

Purpose: To review a research training grant application which was previously deferred.

This meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), title 5, U.S.C. The discussions of these applications could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the above meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

(Catalog of Federal Domestic Assistance Program Nos. 93.821, Biophysics and Physiological Sciences; 93.859, Pharmacological Sciences; 93.862, Genetics Research; 93.863, Cellular and Molecular Basis of Disease Research; 93.880, Minority Access Research Careers [MARC]; and 93.375, Minority Biomedical Research Support [MBRS].)

Dated: July 22, 1996.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 96-19174 Filed 7-24-96; 1:53 pm]

BILLING CODE 4140-01-M

National Institutes of Health Division of Research Grants; 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 Division of Research Grants Special Emphasis Panel (SEP) meetings:

Purpose/Agenda: To review individual grant applications.

Name of SEP: Biological and Physiological Sciences.

Date: August 16, 1996.

Time: 3:00 p.m.

Place: NIH, Rockledge 2, Room 4148, Telephone Conference.

Contact Person: Dr. Philip Perkins, Scientific Review Administrator, 6701 Rockledge Drive, Room 4148, Bethesda, Maryland 20892, (301) 435-1718.

Name of SEP: Biological and Physiological Sciences.

Date: August 20, 1996.

Time: 1:00 p.m.

Place: NIH, Rockledge 2, Room 4150, Telephone Conference.

Contact Person: Dr. Marcia Litwack, Scientific Review Administrator, 6701 Rockledge Drive, Room 4150, Bethesda, Maryland 20892, (301) 435-1719.

Name of SEP: Clinical Sciences.

Date: August 23, 1996.

Time: 1:00 p.m.

Place: NIH, Rockledge 2, Room 4138, Telephone Conference.

Contact Person: Dr. Anthony Chung, Scientific Review Administrator, 6701 Rockledge Drive, Room 4138, Bethesda, Maryland 20892, (301) 435-1213.

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

(Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: July 22, 1996.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 96-18966 Filed 7-25-96; 8:45 am]

BILLING CODE 4410-01-M

Substance Abuse and Mental Health Services Administration

Statement of Organization, Functions, and Delegations of Authority

Part M of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services (as amended most recently at 61 F.R. 30617-30619 dated June 17, 1996) is amended to reflect the reorganization of the major offices and the three Centers of SAMHSA, namely the Office of the Administrator, the Office of Program Services, the Center for Mental Health Services, the Center for Substance Abuse Prevention, and the Center for Substance Abuse Treatment. On June 10, 1996, the Administrator, SAMHSA, approved the reorganization of SAMHSA. Numerous changes in the SAMHSA structure are now necessary to reflect current operational requirements. The revised statement is as follows:

Section M-20, Functions.

After the title *Office of the Administrator (MA)*, insert the following titles and functional statements:

Immediate Office of the Administrator (MA-1): Provides leadership and direction to the programs and activities of the Substance Abuse and Mental Health Services Administration as follows: (1) responsible for program policy development; (2) carries out SAMHSA-wide functions relating to equal employment opportunity, AIDS,

women's services, minority affairs, and alcohol prevention and treatment policies; (3) provides correspondence control for the Administrator and controls all agency public correspondence directed to the Administrator; (4) provides liaison with other HHS components, other Federal organizations, the office of the National Drug Control Policy, and outside groups; and (5) provides oversight for coordination between SAMHSA components and the alcohol, drug abuse, and mental health Institutes of the National Institutes of Health.

Office of Managed Care (MAA):

Serves as the Agency's focal point for managed care (MC) activities and as such: (1) advises the Administrator, SAMHSA, and senior staff and provides leadership and direction for SAMHSA managed care activities; (2) facilitates and coordinates the collection of information about the Agency's managed care activities; (3) provides staff direction and support to the Agency's managed care team; (4) participates in Agency-wide planning and budget execution; and (5) serves as liaison with other governmental organizations concerned with managed care activities.

Office of Communications (MAB):

Serves as a focal point for SAMHSA communications activities as follows: (1) Coordinates agency communications activities; (2) plans public events, including press conferences, speeches, and site visits for the Administrator and DHHS representatives; (3) publishes SAMHSA brochures, factsheets, and quarterly SAMHSA News; (4) coordinates electronic dissemination of information—within the Agency and through the Internet and World-Wide Web; (5) develops communications channels and targets media placements; (6) develops and disseminates news releases and coordinates media contacts with Agency representatives; (7) provides editorial and policy review of all agency publications; (8) fulfills public affairs requirements of DHHS; (9) supports the efforts of the Secretary's substance abuse prevention initiative work group; and (10) responds to Freedom of Information Act requests.

Office of Policy and Program Coordination (MAC):

(1) Provides leadership and guidance in the analysis, planning, and coordination of overall Agency and interagency programs and program policies; (2) provides leadership in formulating and carrying out the Agency's national leadership role; (3) manages a variety of teams comprised of representatives within and outside the Agency in order to address issues of central importance to the

agency and to the field, promoting coordination and collaboration in these problem-solving efforts; (4) carries out program development activities in cross-cutting priority areas such as co-occurring disorders, performance measurement, child and family issues, and public health impact of substance abuse and mental illnesses; (5) reviews Agency work products for policy implications; (6) provides leadership and advice on intergovernmental activities, interagency relationships, and customer and constituent relations; and (7) carries out Agency-level policy, planning, legislative, and extramural functions.

After the title *Office of Program Services (MB)*, insert the following titles and functional statements:

Office of the Director (MB-1): (1) Provides leadership and guidance for the range of administrative and program services which the Office provides to all SAMHSA components; (2) provides general policy review and executive oversight of crosscutting management and administrative issues and program initiatives; (3) promotes coordination and communication among the Centers and the Office of the Administrator; (4) works to streamline, improve, and integrate administrative systems; (5) assists in the design and implementation of crosscutting automated systems; (6) coordinates special and crosscutting tasks and initiatives; and (7) manages the grant and contract appeals processes.

Division of Information Resources Management (MBA): (1) Provides leadership, guidance, and technical expertise in the Agency's transition from conventional information system to a data base environment, including the continual improvement of Agency systems; (2) provides coordination for Agency-wide data base administration and systems configuration management; (3) serves as the focal point for Agency-wide information resources management, office automation, and information systems policy, strategic planning, budget preparation, coordination, and security; (4) maintains information resources management support through the local area network (LAN); (5) maintains, operates, and provides services for the LAN and personal computers, data bases, voice mail/faxes, and general machine repairs; (6) exercises clearance authority for Agency-wide information resources management and office automation projects and procurement; (7) provides advice, assistance, and training to Agency staff in obtaining maximum utilization and services from its information systems and data bases;

(8) trains Agency staff in the use of new products and applications as necessary; (9) develops and secures new programming software to meet individual program needs, as well as broad Agency needs; (10) stays abreast of new information resources management developments and ensures necessary support services are provided; and (11) initiates and carries out studies to implement improvements in systems and services.

Division of Financial Management (MBB): (1) Coordinates the Centers' budget plans and formulates and presents SAMHSA's future budget and financial management activities; (2) prepares budget justification documents which support Center/Agency priorities and decisions; (3) coordinates responses to the Department, the Office of Management and Budget, and others which require input from all Agency components; (4) prepares technical budget schedules and material necessary in support of Agency budget recommendations; (5) develops briefing material for the Center Directors and the Administrator for budget hearings and on ad hoc issues which arise; (6) provides day-to-day liaison with budget staff at other levels; (7) evaluates internal fiscal controls to assure compliance with laws regulations, policies, and sound business practices; (8) conducts key aspects of Agency budget execution, including the apportionment and allotment processes, overhead and assessment changes, and monitoring of overall expenditures; (9) coordinates Agency response to outside financial management initiatives, such as the Federal Managers' Financial Integrity Act, financial aspects of the Government Performance and Results Act, and audited financial statements; and (10) exercises oversight in executing the annual budget of the Office of the Administrator, the Office of Applied Studies, and other Agency components.

Division of Human Resources Management (MBC): Provides leadership and direction in developing and administering the personnel management program for SAMHSA, including: (1) central personnel services in areas such as placement and staffing, position classification and pay management, employee management relations, labor relations, career development and training, and performance management; (2) advisory services to seniors Agency officials and staff support on matters relating to the development and administration of personnel policies and program designed to obtain, compensate, train and develop, utilize, and retain a qualified, effective and efficient work

force; (3) advisory services to managers and supervisors in such matters as supervisor-employee relations and communications, motivation and recognition, training and development and employee services; (4) represents the Agency in personnel matters with the Department of Health and Human Services, the U.S. Office of Personnel Management, and other Federal agencies; and (5) initiates actions, initiatives, and activities resulting in the continual improvement of Agency human resource systems and processes.

Division of Grants Management (MBE): (1) Conducts all aspects of the SAMHSA grants management process; (2) develops, implements, and coordinates the application of Agency standards, methods and procedures for the management of grants and cooperative agreements; (3) provides guidance to the Agency, applicants, and grantees on the management and administrative aspects of grant programs; (4) reviews applications, reports, and active projects to ensure compliance with management policies and procedures; (5) prepares, processes, and disseminates award documents; and (6) prepares special and recurring reports relating to applications and awards.

Division of Contracts Management (MBF): (1) Conducts all aspects of the SAMHSA contracts management process; (2) develops and implements standards and procedures for the management of the Agency's contracts and Purchase Card programs; (3) reviews and evaluates contract proposals to determine technical acceptability and cost reasonableness; (4) advises Agency personnel on contracts management policies and procedures established by law and Agency guidelines; (5) maintains internal control over the contracts management function for the Agency; (6) issues contract awards following appropriate laws, regulations, guidelines and policies; and (7) coordinates and participates in all phases of the acquisition cycle, including pre-solicitation, solicitation, negotiation, award, administration and closeout of the Agency's contracts.

Division of Administrative Services (MBG): (1) Provides centralized administrative services for the Agency, including processing and coordinating requests for and providing advice on procurement actions, travel, property, facilities, personnel and other activities; (2) provides advice and assistance to the Office of the Administrator, the Centers, and other SAMHSA components on administrative policy to improve program operations, management, and

the implementation of plans, systems and procedures Agency-wide; (3) provides advice and guidance to staff on the processing of travel orders, acquisition requests, and personnel documents; (4) ensures administrative actions are consistent with any regulations or other requirements which may be relevant, and implements general management policies as prescribed by SAMHSA and higher authorities; (5) serves as the Agency focal point for planning, coordinating, and performing various management activities such as records management and forms management; (6) coordinates and ensures support for the materiel management and property within the Agency; (7) coordinates actions as necessary with other HHS components such as the Program Support Center (PSC) accounting and procurement staffs, the contract travel agency; and (8) serves as the Agency's focal point for the Agency's payroll activities, including timekeeping.

After the title *Center for Mental Health Services (MS)*, insert the following titles and functional statements:

Office of the Director (MS-1): (1) Provides leadership in planning, implementing, and evaluating the Center's goals, priorities, policies, and programs, including equal employment opportunity, and is the focal point for the Department's efforts in mental health services; (2) plans, directs, and provides overall administration of the programs of CMHS; (3) conducts and coordinates Center interagency, interdepartmental, intergovernmental, and international activities; (4) provides information to the public and constituent organizations on CMHS programs; (5) maintains liaison with national organizations, other Federal departments/agencies, the National Institute on Mental Health and with other SAMHSA Centers; (6) administers committee management and reports clearance activities; and (7) promotes the prevention of HIV infection in people at risk, the delivery of effective mental services for people with HIV infection, and the education of health care providers to address the neuropsychiatric and the psychosocial aspects of HIV infection and AIDS; and (8) conducts managed care activities and coordinates these activities with other components in SAMHSA.

Office of Policy, Planning, and Administration (MSA): (1) Provides leadership and guidance in the administration, analysis, planning, and coordination of Center policies and programs; (2) analyzes legislative issues and provides liaison with the office of

the Administrator on legislative issues; (3) identifies and coordinates analyses, program assessments, or special studies of key issues relevant to policy direction; (4) directs the Center's long-term planning process and conducts, analyzes, and supports planning activities; (5) provides Center leadership in interdepartmental and intergovernmental activities and constituent relations; (6) coordinates, guides, and leads the Center's international activities; and (7) provides coordination, assistance and planning of administrative and budget functions within the Center and the Office of Program Services.

Office of External Liaison (MSB): (1) Administers CMHS communications, education, and information projects to increase public, consumer and family, and health care provider awareness about mental health issues, programs, and services; (2) works in partnership with CMHS program staff and public/private partners to promote the Center's national leadership role in improving the quality of mental health services; (3) develops and implements national education initiatives to increase public understanding of mental illnesses and serious emotional disturbances, to improve early recognition and treatment, to increase access, to reduce stigma, and to facilitate consumer and family participation in policy development and the design, delivery, an evaluation of services; (4) plans, implements, and oversees public affairs activities and coordinates with the Office of Communications, Office of the Administrator; (5) directs a clearing house that serves as a one-stop information and referral service for the public, consumers and family members, educators, policy makers, and for those who design, finance, and deliver mental health services; (6) establishes and implements policies and procedures for the development, review, processing, quality control, evaluation, and dissemination of CMHS materials to communicate information about mental illnesses and mental health services, and about issues impacting those services; (7) administers clearance and production of CMHS publications; (8) controls, tracks, edits, writes, and documents the correspondence coming to the Director and Deputy Director, and correspondence from the White House, the Secretary of HHS, and other SAMHSA components involving mental health services; (9) researches, writes, and edits speeches and audio/visual presentations; (10) conducts outreach to the media and related organizations to facilitate new coverage of Center

programs; (11) facilitates and designs graphic arts for presentations, publications, and other printed materials; (12) designs and manages the Center's exhibit program to effectively communicate CMHS programs and policies; (13) serves as a focal point for Freedom of Information Act inquiries; and (14) coordinates with the National Institute on Mental Health and other Centers of SAMHSA to develop strategies to translate research findings into clinical practice.

Division of Program Development, Special Populations and Projects (MSC):

(1) Oversees the monitoring of community mental health centers that have received Federal construction grants; (2) serves as Center liaison with the District of Columbia Government for coordinating Federal post-transition responsibilities for St. Elizabeths Hospital; (3) serves as the focal point in planning for alcohol, drug abuse, and mental health services during national disasters; (4) cooperates with the Office of Emergency Preparedness and the Federal Emergency Management Agency (FEMA) to coordinate disaster assistance, community response, and other mental health emergency services as a consequence of national disasters; (5) serves as a focal point for refugee mental health programs, including liaison with other Federal agencies; and (6) conducts program development activities to promote effective programs and policies for special populations including women, minorities, and elderly persons.

Division of State and Community Systems Development (MSE): (1)

Administers the Community mental Health Services Block Grant, including monitoring State implementation of the Mental Health State Plan, compliance with the provisions of the Public Health Service Act, as amended, regarding use of the payments, and maintenance of effort; (2) provides technical assistance to the States with respect to the planning, development, financing, and operation of any program or service carried out pursuant to the block grant program; (3) administers a program of State Human Resource Development; (4) plans and supports programs of mental health education, with emphasis on targeted populations; (5) plans and supports programs to provide protection and advocacy services for persons with severe mental disorders; and (6) supports programs for: (a) obtaining, analyzing, and disseminating national statistics on mental health services, (b) developing methodologies for data collection in biometry and mental health economics, and (c) consulting with and providing technical assistance

to State and local mental health agencies on statistical methodology, mental health information systems, and the use of statistical and demographic data.

Division of Knowledge Development and Systems Change (MSF): (1) Develops, plans, implements, and monitors national knowledge development and application activities (KDA's) designed to increase the knowledge base and to improve systems and service delivery for persons with, or at risk for, mental health problems; (2) administers the Projects for Assistance in Transition from Homelessness (PATH) program; and (3) directs the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances Program. In particular the division: (a) places priority on two target populations, the adults with severe mental illness (including those who are homeless) and children and adolescents with serious mental disturbances; (b) emphasizes acquisition, exchange, and application of knowledge in all of its activities; (c) develops Guidance for Application and Requests for Contracts to implement these activities; (d) monitors grants, cooperative agreements, contracts, interagency agreements, and memoranda of understanding; (e) identifies needs for and provides technical assistance to a variety of customers through both direct and indirect activities, including the development of standards and guidelines; (f) establishes and maintains collaborative relationship with other Federal, State, and local governmental agencies, national organizations, local communities, providers, consumers, and families; and (g) promotes adoption of practices in communities through the Nation by synthesizing knowledge, exchanging information, and providing opportunities for consensus building.

After the title Center for *Substance Abuse Prevention (MP)*, insert the following titles and functional statements:

Office of the Director (MP-1): (1) Provides leadership, coordination, and direction in the development and implementation of CSAP goals and priorities, and serves as the focal point for the Department's efforts on substance abuse prevention; (2) plans, directs, and provides overall administration of the programs and activities of CSAP; (3) provides overall coordination and support for the Center's Managed Care initiative; (4) provides leadership and expert medical, clinical, and technical assistance in the integration of primary care medical and early intervention knowledge and

information into major CSAP program efforts; (5) participates with the Agency's Women's Services component to coordinate women's services programs; (6) organizes and manages CSAP's special projects, intergovernmental and international activities; and (7) monitors the conduct of the equal employment opportunity activities of CSAP.

Office of Policy and Planning (MPA): (1) Plans, develops, and implements new prevention policies and programs, and monitors and evaluates progress toward established objectives; (2) participates in the formulation and implementation of major CSAP national program operations; (3) develops and prepares position papers on policies and programs; (4) coordinates with the Office of the Administrator (OA) in reviews of executive congressional, and departmental policies, regulations, and plans for their impact on existing or planned CSAP programs; (5) represents CSAP in the development, establishment, and coordination of SAMHSA extramural program policies; (6) prepares annual forward plans in connection with the Department's strategic planning process and develops recommendations for future activities; (7) serves as a focal point for liaison with the Divisions and management activities of the SAMHSA Office of Program Services; (8) establishes accounting procedures for, and monitors the execution of, the CSAP budget; (9) provides liaison with OA on legislative activities; (10) coordinates and responds to request for information under the Freedom of Information Act; (11) manages correspondence control in CSAP; (12) provides program support for the operation of the CSAP National Advisory Council; and (13) develops and implements general management policies within CSAP as prescribed by SAMHSA and higher authorities.

Division of Knowledge Development and Evaluation (MPC): (1) Provides leadership in advancing CSAP's prevention knowledge development agenda by employing a broad range of mechanisms; (2) conducts extramural studies at the individual, family, community and systems levels; (3) manage the portfolio of knowledge development demonstration grant programs; (4) conducts national cross-site evaluation studies on the portfolio of knowledge development demonstration grant programs in the high risk youth and community partnership areas; (5) conducts secondary analysis of original prevention research studies; (6) synthesizes knowledge acquired through grants, cooperative agreements,

contracts, and field input; (7) promotes the develop of new methodologies for conducting prevention studies; (8) supports the professional development in the science of prevention of individuals traditionally under represented in science; (9) represents CSAP in the development of SAMHSA scientific extramural policy; (10) provides information to CSAP and other SAMHSA components, other HHS components, the Congress, and other Federal entities concerning the most effective prevention approaches that focus on the prevention needs of individuals with multiple, co-occurring drug, alcohol, mental, and physical problems; and (11) collaborates with other Federal departments and agencies that are relevant to CSAP's knowledge development mission including other HHS components such as the institutes of the Nation Institutes of Health, the Agency for Health Care Policy and Research, the Administration on Children and Families, the Centers for Disease Control, and the Office of Disease Prevention and Health Promotion.

Division of State and Community Systems Development (MPB): (1) Promotes and establishes comprehensive, long-term State and community alcohol, tobacco, and other drug abuse prevention/intervention strategies, programs, and support activities; (2) administers the primary prevention set-aside of the Substance Abuse Prevention and Treatment (SAPT) block grant and reviews and analyzes the SAPT plans submitted by the States; (3) administers community and State demonstration grant programs to support anti-drug coalitions and related health promotion systems; (4) develops and updates regulations and/or guidelines for the use of the primary prevention and tobacco provisions of SAPT; (5) provides technical assistance and capacity-building to States and communities in the planning, development, and operation of prevention programs and systems; (6) promotes interagency collaboration with both the public and private sector at the Federal, State and local levels, including among others, foundations, business, industry, labor, law enforcement, education, faith communities, health and social welfare entities, to optimize the use of fiscal and human resources and needed program development in new and existing prevention systems nationally; (7) develops guidelines for state-of-the-art prevention programs and systems while conducting quality assurance activities such as the Prevention Enhancement

Protocol (PEP); (8) compiles State and local prevention outcome findings and promising practices to support CSAP's on-going capacity-building role; and (9) develops and integrates the use of geomapping technology into applications for State and community prevention systems for the improvement planning efforts in substance abuse prevention nationally.

Division of Workplace Programs (MPE): (1) Establishes goals and objectives in the administration of a national program designed to promote substance abuse free workplaces; (2) provides leadership and oversight to assure that effective employee assistance programs are developed and evaluated to prevent substance abuse in the workplace; (3) develops, implements, and evaluates employee education/prevention programs, access to counseling, early intervention, and referral treatment/rehabilitation, and support services for employees following treatment/rehabilitation; (4) advises, coordinates, and certifies activities related to the implementation and administration of Federal drug free workplace programs; conducts Drug Testing Advisory Board; and conducts surveys on Federal programs; (5) commits CSAP and advises other SAMHSA components and HHS regarding workplace programmatic directions and actions and enters into collaborative arrangements with other Federal agencies; (6) collaborates in the development and implementation of substance abuse prevention and early intervention strategies for public/private sector use at the State and community levels; and operates the Workplace Hotline Contract as a means for dissemination, outreach and technical assistance to businesses, States and communities; (7) provides technical assistance to facilitate national training and certification programs for substance abuse professionals and practitioners, provides staff expertise in training and credentialing standards for medical Review Officers (MROS) and the Department of Transportation mandated Substance Abuse professionals; (8) provides leadership within SAMHSA in the development, training and use of the Geographic Information System (GIS) to support policy development for Federal substance abuse prevention, early intervention and treatment, managed care, violence and workplace initiatives, and to expand use of GIS resources at the Federal, State and community levels; (9) provides leadership within SAMHSA and the field in developing and disseminating knowledge in workplace violence related to substance

abuse, including risk factors in the workplace and community and the role of the workplace as a substance abuse and violence prevention agent within the community and family; and (10) evaluates managed care and other treatment provider practices as they are applied in the workplace.

Division of Community Education (MPF): (1) Provides national leadership in the development, coordination, and assessment of information for purposes of knowledge transfer and application; (2) develops and disseminates information and knowledge about alcohol, tobacco, and drugs; (3) assesses the need for, and promotes the development and widespread use of, prevention/intervention-related messages, materials and technologies by national, State and community organizations, especially directed towards traditionally under-served audiences and those at high risk; (4) develops and coordinates national media campaigns and stimulates media coverage of substance abuse issues with an emphasis on prevention; (5) prepares and acquires materials based on needs of target audiences; (6) manages the CSAP National Clearinghouse for Alcohol and Drug Information and the Regional Alcohol and Drug Awareness Resource Network; (7) demonstrates national leadership in electronic information technologies through PREVLine, Internet, and other mechanisms; (8) develops, in collaboration with other CSAP offices, material and technologies which provide learning opportunities for all CSAP staff to enhance and promote their ability to transfer and apply prevention knowledge for the benefit of CSAP customers; (9) promotes and provides training and technical assistance for increased capacity of State agencies and key constituent organizations to carry out knowledge transfer and application activities; (10) sponsors and conducts workshops, conferences, and related efforts to foster state-of-the-art knowledge transfer and application activities; (11) develops, implements, and evaluates a nationwide extramural grant/cooperative agreement program to demonstrate effective communication, diffusion and knowledge exchange to help reduce substance abuse; (12) reviews and/or prepares clearance documents for all communication products developed by the Center; and (13) provides public affairs liaison with the Office of the Administrator, Office of Communications, and other HHS components.

Under *Center for Substance Abuse Treatment (MT)* change item (2) to read:

“provides a focus for addressing the treatment need of individuals with multiple, co-occurring drug, alcohol, mental, and physical problems.”

After the title *Center for Substance Abuse Treatment (MT)*, insert the following titles and functional statements:

Office of the Director (MT-1): (1) Provides leadership and direction toward the development of the Center's goals and serves as the focal point for the Department's effort to improve and expand substance abuse treatment; (2) plans, directs, and provides overall administration of the programs of CSAT; (3) coordinates Center managed care activities; (4) coordinates Center chemotherapeutic interventions and alternative therapy activities; and (5) monitors the conduct of Equal Employment Opportunity activities of CSAT.

Office of Communications and External Liaison (MTA): (1) Plans, implements, and oversees a comprehensive public information program on behalf of the Center, including dissemination of news and information to the media, general public, Federal departments, State and local Governments, professional organizations, and public interest groups; (2) develops strategy for educating the public about the value of substance abuse treatment; (3) maintains the Center Director's Hotline; (4) serves as the Center coordinating point for manuscript clearance; and (5) serves as public affairs point of contact with constituency groups, consumers, and families.

Office of Policy Coordination and Planning (MTB): (1) Provides leadership and guidance in the analysis, planning, coordination, and assessment of overall CSAT policies and activities; (2) identifies, coordinates, and performs special analyses and policy studies; (3) provides general policy review and executive oversight of CSAT correspondence, and departmental assignments; (4) develops policy and program positions on critical issues to the substance abuse treatment field; (5) performs legislative and policy analyses relevant to substance abuse treatment; (6) provides liaison with the Office of the Administrator on legislative issues; (7) provides Center leadership in interdepartmental and intergovernmental activities and constituent relations; (8) serves as the Center focal point for the Freedom of information Act activities; (9) serves as the focal point with the Office of Program Services, concerning all aspects of administrative management, service, and operations; (10) develops budget

spending plan and executes Center budget; (11) provides recommendations concerning Center personnel actions and monitors Center workload performance and productivity; (12) provides staff support for the CSAT National Advisory Council; (13) coordinates the development of an agenda of priorities for new knowledge development and application (KDA) activities; and (14) coordinates the preparation and review of Guidance for Applications (GFA's) soliciting applications for new KDA programs.

Office of Evaluation, Scientific Analysis, and Synthesis (MTC): (1) Oversees the design and plan for evaluations of treatment programs funded by CSAT; (2) maintains current information regarding developments in alcohol and other substance abuse, including related infectious diseases; (3) works with relevant Federal, State, professional, and scientific organizations to identify significant advances in treatment that should be incorporated into standards of care; (4) incorporates and diffuses into treatment practice, those approaches, methods, and procedures identified as "best practices;" (5) serves as the focus for data collection and analysis, evaluation, and information exchange on areas of special knowledge among CSAT, other SAMHSA organizations and other Federal agencies, national organizations, and State and local Governments on matters relating to substance abuse treatment programs; (6) establishes, develops and maintains for use by staff of CSAT the State Information System to analyze data for State profiles and other relevant activities; (7) conducts and supports studies of need for treatment at the State level, providing technical assistance for States in carrying out these studies; (8) based on analysis of needs assessments, project information, and evaluation report publishes, communicates, and disseminates data and information regarding increasing treatment effectiveness and efficiency; (9) develops and manages the professional development program for substance abuse treatment; (10) conducts and supports meetings and conferences designed to upgrade treatment evaluation practices and communicates new developments to treatment personnel from a variety of professional disciplines; and (11) works collaboratively with other CSAT staff to develop guidance for Applications for future knowledge development and application programs.

Division of State and Community Assistance (MTE): (1) Administers the CSAT Performance Partnership Grant (PPG) negotiating PPG agreements with

States; (2) monitors and ensures State compliance with legislative and regulatory provisions which apply to PPG funds at State and provider levels; (3) provides guidance and technical assistance to States in preparation of State Substance Abuse plans; (4) conducts performance reviews of State agencies and treatment programs; (5) works closely with data and evaluation to assure proper reporting and data integrity; and (6) reviews requests for Medicaid Waivers for the Health Care Financing Administration.

Division of Practice and Systems Development (MTF): (1) Develops, plans, implements, and monitors national knowledge development activities (KDA's) designed to increase the knowledge base to improve substance abuse treatment (both clinical and systems of care) throughout the United States; (2) collaborates on development of Guidance for Applications and Requests for Contracts for the national KDA agenda; (3) monitors grants, cooperative agreements, contracts, interagency agreements, and memoranda of understanding for knowledge development, and assists grantees in project implementation; (4) identifies need for, develops and provides technical assistance to, national knowledge development activities; (5) establishes and maintains collaborative relationships with other Federal, State and local governmental agencies; national organizations; and constituency groups; (6) maintains internal expertise and collaborates with national experts on knowledge development topical areas, and issues of policy significance; (7) provides national leadership in areas related to substance abuse treatment knowledge development and provides advice on related policy issues to the Director, CSAT; and (8) develops funding levels for division programs and activities.

These organizational changes are effective July 19, 1996.

Dated: July 19, 1996.
Nelba Chavez,
Administrator.
[FR Doc. 96-19030 Filed 7-25-96; 8:45 am]
BILLING CODE 4160-01-M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-3778-N-95]

Office of the Assistant Secretary for Community Planning and Development; Federal Property Suitable as Facilities To Assist the Homeless

AGENCY: Office of the Assistant Secretary for Community Planning and Development, HUD.

ACTION: Notice.

SUMMARY: This Notice identified unutilized, underutilized, excess, and surplus Federal property reviewed by HUD for suitability for possible use to assist the homeless.

EFFECTIVE DATE: July 26, 1996.

FOR FURTHER INFORMATION CONTACT: Mark Johnston, Department of Housing and Urban Development, Room 7256, 451 Seventh Street, SW, Washington, DC 20410; telephone (202) 708-1226; TDD number for the hearing- and speech-impaired (202) 708-2565, (these telephone numbers are not toll-free), or call the toll-free Title V information line at 1-800-927-7588.

SUPPLEMENTARY INFORMATION: In accordance with the December 12, 1988 court order in *National Coalition for the Homeless v. Veterans Administration*, No. 88-2503-OG (D.D.C.), HUD publishes a Notice, on a weekly basis, identifying unutilized, underutilized, excess and surplus Federal buildings and real property that HUD has reviewed for suitability for use to assist the homeless. Today's Notice is for the purpose of announcing that no additional properties have been determined suitable or unsuitable this week.

Dated: July 19, 1996.
Jacquie M. Lawing,
Deputy Assistant Secretary for Economic Development.
[FR Doc. 96-18803 Filed 7-25-96; 8:45 am]
BILLING CODE 4210-29-M

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

Information Collection Request for Approval

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice.

SUMMARY: This notice announces that the Fish and Wildlife Service (Service) is planning to submit a proposal for the