

Date: February 7–8, 2011.

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

Agenda: To review and evaluate grant applications.

Place: Doubletree Guest Suites Hotel at Doheny Beach, 34402 Pacific Coast Highway, Dana Point, CA 92629.

Contact Person: Behrouz Shabestari, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5106, MSC 7854, Bethesda, MD 20892. (301) 435–2409. shabestb@csr.nih.gov.

Name of Committee: Surgical Sciences, Biomedical Imaging and Bioengineering Integrated Review Group, Bioengineering, Technology and Surgical Sciences Study Section.

Date: February 7–8, 2011.

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: Khalid Masood, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5120, MSC 7854, Bethesda, MD 20892. 301–435–2392. masoodk@csr.nih.gov.

Name of Committee: Biology of Development and Aging Integrated Review Group, Aging Systems and Geriatrics Study Section.

Date: February 7–8, 2011.

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

Agenda: To review and evaluate grant applications.

Place: Sheraton Delfina Santa Monica Hotel, 530 West Pico Boulevard, Santa Monica, CA 90405.

Contact Person: James P. Harwood, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5168, MSC 7840, Bethesda, MD 20892. 301–435–1256. harwoodj@csr.nih.gov.

Name of Committee: Surgical Sciences, Biomedical Imaging and Bioengineering Integrated Review Group, Clinical Molecular Imaging and Probe Development.

Date: February 7–8, 2011.

Agenda: 2 p.m. to 12 p.m.

Place: To review and evaluate grant applications.

Contact Person: Doubletree Guest Suites Hotel at Doheny Beach, 34402 Pacific Coast Highway, Dana Point, CA 92629. Eileen W. Bradley, DSC, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5100, MSC 7854, Bethesda, MD 20892. (301) 435–1179. bradleye@csr.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel, Review of NCCR Resource Southwestern NMR Center for In Vivo Metabolism.

Date: February 7–9, 2011.

Time: 6 p.m. to 12 p.m.

Agenda: To review and evaluate grant applications.

Place: Hilton Garden Inn Dallas Market Center, 2325 North Stemmons Freeway, Dallas, TX 75207.

Contact Person: Antonio Sastre, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5215, MSC 7412, Bethesda, MD 20892. 301–435–2592. sastrea@csr.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 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: January 4, 2011.

Anna P. Snouffer,

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–257 Filed 1–7–11; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the Center for Scientific Review Special Emphasis Panel, January 10, 2011, 8 a.m. to January 11, 2011, 5 p.m., National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 which was published in the **Federal Register** on December 22, 2010, 75 FR 80508.

The starting time of the meeting on January 10, 2011 has been changed to 11 a.m. until adjournment on January 11, 2011. The meeting is closed to the public.

Dated: January 4, 2011.

Anna P. Snouffer,

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–255 Filed 1–7–11; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Closed Meeting

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

The meeting 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 Cancer Institute Initial Review Group; Subcommittee F—Manpower & Training. To review and evaluate grant applications.

Date: February 22–23, 2011.

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

Agenda: To review and evaluate grant applications.

Place: Hilton Alexandria Old Town, 1767 King Street, Alexandria, VA 22314.

Contact Person: Lynn M. Amende, PhD, Scientific Review Officer, Resources And Training Review Branch, Division of Extramural Activities, National Cancer Institute, NIH, 6116 Executive Blvd., Room 8105, Bethesda, MD 20892, 301–451–4759, amendel@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: January 4, 2011.

Jennifer S. Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–253 Filed 1–7–11; 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: 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: Program Evaluation for Assertive Adolescent & Family Treatment (AAFT) Program—NEW

The Substance Abuse and Mental Health Services Administration's (SAMHSA), Center for Substance Abuse Services (CSAT) has implemented the Assertive Adolescent and Family Treatment (AAFT) program to promote the adoption of evidence-based practices by community providers in the

area of adolescent substance use treatment. The AAFT program provides evidence-based substance use services to adolescents and their families, as well as to transition-age youth (TAY), caregivers, and their families/mentors. This program is based on evidence that families/caregivers and other appropriate adults are an integral part of the treatment process and their inclusion in services increases the likelihood of successful treatment and reintegration of adolescents/TAYs into their communities following treatment. AAFT requires grantees to implement the Adolescent Community Reinforcement Approach (A-CRA) coupled with Assertive Continuing Care (ACC) to provide treatment that is context-specific, family-centered, and community-based. Grantees are also required to use the Global Appraisal of Individual Needs (GAIN) as the common assessment instrument across programs to improve intake assessment, clinical interpretation, monitoring, and data management. The GAIN is used for diagnosis and to assist in placement, treatment planning, local evaluation, and continuous quality improvement for programs. In supporting AAFT and to ensure that each implementation activity required by AAFT is implemented well and as faithfully as possible by grantees, CSAT has provided, through Chestnut Health Systems, a well-thought-out package of implementation supports, including manual-assisted training in and

certification for clinical staff on A-CRA and ACC, training/certification in GAIN, monitoring/coaching/mentoring/support for clinicians and supervisors, implementation calls and monthly progress reports, and topical workgroups that share ideas and resources among grantees. The overarching objective of the multi-site, Assertive Adolescent and Family Treatment (AAFT) process and outcome evaluation is to assess and document the process of implementation in the 2009 cohort of AAFT grantees and to explore the role that implementation supports play in how well these programs evolve.

CSAT is requesting approval from the Office of Management and Budget (OMB) to implement a data collection document, the Annual Program Survey, to gather longitudinal data (end of each of 3 project years) from a range of grantee personnel to evaluate the implementation, expansion, and sustainability of adolescent substance use services developed under the AAFT program.

The current proposal requests implementing the Annual Program Survey to collect information in the following areas:

a. Attitudes toward evidence-based practices generally, and AAFT model components in particular (e.g., attitudes toward using a treatment manual, achieving certification);

b. Grantee involvement with the implementation supports provided by

Chestnut Health Systems and their reactions to those implementation supports;

c. Perceived changes in clinical practice/behavior indicating movement toward full A-CRA/ACC implementation;

d. Perceived barriers encountered in implementation and compensatory strategies;

e. Report on project progress, including activities related to the AAFT program, changes to program plans, project accomplishments, and efforts to plan for sustainability of the program.

This information would be collected annually—in October/November of each project year. The survey has three versions tailored to address the respondents' roles in the grant (Principal Investigator/Program Director, Clinical Supervisor/Clinician, and Evaluator/Data Manager). Staffing patterns at each grantee site vary greatly; therefore, CSAT is only able to estimate the total number of respondents for each category based on initial grantee proposals. CSAT expects to conduct surveys with approximately 21 administrators, 56 clinical staff, and 28 evaluators/data managers. The total number of respondents—105 individuals—represent project staff at three distinct levels across 14 grantee sites.

The burden estimate for completing the Annual Program Survey is as follows:

ANNUAL REPORTING BURDEN—SUMMARY TABLE

Data collection activity	Number of respondents ¹	Responses per respondent ²	Total responses	Average hours per response	Total hour burden	Wage rate (hourly)	Total hour cost (\$)
CY 2010–12 ANNUAL REPORTING BURDEN							
AAFT Implementation Survey—Principal Investigator/Program Director	21	1	21	0.75	15.75	50	787.50
AAFT Implementation Survey—Clinical Supervisor/Clinician	56	1	56	0.75	42	26	1,092.00
AAFT Implementation Survey—Evaluator/Data Manager	28	1	28	0.75	21	15	315.00
Annual Total	105	105	78.75	2,194.50

¹ Represents project staff at three distinct levels—administrators, clinical staff, evaluators—across 14 grantee sites. Number of respondents is an average of respondents per role based on staffing patterns described in grantee proposals.

² The AAFT Implementation Survey will be completed once by respondents at all 14 sites at the end of each project year.

Written comments and recommendations concerning the proposed information collection should be sent by February 9, 2011 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: January 3, 2011.

Elaine Parry,

Director, Office of Management, Technology and Operations.

[FR Doc. 2011-209 Filed 1-7-11; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

[Docket No. USCG-2009-0973]

Random Drug Testing Rate for Covered Crewmembers

AGENCY: Coast Guard, DHS.

ACTION: Notice of minimum random drug testing rate.

SUMMARY: The Coast Guard has set the calendar year 2011 minimum random drug testing rate at 50 percent of covered crewmembers.

DATES: The minimum random drug testing rate is effective January 1, 2011 through December 31, 2011. Marine employers must submit their 2010 Management Information System (MIS) reports no later than March 15, 2011.

ADDRESSES: Annual MIS reports may be submitted to Commandant (CG-545), U.S. Coast Guard Headquarters, 2100 Second Street, SW., STOP 7561, Washington, DC 20593-7581 or by electronic submission to the following Internet address: <http://homeport.uscg.mil/Drugtestreports>.

FOR FURTHER INFORMATION CONTACT: For questions about this notice, please contact Mr. Robert C. Schoening, Drug and Alcohol Program Manager, Office of Investigations and Casualty Analysis (CG-545), U.S. Coast Guard Headquarters, telephone 202-372-1033. If you have questions on viewing or submitting material to the docket, call Renee V. Wright, Program Manager, Docket Operations, telephone 202-366-9826.

SUPPLEMENTARY INFORMATION: Under 46 CFR 16.230, the Coast Guard requires marine employers to establish random drug testing programs for covered crewmembers on inspected and uninspected vessels.

Every marine employer is required by 46 CFR 16.500 to collect and maintain a record of drug testing program data for each calendar year, and submit this data by 15 March of the following year to the Coast Guard in an annual MIS report. Marine employers may either submit their own MIS reports or have a consortium or other employer representative submit the data in a consolidated MIS report.

The purpose of setting a minimum random drug testing rate is to assist the Coast Guard in analyzing its current approach for deterring and detecting illegal drug abuse in the maritime industry. The testing rate for calendar year 2010 was 50 percent.

The Coast Guard may lower this rate if, for two consecutive years, the drug test positive rate is less than 1.0 percent, in accordance with 46 CFR 16.230(f)(2).

Since 2009 MIS data indicates that the positive rate is greater than one percent industry-wide (1.03 percent), the Coast Guard announces that the minimum random drug testing rate will continue at 50 percent of covered employees for the period of January 1, 2011 through December 31, 2011 in accordance with 46 CFR 16.230(e).

Each year, the Coast Guard will publish a notice reporting the results of random drug testing for the previous calendar year's MIS data and the minimum annual percentage rate for random drug testing for the next calendar year.

Dated: December 23, 2010.

Kevin S. Cook,

Rear Admiral, U.S. Coast Guard, Director of Prevention Policy.

[FR Doc. 2011-170 Filed 1-7-11; 8:45 am]

BILLING CODE 9110-04-P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-5480-N-01]

Notice of Submission of Proposed Information Collection to OMB Survey of Market Absorption of New Multifamily Units

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

This survey provides the data necessary to measure the rate at which different types of new rental apartments and new condominium apartments are absorbed, that is, taken off the market, usually by being rented or sold, over the course of the first twelve months following completion of a building. The data is collected at quarterly intervals until the twelve months expire or until the units in a building are completely absorbed.

The survey also provides estimates of the characteristics of apartments being absorbed, and provides a basis for analyzing the degree to which apartment-building activity is meeting the present and future needs of the public. Data are collected under Title 12, U.S.C. Sec. 1701Z-1 and 2.

DATES: *Comments Due Date:* February 9, 2011.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval Number (2528-0013) and should be sent to: HUD Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503; fax: 202-395-5806. E-mail: OIRA_Submission@omb.eop.gov.

FOR FURTHER INFORMATION CONTACT:

Colette Pollard, Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail Colette.Pollard@hud.gov or telephone (202) 402-3400. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Pollard.

SUPPLEMENTARY INFORMATION: This notice informs the public that the Department of Housing and Urban Development has submitted to OMB a request for approval of the Information collection described below. This notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

This notice also lists the following information:

Title of Proposal: Survey of Market Absorption of New Multifamily Units.

OMB Approval Number: 2528-0013.

Form Numbers: H-31.