

demographics, revenues and expenditures, and staffing. The dataset produced will be used to provide

national statistical estimates and will be the basis of the National Directory of

Mental Health Services. The annual burden estimate is as follows:

	Number of respondents	Annual number of responses per respondent	Average hours per response	Annual burden hours
Phase I	10,559	1	0.23	2,478
Specialty Mental Health Organizations	(3,235)	(1)	(00.20)	(647)
General Hospitals with Psychiatric Services	(1,374)	(1)	(00.25)	(343)
General Hospitals to be screened for Psychiatric Services	(4,080)	(1)	(00.25)	(1,020)
Community Residential Organizations	(1,275)	(1)	(00.25)	(319)
Managed Care Organizations	(595)	(1)	(00.25)	(149)
Phase II (Sample Survey)	3,229	1	2.0	6,939
Specialty Mental Health Organizations	(2,267)	(1)	(02.0)	(4,534)
General Hospitals with Psychiatric Services	(962)	(1)	(02.5)	(2,405)
Total	13,788	9,417

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: December 12, 1997.

Richard Kopanda,

Executive Officer, SAMHSA.

[FR Doc. 97-33011 Filed 12-17-97; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Substance Abuse and Mental Health Services

Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the SAMHSA Reports Clearance Officer on (301) 443-8005.

Comments are invited on: (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project

Community Mental Health Services (CMHS) Block Grant Application, FY98—Revision—The ADAMHA

Reorganization Act 42 U.S.C. 300x1-9 established the Community Mental Health Services Block Grant program which authorized block grants to States to provide community based mental health services. Under provision of the law, States may receive allotments only after an application is approved by the Secretary. Further, the Act requires States to submit to the Secretary a plan for providing comprehensive community mental health services to adults with a serious mental illness and to children with a serious emotional disturbance and an annual implementation report on the block grant fund activities for the previous year. This block grant program is administered by SAMHSA's Center for Mental Health Services (CMHS). The proposed application reflects the criteria, assurances, and requirements set forth in Pub. L. 102-321. The revision includes the consolidation of the criteria for application and reduced respondent burden.

The annual burden estimates are as follows:

	Number of respondents	Number of responses per respondent	Average burden per response	Annual burden hours
States and Territories	59	1	210	12,390

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.

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Richard Kopanda,

Executive Officer, SAMHSA.

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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 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.

Proposed Project: 1998 Inventory of Mental Health Services in Juvenile Justice Facilities—New—This survey will gather information for the first time about the availability of mental health services in the universe of approximately 3,100 juvenile justice facilities nationwide. State and national

information will be collected about the organization of mental health services, characteristics of youth receiving these services, and mental health staffing patterns and costs.

The total annual burden estimate is shown below.

	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total annual burden (hours)
Juvenile Justice Facilities	3,100	1	1.5	4,650

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Daniel J. Chenok, Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 10236, Washington, DC 20503.

Dated: December 12, 1997.

Richard Kopanda,

Executive Officer, SAMHSA.

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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 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.

Proposed Project

Protection and Advocacy for Individuals with Mental Illness (PAIMI) Final Rule—Information collection requirements in the Final Rule for the protection and advocacy programs serving individuals with mental illness. The development of regulations and

issuance of the Final Rule meets the directive under Pub. L. 102-173, "Protection and Advocacy for Mentally Ill Individuals Amendments Act of 1991" (PAIMI Act), 42 U.S.C. 10826(b), requiring the Secretary to promulgate final regulations to carry out the Act. 45 CFR Subchapter 51 of the Final Rule contains information collection requirements.

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:

	Annual number of respondents	Annual frequency	Average burden per response	Annual burden hours
Section 51.8(a)(2) Program Performance Report:	56	1	35.0	*1,960
Part I			(33.0)	
Part II			(2.0)	
Section 51.8(a)(8) Advisory Council: Report	56	1	10.0	*560
Section 51.10 Remedial Actions:				
Corrective Action Plan	6	1	8.0	48
Implementation Status Report	6	3	2.0	36
Section 51.23(c) Reports, materials and fiscal data to Advisory Council	56	1	1.0	56
Section 51.25(b)(2) Grievance Procedure	56	1	0.5	28
Total	124			2,688

*Burden hours associated with the Annual Performance Report and Advisory Council Report are approved under OMB Control No. 0930-0169.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Daniel J. Chenok, Office of Information and Regulatory Affairs, Office of

Management and Budget, New Executive Office Building, Room 10236, Washington, DC 20503.

Dated: December 12, 1997.

Richard Kopanda,

Executive Officer, SAMHSA.

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