

*Place:* NATIONAL LIBRARY OF MEDICINE, 8600 ROCKVILLE PIKE, BOARD ROOM, BETHESDA, MD 20894.

*Contact Person:* SHELDON KOTZIN, BA, CHIEF, BIBLIOGRAPHIC SERVICES DIVISION/LIBRARY OPERATIONS NLM, NATIONAL LIBRARY OF MEDICINE, 8600 ROCKVILLE PIKE, BLDG 38A/ROOM 4N419, BETHESDA, MD 20894. (Catalogue of Federal Domestic Assistance Program No. 93.879, Medical Library Assistance, National Institutes of Health, HHS)

Dated: September 10, 1998.

**LaVerne Y. Stringfield,**

*Committee Management Officer, NIH.*

[FR Doc. 98-24996 Filed 9-17-98; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Library of Medicine; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the Board of Scientific Counselors, National Center for Biotechnology Information, National Library of Medicine.

The meeting will be closed to the public as indicated below in accordance with the provisions set forth in section 552b(c)(6), Title 5 U.S.C., as amended for the review, discussion, and evaluation of individual intramural programs and projects conducted by the National Library of Medicine, including consideration of personnel qualifications and performance, and the competence of individual investigators, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* Board of Scientific counselors, National Center for Biotechnology Information, National Library of Medicine.

*Date:* October 19-20, 1998.

*Time:* October 19, 1998, 7:00 PM to 10:00 PM.

*Agenda:* To review and evaluate personal qualifications and performance, and competence of individual investigators.

*Place:* The Hyatt Regency Hotel, 100 Bethesda Metro Center, Bethesda, MD 20814.

*Time:* October 20, 1998, 8:30 AM to 2:00 PM.

*Agenda:* To review and evaluate personal qualifications and performance, and competence of individual investigators.

*Place:* National Library of Medicine, 8600 Rockville Pike, Board Room, Bethesda, MD 20894.

*Contact Person:* David J. Lipman, MD, Director, Natl Ctr for Biotechnology Information, National Library of Medicine,

Department of Health and Human Services, Bethesda, MD 20894.

(Catalogue of Federal Domestic Assistance Program Nos. 93.879, Medical Library Assistance, National Institutes of Health, HHS)

Dated: September 14, 1998.

**LaVerne Y. Stringfield,**

*Committee Management Officer, NIH.*

[FR Doc. 98-24998 Filed 9-17-98; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Center for Scientific Review; Notice of Closed Meeting

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 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:* Center for Scientific Review Special Emphasis Panel.

*Date:* September 17, 1998.

*Time:* 8:30 AM to 5:00 PM.

*Agenda:* To review and evaluate grant applications.

*Place:* Chevy Chase Holiday Inn, Chevy Chase, MD 20815.

*Contact Person:* Michael Micklin, PhD., Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5198, MSC 7848, Bethesda, MD 20892, 301-435-1258.

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

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

Dated: September 11, 1998.

**LaVerne Y. Stringfield,**

*Committee Management Officer, NIH.*

[FR Doc. 98-24997 Filed 9-17-98; 8:45 am]

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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)443-7978.

#### Proposed Project: Development and Implementation of Methadone/LAAM Treatment Program (MTP) Accreditation Project

New—OMB approval is sought for information collections related to the development and implementation of the methadone/LAAM accreditation program by the Center for Substance Abuse Treatment (CSAT), SAMHSA. The project implements a limited test of an accreditation-based model which may form the basis for a new Department of Health and Human Services regulatory/accreditation program for MTPs. The project does not supplant FDA regulations and is designed in compliance with current FDA treatment regulations set forth under 21 CFR 291.505. The project will operate under an FDA exemption from certain specific existing regulatory requirements. MTPs participating in this project will be exempt from certain FDA regulatory requirements and paperwork burden and will be required to meet requirements specified for this project.

This project, developed in conjunction with FDA and other Federal agencies, is based on "Guidelines for the Accreditation of Methadone/LAAM Treatment Programs" which were developed by experts in the substance abuse treatment field. In this project, two accrediting organizations will incorporate the Guidelines into their own accreditation standards so that the specific accreditation standards used by each accrediting body are built on the accreditation "Guidelines" and are crafted to be consonant with each accreditation body's existing philosophy and mode of operation. The project is designed to provide experience with the processes and costs associated with implementing an accreditation-based oversight system in the nation's MTPs. A separate evaluation of the project has been approved by the Office of

Management and Budget under control number 0930-0190.

Approval is sought for the specific record keeping and disclosure language in the Guidelines and for the following separate information collections to be

used by each accrediting organization: (1) an Accreditation Application; (2) Site Visit Feedback Questionnaire; (3) Performance Improvement Plan. Most of the record keeping and reporting requirements describe procedures that

would be employed in any MTP in conformance with existing state and federal requirements and with standard, quality clinical practice. The estimated annualized burden for this four-year project is summarized below.

Information collection requirement	No. of respondents	No. of responses/respondent	Average hour burden per response	Total burden hours
<b>Recordkeeping</b>				
II., p. 3: documentation of compliance with all local & state safety & environmental codes.	300	<sup>1</sup> 1.33	0.08 (5 minutes) .....	32
X., p. 17: documentation every 90 days of physician's decision on continuing patient's "take-home" medication.	300	<sup>2</sup> 150	0.05 (3 minutes) .....	2,250
XI. D. 4., p. 21: documentation of steps taken to avoid discharge when patient requests discharge.	300	<sup>3</sup> 100	0.03 (2 minutes) .....	900
XIV. F. 2., p. 26: "on-call" staff access to roster of patients & medication dosages, for emergency use.	300	<sup>4</sup> 52	0.33 (20 minutes) .....	5,150
XV. B. 1., p. 28: documentation of reason for denial of admission to pregnant applicants.	300	<sup>5</sup> 50	0.02 (1 minute) .....	300
XVI. B. 3, p. 31: obtain written acknowledgment of receipt of program rules, regulations & patient rights & responsibilities.	300	<sup>6</sup> 1020	.02 (1 minute) .....	6,120
XVII. A.1., p. 34: medical record must contain patient identifying data & unique identifier.	300	<sup>7</sup> 1020	0.02 (1 minutes) .....	6,120
XVIII. 6., p. 38: requirement to document community relations efforts & community contacts.	300	<sup>8</sup> 6	1.00 .....	1,800
<b>Disclosure</b>				
III. B.3, p. 5: must post names & phone numbers of individuals to notify in emergency.	300	<sup>9</sup> 6	0.08 (5 minutes) .....	144
X. C. 2, p. 19: requirement to inform patients of rights & responsibilities regarding take-home medications.	300	<sup>10</sup> 150	0.03 (2 minutes) .....	1,350
XVI. F.3., p. 32: program must display policies & patient grievance procedures in patient care areas.	300	<sup>11</sup> 3	0.2 .....	80
MTP Review of Accreditation Standards .....	300	<sup>12</sup> 1.33	90.0 .....	35,910
Application Form .....	300	<sup>13</sup> 1.33	2.0 .....	800
Site Visit Questionnaire .....	300	<sup>14</sup> 1.33	0.5 .....	200
Quality Improvement Plan .....	300	<sup>15</sup> 1.33	3.0 .....	1,197
3-Year Total .....	300			62,353
Annualized Burden .....	300			20,784

<sup>1</sup> It is anticipated that of the total of 300 MTPs being asked to participate, 222 will receive one site visit, 46 will receive two site visits and 30 will receive three site visits, for a total of about 400 visits. On average, each program will receive 1.33 site visits (400/300 = 1.33).

<sup>2</sup> Based on the assumption that the average program of 140-capacity will require an average of 150 quarterly physician notes regarding "take home" medication over a 3-year period.

<sup>3</sup> Based on the assumption that the average program will have 100 discharge requests over a 3-year period.

<sup>4</sup> Based on the assumption that the average program will update the roster weekly.

<sup>5</sup> Based on the assumption that the average program of 140-patient capacity will deny admission to 50 pregnant applicants in a 3-year period.

<sup>6</sup> Based on the assumption that the average program of 140-patient capacity will admit 1020 patients in a 3-year period.

<sup>7</sup> Based on the assumption that the average program of 140-patient capacity will admit 1020 patients in a 3-year period.

<sup>8</sup> Assumes there will be 6 community relations activities (e.g., community advisory board meeting) held every three years and 1 hour to document each with written minutes.

<sup>9</sup> Based on the assumption that the average program will update this information twice per year.

<sup>10</sup> Based on the assumption that the average program will have 150 patients with take-home privileges over a 3 year period.

<sup>11</sup> Assumes each program updates these materials on an annual basis.

<sup>12</sup> It is anticipated that of the total of 300 MTPs being asked to participate, 222 will receive one site visit, 46 will receive two site visits and 30 will receive three site visits, for a total of about 400 visits. On average, each program will receive 1.33 site visits (400/300 = 1.33).

<sup>13</sup> It is anticipated that of the total of 300 MTPs being asked to participate, 222 will receive one site visit, 46 will receive two site visits and 30 will receive three site visits, for a total of about 400 visits. On average, each program will receive 1.33 site visits (400/300 = 1.33).

<sup>14</sup> It is anticipated that of the total of 300 MTPs being asked to participate, 222 will receive one site visit, 46 will receive two site visits and 30 will receive three site visits, for a total of about 400 visits. On average, each program will receive 1.33 site visits (400/300 = 1.33).

<sup>15</sup> It is anticipated that of the total of 300 MTPs being asked to participate, 222 will receive one site visit, 46 will receive two site visits and 30 will receive three site visits, for a total of about 400 visits. On average, each program will receive 1.33 site visits (400/300 = 1.33).

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Daniel Chenok, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office

Building, Room 10235, Washington, D.C. 20503.

Dated: September 14, 1998.

**Richard Kopanda,**

*Executive Officer, SAMHSA.*

[FR Doc. 98-25032 Filed 9-17-98; 8:45 am]

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