154, MSC 9609, Bethesda, MD 20892–9606, 301–443–7861, *dsommers@mail.nih.gov*.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, ACISIR/DCISIR.

Date: November 16, 2007.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Hyatt Regency Bethesda, One Bethesda Metro Center, 7400 Wisconsin Avenue, Bethesda, MD 20814.

Contact Person: Mary C. Blehar, Scientific Review Administrator, Office of the Director, Neuroscience Center, 6001 Executive Blvd., Room 7216, MSC 9634, Bethesda, MD 20892–9634, 301–443–4491, *mblehar@mail.nih.gov*

(Catalogue of Federal Domestic Assistance Program Nos. 93.242, Mental Health Research Grants; 93.281, Scientist Development Award, Scientist Development Award for Clinicians, and Research Scientist Award; 93.282, Mental Health National Research Service Awards for Research Training, National Institutes of Health, HHS).

Dated: September 5, 2007.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 07–4485 Filed 9–11–07; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Proposed Project: Cross-Site Assessment of the Residential Treatment for Pregnant and Postpartum Women (PPW), Their Minor Children and Family Program—(OMB No. 0930–0269)—Revision

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), has funded additional Services Grants for Residential Treatment for Pregnant and Postpartum Women (PPW). The primary purpose of the PPW Program is to provide cost-effective, comprehensive residential substance abuse treatment services for women and their minor children that can be sustained over time. Based on six-month data collection experience gained during training on the cross-site process and instrument administration and data collection with the six projects in the 2003 (first) cohort of this Assessment and feedback from project and assessment staff, the following modifications are proposed: (1) To implement modifications to the instruments; (2) to replace the 12-month post-intake data collection wave with a 6-month post-discharge data collection wave to ensure that post-discharge data is collected on all women (as some may still be in residential treatment at 12 months) and because it is important to collect post-discharge outcome data for all women—especially over a uniform interval (i.e., 6 months); (3) to increase the number of sites and participants involved in this Cross-site Assessment; and, (4) to increase the target population to ensure that the PPW program is more family-centered, as required in Congressional budget language for the PPW program for 2006.

Section 508 [290bb–1] of the Public Health Service Act, as amended, mandates the evaluation and dissemination of findings of residential treatment programs for pregnant and postpartum women. This cross-site accountability assessment will assess project activities implemented for these services. The data collection instruments will be used for program and treatment planning and for this cross-site accountability assessment. The following interview instruments will be administered to mothers:

1. Child Data Collection Tool, Part 1 (child's demographic background) and Part 2 (child's medical background) administered within 30 days of the mother's intake or the child's birth for each of the woman's estimated 4 children;

2. Allen Barriers to Treatment Instrument;

3. Ferrans and Powers Quality of Life Index© Generic Version—III;

4. BASIS–24® (first cohort used BASIS–32®)—behavioral health assessment;

5. Child Well-Being Scales;

6. Family Recovery Support Services Tool; and

7. GPRA at 6-months post-discharge.

The Family Recovery Support Services Tool is a new tool that will assess the level of services received by the women, the children, and family members at 6-months post-intake, at discharge, and at 6 months post-discharge. The Ferrans and Powers Quality of Life Index© Generic Version–III will collect information from women and their partners/children's fathers on overall family satisfaction including the woman's satisfaction with her partner and the emotional support she receives from her family.

For all children under 18 years, program staff will collect information from observation and interview. Children's data collection tools include the following:

1. Denver Developmental Screening Inventory II (ages 0 to 6 years, 0 days);

2. Middle Childhood Developmental Assessment Guide (ages 6 to 10);

3. Adolescent Childhood Development Assessment Guide (ages 11 to 17); and

4. CRAFFT substance abuse screening instrument (ages 11–17).

In addition, records review will be conducted by program staff on all program participants using:

1. Women's Medical Record Audit and the Child's Medical Record Audit or the Newborn's Medical Record Audit (at delivery); and

2. Women's Discharge Tool and the Children's Discharge Tool at discharge only.

All data will be collected using a combination of observation, records review, self-administered paper-and-pencil questionnaires, and personal interviews. CSAT will use this data for this Assessment to inform public policy, research, and programming as they relate to the provision of women's services. Data produced by this study will provide direction to the type of technical assistance that will be required by service providers of women's programming. In addition, the data will be used by individual grantees to support progress report efforts.

The following table shows the estimated annual response burden for this collection.

TOTAL ANNUAL RESPONDENT BURDEN

Instrument	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Annual Burden for Interviews of the Mothers					
Child Data Collection Tool[a]	321	4	1,284	0.75	963
Allen Barriers to Treatment[b]	321	4	1,284	0.25	321
Ferrans and Powers Quality of Life Index[b]	321	4	1,284	0.25	321
BASIS 24®[b]	321	4	1,284	0.17	218
Child Well-Being Scales (age 0 to 17)[c]	321	20 (5 times, ≤ 4 settings)	6,420	0.33	2,119
Family Recovery Support Services Tool[d]	321	3	963	0.25	241
GPRA at 6-months post-discharge	321	1	321	0.33	106
Total for Mothers	321		12,840		4,289
Annual Burden for Interviews of the Partners/Fathers					
Ferrans and Powers Quality of Life Index[e]	642	1	642	0.25	161
Total for Family Members	642		642		161
Annual Burden for Interviews of the Minor Children					
Denver Developmental Screening Inventory II (age 0 to 6 years)[f]	770	5	3,850	0.50	1,925
Middle Childhood Developmental Assessment Guide (age 6 to 10)[g]	257	5	1,285	0.33	424
Adolescent Childhood Developmental Assessment Guide (age 11 to 17)[h]	257	5	1,285	0.33	424
CRAFFT (age 11 to 17)[h]	257	5	1,285	0.17	218
Total for Minor Children	1,284	5	7,705		2,991
Annual Burden for Records Review by Staff					
Women's Medical Record Audit	8	120 (40 women, 3 times)	960	0.25	240
Children's Medical Record Audit	8	600 (117 intakes; 1,284 followups, 3 times = 483)	4,800	0.25	1,200
Newborn's Medical Record Audit	8	43	344	0.08	28
Women's Discharge Tool[i]	8	40	320	0.58	186
Children's Discharge Tool[j]	8	161	1,288	0.58	747

TOTAL ANNUAL RESPONDENT BURDEN—Continued

Instrument	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Total for Staff	8		7,712		2,401
Total	2,255		28,899		9,842

[a] Based on intake interviews of 321 mothers regarding each of her estimated 4 children.
[b] Based on interviews with 321 mothers at intake, 6 months, discharge, and 6 months post-discharge.
[c] Based on interviews of 321 mothers (and observation of them interacting with their children) with regard to the setting in which each of her estimated 4 children lives. If all children live in the same setting, then the instrument is only completed once. This instrument is completed according to the children's data collection schedule—that is, at intake/delivery, 3 months, 6 months, discharge, and 6 months post-discharge.
[d] Based on 321 mothers at 6 months post-intake, at discharge, and 6 months post discharge
[e] Based on 2 family members responding, on average, for each of 321 women.
[f] Based on 60% of 1,284 minor children ages 0 to 6 at intake or delivery, 3 months, 6 months, discharge, and at 6-months post-discharge.
[g] Based on 20% of 1,284 minor children ages 6 to 10 years at intake, 3 months, 6 months, discharge, and 6-months post-discharge.
[h] Based on 20% of 1,284 minor children ages 11 to 17 at intake, 3 months, 6 months, discharge, and 6-months post-discharge.
[i] Based on treatment records review on all mothers at discharge. The instrument is completed for all women who entered treatment regardless of treatment completion rate.
[j] Based on treatment records review on all minor children at discharge. The discharge instrument is completed for all minor children who entered treatment regardless of treatment completion rate.

Written comments and recommendations concerning the proposed information collection should be sent by October 12, 2007 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202–395–6974.

Dated: September 7, 2007.

Elaine Parry,

Acting Director, Office of Program Services.

[FR Doc. E7–17998 Filed 9–11–07; 8:45 am]

BILLING CODE 4162–20–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Advisory Committee for Women's Services; Notice of a Meeting

Pursuant to Public Law 92–463, notice is hereby given of a meeting of the Substance Abuse and Mental Health Services Administration (SAMHSA) Advisory Committee for Women's Services on September 24–25, 2007.

The meeting is open and will include a report from the SAMHSA Administrator, Dr. Terry L. Cline. The meeting will focus on wellness issues as they relate to women and girls with or at risk for mental and substance use disorders, and include presentations from national stakeholders and SAMHSA grantees. In addition, there will be presentations on criminal justice and women, the Suicide Prevention Campaign, and updates on SAMHSA's Campus Suicide Prevention Grants Program and the National Suicide Prevention Lifeline for Veterans.

Attendance by the public will be limited to the space available. Public comments are welcome. Please communicate with the Committee's Executive Secretary, Ms. Carol Watkins (see contact information below), to make arrangements to comment or to request special accommodations for persons with disabilities.

Substantive program information, a summary of the meeting, and a roster of Committee members may be obtained either by accessing the SAMHSA Committee's Web site at *https://www.nac.samhsa.gov/* as soon as possible after the meeting, or by contacting Ms. Watkins. The transcript for the meeting will also be available on the SAMHSA Committee's Web site within three weeks after the meeting.

Committee Name: SAMHSA Advisory Committee for Women's Services.

Date/Time/Type: Monday, September 24, 2007, from 9 a.m. to 5 p.m.: Open; Tuesday, September 25, 2007, from 9 a.m. to 12 p.m.: Open.

Place: 1 Choke Cherry Road, Sugarloaf Conference Room, Rockville, Maryland 20857.

Contact: Carol Watkins, Executive Secretary, SAMHSA Advisory Committee for Women's Services, 1 Choke Cherry Road, Room 8–1002, Rockville, Maryland 20857, Telephone: (240) 276–2254; Fax: (240) 276–1024 and e-mail: *carol.watkin2@samhsa.hhs.gov.*

Dated: September 5, 2007.

Toian Vaughn,

Committee Management Officer, Substance Abuse and Mental Health Services Administration.

[FR Doc. E7–17951 Filed 9–11–07; 8:45 am]

BILLING CODE 4162–20–P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

Open Meeting, Board of Visitors for the National Fire Academy

AGENCY: U.S. Fire Administration, Federal Emergency Management Agency, DHS.

ACTION: Notice of open meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, the Federal Emergency Management Agency announces the following committee meeting:

Name: Board Of Visitors (BOV) for the National Fire Academy.

Date of Meeting: October 4–6, 2007.

Place: Building J, Room 236, National Emergency Training Center, Emmitsburg, Maryland.

Time: October 4, 9 a.m.–5 p.m.; October 5, 9 a.m.–5 p.m.; October 6, 8:30 a.m.–11:30 a.m.

Proposed Agenda: Review National Fire Academy Program Activities.

SUPPLEMENTARY INFORMATION: In accordance with section 10 (a) (2) of the Federal Advisory Committee Act, 5 U.S.C. App. 2, the Federal Emergency Management Agency announces that the committee meeting will be open to the public in the Emmitsburg commuting area with seating available on a first-