

Survey, and Post Construction O&M Survey. *Need and Use of Information Collection:* The IHS goal is to raise the health status of the American Indian and Alaska Native people to the highest possible level by providing comprehensive health care and preventive health services. To support the IHS mission, the Sanitation Facilities Construction Program (SFCP) provides technical and financial assistance to American Indian Tribes and Alaska Native villages for cooperative development and continued operation of safe water, wastewater, and solid waste systems and related support facilities.

The IHS of Environmental Health and Engineering (OEHE), SFCP "Customer

Satisfaction Surveys," will provide the information needed to complete these goals. With the information collected from Tribal homeowners, Tribal leaders, and Tribal operation and maintenance operators, the Sanitation facilities programs will make improvements that will result in improved quality of services.

Voluntary customer satisfaction surveys will be conducted through phone calls, mail, and the Internet. The information gathered will be used by agency management and staff to identify strengths and weaknesses in current service provision, to plan and redirect resources, to make improvements that are practical and feasible, and to provide vital feedback to partner

agencies, Tribal leaders, system operators, health boards, and community members regarding customer satisfaction or dissatisfaction with the *SFCP. Affected Public:* Individuals. *Type of Respondents:* Tribal homeowners, Tribal leaders, and Tribal operation and maintenance operators.

*The table below provides:* Types of data collection instruments, Estimated number of respondents, Number of responses per respondent, Annual number of responses, Average burden hours per response, and Total annual burden hour(s).

Data collection instrument(s)	Number of respondents	Responses per respondent	Total annual response	Burden hours per response*	Annual burden hours
Tribal Homeowner Survey .....	1,300	1	1,300	3	65
Tribal Partner Survey .....	175	1	175	3	8.75
Annual Operator O&M Survey .....	125	1	125	3	6.25
Post Construction O&M Survey .....	200	1	200	3	10
<b>Total .....</b>	<b>1,800</b>	<b>.....</b>	<b>.....</b>	<b>.....</b>	<b>90</b>

There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

*Request for Comments:* Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

*Send Comments and Requests for Further Information:* Send your written comments, requests for more information on the proposed collection, or requests to obtain a copy of the data collection instrument(s) and instructions to: Ms. Betty Gould, Reports Clearance Officer, 801 Thompson Ave., TMP, Suite 450, Rockville, MD 20852-1601; call (301) 443-7899; send via facsimile to (301) 443-2316; or send your e-mail requests,

comments, and return address to: [Betty.Gould@ihs.gov](mailto:Betty.Gould@ihs.gov).

*Comment Due Date:* Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication.

Dated: August 28, 2009.

**Yvette Roubideaux,**

*Director, Indian Health Service.*

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## 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.

#### Project: Adult Treatment Drug Court Cross-Site Evaluation for the Substance Abuse and Mental Health Services Administration (SAMHSA)—NEW

SAMHSA's Center for Substance Abuse Treatment (CSAT) is responsible for collecting data from 20 recently funded Adult Treatment Drug Court grantees and clients being served by expansion and/or enhancement grants. The main evaluation question is whether the addition of substance abuse treatment resources increases the positive results of drug courts. SAMHSA's CSAT-funded grantees are required to participate in a cross-site evaluation as a contingency of their award. Data on each drug court and their processes will be collected during three annual site visits. Some data will be obtained through courtroom observations; no questionnaire will be administered to collect observational data. Additional data will be collected through interviews with drug court personnel and focus groups and interviews with drug court clients.

CSAT requests approval for administering questionnaires to drug court personnel. CSAT also requests approval for conducting focus groups with drug court clients and administering questionnaires at 6-months post-discharge from the drug court.

**Drug Court Team Questionnaire**

This questionnaire will be administered to key drug court personnel (e.g., judge, drug court manager and treatment provider) during the three annual site visits to the drug court. This instrument consists of 15 open-ended questions, and will ask respondents about their role and involvement in the drug court process, perceptions of drug courts, and the role of treatment and coercion in drug courts (subject to OMB approval).

**Drug Court Client Focus Group Questions for Guided Discussion**

Focus groups will be conducted during the annual site visits to each drug court. During the focus groups, drug court clients will be asked 12 open-ended questions about their experiences in the drug court program and current efforts towards recovery. Drug court participants will be involved in focus groups on 1 to 3 occasions.

**Procedural Justice Questionnaire**

This instrument contains 13 items and asks drug court clients about their perceptions regarding fair treatment by the judge and drug court team during the drug court process. It is hypothesized that participants who

perceive the judge and drug court team as fair will be more compliant with the drug court program, more likely to graduate, and have better substance use and criminal behavior outcomes (e.g., reduced substance use, fewer arrests). This questionnaire will be administered to drug court participants once, during the 6-month post-discharge interview.

**Correctional Mental Health Screener for Women**

A mental health screener for women (CMHS-W) will be administered to gather data on drug court participants' mental health. Many drug court clients have co-occurring disorders (i.e., substance use and mental health disorders). The information gathered during this portion of the in-person drug court client interviews will provide a post-discharge indicator of mental health status and will be used as a moderator variable when assessing client outcomes such as drug use and arrest. This questionnaire will be administered to drug court participants once, during the 6-month post-discharge interview. The CMHS-W contains eight questions, and six items are common between the men and women's versions of the instrument.

**Correctional Mental Health Screener for Men**

A mental health screener for men (CMHS-M) will be administered to gather data on drug court participants' mental health. Many drug court clients have co-occurring disorders (i.e., substance use and mental health disorders). The information gathered during this portion of the in-person drug court client interviews will provide a post-discharge indicator of mental health status and will be used as a moderator variable when assessing client outcomes such as drug use and arrest. This questionnaire will be administered to drug court participants once, during the 6-month post-discharge interview. The CMHS-M contains twelve questions and the two instruments have six items in common.

**Treatment Satisfaction Index**

The Treatment Satisfaction Index will ask drug court participants about their satisfaction with treatment received during the drug court program. This 19-item questionnaire will be administered to drug court participants once, during the 6-month post-discharge interview.

The estimated response burden for this data collection is provided in the table below:

ANNUALIZED ESTIMATES OF HOUR BURDEN

	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Drug court team questionnaire .....	240	3	720	.5	120
Drug court clients focus group questions for guided discussion .....	600	1	600	1.0	600
Drug court clients—interviews .....	816	1	816	.5	408
Procedural justice questionnaire .....	816	1	816	.09	73
Correctional mental health screener—women .....	408	1	408	.08	33
Correctional mental health screener—men .....	408	1	408	.08	33
Treatment satisfaction index .....	816	1	816	.08	65
Total .....	1,656	.....	2,136	.....	1,128

The estimates in this table reflect the maximum burden for participation in the Adult Treatment Drug Court Cross-Site Evaluation. Burden for drug court personnel is aggregated to reflect total burden over the three-year study period. The drug court personnel questionnaire will be administered three times; once during each of three study years. Burden for the drug court clients is annualized. Focus groups and interviews are one-time events. Some drug court clients will participate in both a focus group and 6-month post-discharge interview.

Written comments and recommendations concerning the proposed information collection should

be sent by October 8, 2009 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: 202-395-5806.

Dated: August 28, 2009.

**Elaine Parry,**

*Director, Office of Program Services.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Food and Drug Administration**

[Docket No. FDA-2004-N-0451] (formerly Docket No. 2004N-0226)

**Food and Drug Administration  
Modernization Act of 1997:  
Modifications to the List of Recognized  
Standards, Recognition List Number:  
022**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.