

TRANSACTION GRANTED EARLY TERMINATION—Continued

ET Date	Trans No.	ET Req status	Party name
	20110098	G G G G G	Clipper Windpower Plc. Clipper Windpower Plc. Northern Tier Investors LLC. Marathon Oil Corporation. Northern Tier Holdings LLC.

FOR FURTHER INFORMATION CONTACT:

Sandra M. Peay, Contact Representative or Renee Chapman, Contact Representative, Federal Trade Commission, Premerger Notification Office, Bureau of Competition, Room H-303, Washington, DC 20580, (202) 326-3100.

By Direction of the Commission.

Donald S. Clark,
Secretary.

[FR Doc. 2010-28369 Filed 11-12-10; 8:45 am]

BILLING CODE 6750-01-M

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 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a

copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are 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: National Suicide Prevention Lifeline—Crisis Center Survey—NEW

The Substance Abuse and Mental Health Services Administration's (SAMHSA), Center for Mental Health Services funds a National Suicide Prevention Lifeline Network, a system of toll-free telephone numbers that routes calls from anywhere in the United States to a network of more than 147 certified crisis centers that can link callers to local emergency, mental health, and social service resources. The technology permits calls to be directed immediately to a suicide prevention

worker who is geographically closest to the caller.

Through its grantee which is administering the National Suicide Prevention Lifeline Network, SAMHSA developed a Crisis Center Survey in an effort to learn more about the capacities, skills, and unmet needs of the crisis centers involved in the Network. The completed Surveys will inform the Network's planning around technological capacity, network recruitment strategies, training, marketing, and other network resource development activities. The goal of this effort is to ensure that the telephonic routing system remains accurate, enhance quality services provided by networked crisis centers, increase service accessibility to people at risk for suicidal behavior, and optimize public health efforts to prevent suicide and suicidal behavior.

All 147 networked crisis centers will complete the Web-based Crisis Center Survey annually. The Survey requests information about organizational structure, staffing, scope of services, call center operations, quality assurance, community outreach/marketing, telephone equipment, data collection, and technical assistance needs.

The estimated annual response burden to collect this information is as follows:

Instrument	Number of respondents	Responses/respondent	Total number of responses	Burden/response (hours)	Annual burden (hours)
National Suicide Prevention Lifeline: Crisis Center Survey	147	1	147	2	294

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 8-1099, 1 Choke Cherry Road, Rockville, MD 20850. Written comments should be received by January 14, 2011.

Dated: November 5, 2010.

Elaine Parry,

Director, Office of Management, Technology, and Operations.

[FR Doc. 2010-28668 Filed 11-12-10; 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: 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: 2011 National Survey on Drug Use and Health (OMB No. 0930-0110)—Revision

The National Survey on Drug Use and Health (NSDUH), formerly the National Household Survey on Drug Abuse (NHSDA) is a survey of the civilian, non-institutionalized population of the United States 12 years old and older. The survey is used to determine the prevalence of use of tobacco products, alcohol, illicit substances, and illicit use of prescription drugs. The survey is also used to collect information on mental health problems and the utilization of substance abuse and mental health services. 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.

The 2011 NSDUH will continue conducting a follow-up clinical interview with a subsample of approximately 1,500 respondents. The design of this study is based on the recommendations from a panel of expert consultants convened by SAMHSA's Center for Mental Health Services (CMHS), to discuss mental health surveillance data collection strategies.

The goal is to create a statistically sound measure that may be used to estimate the prevalence of Serious Mental Illness (SMI) among adults (age 18+).

For the 2011 NSDUH, no questionnaire changes are proposed.

As with all NSDUH/NHSDA surveys conducted since 1999, the sample size of the survey for 2011 will be sufficient to permit prevalence estimates for each of the 50 States and the District of Columbia.

Because the NSDUH collects data on substance use, mental health and the utilization of substance abuse and mental health services, it is an appropriate and convenient vehicle to measure the impact of the Deepwater Horizon oil spill on residents of that region. Therefore, SAMHSA is planning to expand the NSDUH by oversampling the geographic region impacted by the oil spill. The current NSDUH sample design will be implemented and an oversampling method that results in an additional 2,000 completed interviews in the gulf coast region will be employed. The additional interviews will be concentrated in the coastal counties of Alabama, Florida, Louisiana, and Mississippi. All survey instruments and protocols will be identical for this additional sample. The total number of respondents for the 2011 NSDUH will be 69,500, or 2,000 cases more than the planned sample size for 2010.

Though there will be some increase in the sample for all four States involved in the Deepwater Horizon event (Alabama, Florida, Louisiana, and

Mississippi), specific counties in the gulf coast region were chosen for focused over sampling. These counties were chosen based on the following criteria:

- Claims activity to BP for economic and related health needs;
- County involvement with Department of Education and Administration for Children and Families programming; and
- State assessment of impacted counties based on consultation with SAMHSA during the preparation of aid applications.

COUNTIES DESIGNATED AS THE MOST AFFECTED AREAS

State name	County/Parish name
Alabama	Baldwin, Clarke, Escambia, Mobile, Monroe, and Washington.
Florida	Bay, Escambia, Franklin, Gulf, Okaloosa, Santa Rosa, Wakulla, and Walton.
Louisiana	Iberia, Jefferson, Lafayette, Lafourche, Orleans, Plaquemines, St. Bernard, St. Martin, St. Mary, St. Tammany, Terrebonne, and Vermilion.
Mississippi	George, Hancock, Harrison, Jackson, Pearl River, and Stone.

The total annual burden estimate is shown below:

Instrument	No. of respondents	Responses per respondent	Hours per response	Total burden hours	Hourly wage rate	Annualized hourly costs
Household Screening	196,720	1	0.083	16,328	\$14.64	\$239,042
Interview	69,500	1	1.000	69,500	14.64	1,017,480
Clinical Follow-up Certification	90	1	1.000	90	14.64	1,318
Clinical Follow-up Interview	1,500	1	1.000	1,500	14.64	21,960
Screening Verification	5,560	1	0.067	373	14.64	5,461
Interview Verification	10,425	1	0.067	698	14.64	10,219
TOTAL	196,810			88,489		\$1,295,480

Written comments and recommendations concerning the proposed information collection should be sent by December 15, 2010 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: 202-395-7285.

Dated: November 8, 2010.

Elaine Parry,

Director, Office of Management, Technology and Operations.

[FR Doc. 2010-28670 Filed 11-12-10; 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: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the