

use of automated collection techniques or other forms of information technology.

Proposed Project: 1998 National Household Survey on Drug Abuse—Revision—The National Household Survey on Drug Abuse (NHSDA) is a survey of the civilian, noninstitutionalized population of the

United States, age 12 and over. The data are used to determine the prevalence of use of cigarettes, alcohol, and illicit substances, and illicit use of prescription drugs. The results are used by SAMHSA, ONDCP, Federal government agencies, and other organizations and researchers to establish policy, direct program

activities, and better allocate resources. For 1998, the core NHSDA questionnaire will remain unchanged, however several special topic modules are expected to change. The total annual burden estimate is 43,855 hours as shown below:

	No. of respondents	No. of responses per respondent	Average burden per response (hours)	Total burden (hours)
Household Screener .....	84,966	1	0.05	4,248
NHSDA Questionnaire .....	33,565	1	1.18	39,607

Send comments to Beatrice Rouse, SAMHSA Reports Clearance Officer, Room 16-105, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: June 25, 1997.

**Richard Kopanda,**

*Executive Officer, Substance Abuse and Mental Health Services Administration.*  
[FR Doc. 97-17274 Filed 7-1-97; 8:45 am]

BILLING CODE 4162-20-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities Under OMB Review

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list 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 (301)443-8005.

The Annual Census of Patient Characteristics in State and County

Mental Hospital Inpatient Services—Revision—The Census is a complete enumeration of all State and county mental hospitals and collects aggregate information by age, gender, and diagnosis for each State on the number of additions during the year and resident patients who are physically present for 24 hours per day in the inpatient service at the end of the reporting year. First conducted in 1840, the Census has provided information throughout the years that is not available from any other sources. The Census is the primary means within the Center for Mental Health Services for assessing deinstitutionalization practices of State and county mental hospitals. The annual burden estimate is as follows:

	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total annual burden (hours)
State Statisticians and Superintendents of State Mental Hospitals .....	58	1	2	116

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Virginia Huth, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10236, Washington, DC 20503.

Dated: June 12, 1997.

**Richard Kopanda,**

*Executive Officer, Substance Abuse and Mental Health Services Administration.*  
[FR Doc. 97-17272 Filed 7-1-97; 8:45 am]

BILLING CODE 4162-20-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities Under OMB Review

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list 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 (301) 443-8005.

Protection and Advocacy for Individuals with Mental Illness (PAIMI) Annual Program Performance Report—

Revision—The PAIMI Act (Pub. L. 99-319) authorized funds to support activities on behalf of individuals with mental illness. Recipients of this formula grant program are required by law to annually report their activities and accomplishments to include the number of individuals served, types of facilities involved, types of activities undertaken and accomplishments resulting from such activities. This summary must also include a separate report prepared by the PAIMI Advisory Council descriptive of its activities and assessment of the operations of the protection and advocacy system. The annual burden estimate is as follows:

	No. of respondents	No. of responses per respondent	Hours per response	Total hour burden
Annual Program:				
Performance Report .....	56	1	37	2,072
Activities and accomplishments .....			(29)	(1,624)
Performance outcomes .....			(3)	(168)
Expense report .....			(2)	(112)
Budget .....			(2)	(112)
Priority statement .....			(1)	(56)
Advisory Council Report .....	56	1	10	560
Total .....				2,632

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Virginia Huth, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10236, Washington, DC 20503.

Dated: June 12, 1997.

**Richard Kopanda,**

*Executive Officer, Substance Abuse and Mental Health Services Administration.*

[FR Doc. 97-17273 Filed 7-1-97; 8:45 am]

BILLING CODE 4162-20-P

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4120-N-05]

### Assessment of the Reasonable Revitalization Potential of Certain Public Housing Required by Law; Further Amendment to Timeframes

**AGENCY:** Office of the Assistant Secretary for Public and Indian Housing, HUD.

**ACTION:** Notice.

**SUMMARY:** On September 26, 1996, the Department published a notice which implements section 202 of the Omnibus Consolidated Rescissions and Appropriations Act of 1996. Section 202 requires PHAs to identify certain distressed public housing developments that will be required to be replaced with tenant-based assistance if they cannot be revitalized by any reasonable means. In that eventuality, households in occupancy would be offered tenant-based or project-based assistance and would be relocated—if sufficient housing will not be maintained, rehabilitated, or replaced on the current site—to other decent, safe, sanitary, and affordable housing which is, to the maximum extent practicable, housing of their choice.

On December 26, 1996, at 61 FR 68048, the Department issued a notice which amended the timeframes that the Department set in the September 26, 1996 notice for accomplishing the standards necessary for compliance with section 202.

A March 24, 1997 notice, at 62 FR 13894, made a further amendment to the timeframes by extending the March 31, 1997 deadline for accomplishing Standard D until June 30, 1997.

This notice makes further amendments to the timeframes.

**EFFECTIVE DATE:** July 2, 1997.

**FOR FURTHER INFORMATION CONTACT:** Rod Solomon, Senior Director for Policy and Legislation, Public and Indian Housing, Room 4116, Department of Housing and Urban Development, 451 7th Street, SW, Washington, DC 20410, telephone (202) 708-0713. For hearing or speech impaired persons, this number may be accessed via TTY by contacting the Federal Information Relay Service at 1-800-877-8339.

**SUPPLEMENTARY INFORMATION:** Section 202 of the Omnibus Consolidated Rescissions and Appropriations Act of 1996 (Pub. L. 104-134, 110 Stat. 1321-279, 42 U.S.C. 14371 note) ("OCRA") requires PHAs to identify certain distressed public housing developments that will be required to be assessed. Households in occupancy would be offered tenant-based or project-based assistance (that can include other public housing units) and would be relocated—if sufficient housing will not be maintained, rehabilitated, or replaced on the current site—to other decent, safe, sanitary, and affordable housing which is, to the maximum extent practicable, housing of their choice. After residents are relocated, the distressed developments (or affected buildings) for which no reasonable means of revitalization exists will be removed from the public housing inventory.

On September 26, 1996, at 61 FR 50632, the Department published a

notice to implement section 202 of OCRA. The notice established the standards for conducting the assessments and the conversion plan. It also set forth certain timeframes for meeting those standards. The timeframes set in that notice were amended by publication of a notice in the **Federal Register** on December 26, 1996, at 61 FR 68048, in order to be equitable to all of the housing authorities to be assessed. On March 24, 1997, the Department issued another notice, at 62 FR 13894, which further amended the timeframes by extending the March 31, 1997 deadline for accomplishing Standard D until June 30, 1997.

This notice makes a further amendment to the timeframes. Based on further analysis and the public comments received on the September 26, 1996 notice, the Department will issue an interim rule which will modify substantially Standard D, as well as respond to the public comments received on the September 26, 1996 notice.

PHAs that have already prepared analyses and developed plans in accordance with the September 26, 1996 notice are invited to submit them, if they have not done so already.

The new deadlines for submissions to HUD field offices are as follows:

Accomplish Standards A to C by January 31, 1997 (was December 29, 1996).

Accomplish Standard D and E thirty (30) days after the effective date of the interim rule (was June 30, 1997).

Submit conversion plan ninety (90) days after accomplishing Standards D and E (was September 26, 1997).

Dated: June 27, 1997.

**Kevin Emanuel Marchman,**  
*Acting Assistant Secretary for Public and Indian Housing.*

[FR Doc. 97-17466 Filed 6-30-97; 12:13 pm]

BILLING CODE 4210-33-P