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Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: October 24, 2007.

**Randall W. Lutter,**

*Deputy Commissioner for Policy.*

[FR Doc. E7-21630 Filed 11-2-07; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Cooperative Agreement for Poison Prevention Education; CFDA #93.253

**AGENCY:** Health Resources and Services Administration (HRSA), HHS.

**ACTION:** Notice of Single Source Award.

**SUMMARY:** HRSA will be enhancing the partnership with the Home Safety Council (HSC) to collaborate on reaching America's low literacy population. Through this project, additional poison prevention training materials targeting the low literacy population will be developed and distributed to the public, poison centers, safety and injury prevention professionals, health educators, and first responders. HRSA first announced the partnership with the HSC in the **Federal Register**, Vol. 71, No. 146, July 31, 2006.

**FOR FURTHER INFORMATION CONTACT:** Lori Roche, Director, Poison Control Program, Healthcare Systems Bureau, Room 11C-06, 5600 Fishers Lane, Rockville, MD 20857; Telephone: 301-443-0652; E-mail: [lroche@hrsa.gov](mailto:lroche@hrsa.gov).

#### SUPPLEMENTARY INFORMATION:

*Intended Recipient of the Award:* Home Safety Council.

*Amount of the Award:* \$75,000.

**Authority:** Section 1271 *et seq.* of the Public Health Service Act, 42 U.S.C. 300d-71 *et seq.* as amended by the Poison Center

Stabilization and Enhancement Grant Program.

*Project Period:* The period of the award is from September 1, 2007, through April 1, 2008.

#### Justification for the Exception to Competition

This project will be implemented through a single source cooperative agreement because the HSC is uniquely positioned to immediately undertake and complete the activities within the seven month time frame. HSC is currently developing low literacy poison prevention materials, and this project will enhance the existing package of materials. The HSC has existing organizational knowledge and experience in developing materials for the low literacy population through its Home Safety Literacy Project, of which this project will be a component. The HSC has an existing relationship with key stakeholders in place for reaching this vulnerable population, and the HSC project director has extensive expertise in poison prevention education.

Dated: October 26, 2007.

**Dennis P. Williams,**

*Deputy Administrator.*

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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 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: 2008-2010 National Survey on Drug Use and Health: Methodological Field Tests—NEW

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 data are used to determine the prevalence of use of tobacco products, alcohol, 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.

This will be a request for generic approval for information collection for NSDUH methodological field tests designed to examine the feasibility, quality, and efficiency of new procedures of revisions to the existing survey protocol. These field tests will examine ways to increase data quality, lower operating costs, and gain a better understanding of various sources of nonsampling error. If these tests provide successful results, current procedures may be revised and incorporated into the main study (e.g., questionnaire changes). Particular attention will be given to minimizing the impact of design changes so that survey data continue to remain comparable over time.

Field test activities are expected to include improving response rates among persons residing in controlled access communities (locked apartment buildings, gated communities, college dormitories, etc.), and conducting a nonresponse follow-up study. Cognitive laboratory testing will be conducted prior to the implementation of significant questionnaire modifications. These questionnaire modifications will also be pre-tested and the feasibility of text-to-speech software determined. To understand the effectiveness of current monetary incentive, a new incentive study will be conducted with varying incentive amounts. The relationship between incentives and veracity of reporting will also be examined. Tests will also be designed to determine the feasibility of alternative sample designs and modes of data collection. Lastly, a customer satisfaction survey of NSDUH data users will be conducted to improve the utility of the NSDUH data. Some of the above studies may be combined to introduce survey efficiencies.

The average annual burden associated with these activities over a three-year period is summarized below: