

Resnick. Functionally distinct polymorphic sequences in the human genome that are targets for p53 transactivation. *Proc Natl Acad Sci USA*. 2005 May 3;102(18):6431–6436.

8. MA Resnick and A Inga. Functional mutations in the sequence-specific transcription factor p53 and implications for master genes of diversity. *Proc Nat Acad Sci USA*. 2003 Aug 19;100(17):9934–9939.

9. A Inga, F Storici, TA Darden, MA Resnick. Differential transactivation by the p53 transcription factor is highly dependent on p53 level and promoter target sequence. *Mol Cell Biol*. 2002 Dec;22(24):8612–8625, 2002.

Patent Status:

U.S. Patent No. 7,256,260 issued 14 Aug 2007 (HHS Reference No. E–183–1999/0–US–07)

U.S. Patent Application No. 11/893,037 filed 14 Aug 2007 (HHS Reference No. E–183–1999/0–US–09)

European Patent Application No. 0094897.0 filed 28 July 2007, recently allowed (HHS Reference No. E–183–1999/0–EP–05)

Australian Patent No. 784293 issued 14 Aug 2007 (HHS Reference No. E–183–1999/0–AU–03)

Australian Patent Application No. 2006202361 filed 2 Jun 2006 (HHS Reference No. E–183–1999/0–AU–08)

Canadian Patent Application No. 2380631 filed 28 July 2000 (HHS Reference No. E–183–1999/0–CA–04)

Japanese Patent Application No. 2001–514117 filed 28 July 2000 (HHS Reference No. E–183–1999/0–JP–03)

Licensing Status: Available for exclusive or non-exclusive licensing.

Licensing Contact: Jennifer Wong; 301–435–4633; wongje@mail.nih.gov.

Dated: February 21, 2008.

Steven M. Ferguson,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. E8–3837 Filed 2–28–08; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, National Institutes of Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the Advisory Committee on Research on Women's Health.

The meeting will be open to the public, with attendance limited to space

available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

Name of Committee: Advisory Committee on Research on Women's Health.

Date: March 17, 2008.

Time: 8:30 a.m. to 4 p.m.

Agenda: Provide advice to the Office of Research on Women's Health (ORWH) on appropriate research activities with respect to women's health and related studies to be undertaken by the national research institutes; to provide recommendations regarding ORWH activities; to meet the mandates of the office; and for discussion of scientific issues.

Place: National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

Contact Person: Joyce Rudick, Director, Programs & Management, Office of Research on Women's Health, Office of the Director, National Institutes of Health, Building 1, Room 201, Bethesda, MD 20892, 301/402–1770.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Information is also available on the Institute's/Center's home page: <http://www.od.nih.gov/orwh/>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.14, Intramural Research Training Award; 93.22, Clinical Research Loan Repayment Program for Individuals from Disadvantaged Backgrounds; 93.232, Loan Repayment Program for Research Generally; 93.39, Academic Research Enhancement Award; 93.936, NIH Acquired Immunodeficiency Syndrome Research Loan Repayment Program; 93.187, Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds, National Institutes of Health, HHS)

Dated: February 21, 2008.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 08–888 Filed 2–28–08; 8:45 am]

BILLING CODE 4140–01–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: Data Toolkit Protocol for the Crisis Counseling Assistance and Training Program (CCP) (OMB No. 0930–0270)—Revision

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Mental Health Services (CMHS) will create a toolkit to be used for the purposes of collecting data on the Crisis Counseling Assistance and Training Program (CCP). The CCP provides supplemental funding to states and territories for individual and community crisis intervention services during a federal declared disaster in accordance with section 416, Robert T. Stafford Disaster Relief and Emergency Assistance Act (Pub. L. 93–288, as amended).

The CCP has provided disaster mental health services to millions of disaster survivors since its inception and, as a result of 30 years of accumulated expertise, it has become an important model for Federal response to a variety of catastrophic events. State CCPs, such as Project HOPE (after Hurricane Floyd in North Carolina), Project Heartland (in Oklahoma City after the Murrah Federal Building bombing), Project Liberty (in New York after 9/11), and Project Outreach for Recovery (after the Rhode Island nightclub fire), gulf coast States affected by the 2005 hurricanes, and recent 2007 southern California wildfires have primarily addressed the short-term mental and behavioral health needs of communities through (a) outreach and public education, (b) individual and group counseling, and (c) referral. Disaster victims are

normally resilient people responding to abnormally stressful events, thus crisis counseling services are directed at normalizing individuals' experience and distress. Outreach and public education serve primarily to normalize reactions and to engage people who might need further care. Crisis counseling is a strengths-based approach that assists survivors to cope with current stress and symptoms in order to return to predisaster functioning. Crisis counseling relies largely on "active listening," and crisis counselors also provide psycho-education (especially about the nature of responses to trauma) and help clients build coping skills. Crisis counseling may be a one time event or typically continues no more than a few times on several different occasions. Since crisis counseling is time-limited, referral is the third important function of CCPs. Counselors are expected to refer clients to formal treatment if the person has developed more serious psychiatric, substance abuse, or other severe behavioral health problems.

Data about services delivered and users of services will be collected throughout the program period. The data will be collected via the use of a toolkit that relies on standardized forms. At the program level, the data will be entered quickly and easily into a cumulative database to yield summary tables for progress reporting, such as quarterly and final, for the program. The data will be collected in a consistent way from all programs, so that data can be uploaded into an ongoing national database that likewise provides CMHS with a way of producing summary reports of services provided across all programs funded.

The components of the data tool kit are listed and described below:

- **Encounter logs.** These forms document all services provided. Completion of these logs by the crisis counselors is required during both the CCP Immediate Services Program (first 60 days after the disaster declaration) and the Regular Services Program (up to 9 months after Immediate Services Program). There are three types of encounter logs: (1) Individual Crisis Counseling Services Encounter Log; (2) Group Encounter Log; and (3) Weekly Tally Sheet.

- **Individual Crisis Counseling Services Encounter Log.** Crisis counseling is defined as an interaction that lasts at least 15 minutes and involves participant disclosure. This form is completed by the Crisis Counselor for each service recipient, defined as the person or persons who actively participated in the session (e.g., by verbally participating), not someone who is merely present. For families, complete separate forms for all family members who are actively engaged in the visit. Information collected includes demographics, service characteristics, risk factors, event reactions, and referral data.

- **Group Encounter Log.** This form also completed by crisis counselors is used to identify either a group crisis counseling encounter or a group public education encounter. A check at the top identifies the class of activities (i.e., counseling where participants do most of the talking or education where a formally presentation is conducted). Information collected includes services characteristics, group identity, and activity topics.

- **Weekly Tally Sheet.** Similar to the Individual and Group Encounter Logs, this form is completed by crisis counselors or other appropriate program staff and documents brief educational

and supportive encounters not captured on either the Individual or Group Encounter Logs. Information collected includes service characteristics, daily tallies and weekly totals for brief educational or supportive contacts such as mailings, telephone calls, email contacts and material distribution with no or minimal in-person interaction.

The following three tools of the Data Toolkit: (1) Assessment and Referral, (2) Participant Feedback, and (3) CCP Service Provider Feedback are typically introduced when the Regular Services Program begins. These tools are not required to be completed; they are strongly encouraged, but optional.

- **Assessment and Referral Tool.** This tool provides descriptive information about intense users of services, defined as all individuals receiving a third individual crisis counseling visit. This tool will be completed by the crisis counselor.

- **Participant Feedback.** These surveys are completed by and collected from a sample of service recipients, not every recipient. A time sampling approach (e.g., soliciting participation from all counseling encounters one week per quarter) will be used. Information collected includes satisfaction with services, perceived improvements in self-functioning, types of exposure, and event reactions.

- **CCP Service Provider Feedback.** These surveys are completed by and collected from the CCP service providers anonymously at six months and one year postevent. The survey will be coded on several program-level as well as worker-level variables. However, the program itself will be identified and shared with program management only if the number of individual workers was greater than 20. Estimates of Annualized Hour Burden

ESTIMATES OF ANNUALIZED HOUR BURDEN

Form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Individual Crisis Counseling Services Encounter Log Form	1 200	40	8,000	.03	240
Group Encounter Log Form	94	50	4,700	.03	141
Weekly Tally Sheet	1 200	² 33	6,600	.08	528
Assessment & Referral Tool	1 200	³ 12	2,400	.08	192
Participant Feedback	1,000	1	1,000	.06	60
CCP Service Provider Feedback	300	1	300	.08	24
Total			23,000		1,185

¹ 200 is based on typical average of 10 crisis counselors per grant with an approximate average of 20 grants per year.

² Average of 33 weeks for each grant that includes both Immediate Services and Regular Services Programs.

³ On average 30% of crisis of encounters may result in use of this optional tool.

Send comments to Summer King,
SAMHSA Reports Clearance Officer,
Room 7-1044, One Choke Cherry Road,

Rockville, MD 20857 and e-mail her a
copy at summer.king@samhsa.hhs.gov.

Written comments should be received
within 60 days of this notice.

Dated: February 21, 2008.

Elaine Parry,
Acting Director, Office of Program Services.
 [FR Doc. E8-3903 Filed 2-28-08; 8:45 am]
BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice; 60-day notice and request for comments; this is an extension of a currently approved collection, OMB No. 1660-0104.

SUMMARY: The Federal Emergency Management Agency (FEMA), as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on this

information collection. In accordance with the Paperwork Reduction Act of 1995, this notice seeks comments concerning Severe Repetitive Loss Program (SRL) Appeals process as part of the administration of the SRL program.

SUPPLEMENTARY INFORMATION: To implement the Flood Insurance Act of 1968, 42 U.S.C. 4102a, as amended, FEMA has published an interim rule at 44 CFR 79.7(d) in the **Federal Register** on October 31, 2007 that outlines an appeals process by which any owner of a severe repetitive loss property may appeal the decision of FEMA to increase the chargeable insurance premium rate on property. The legislation that created the SRL program provides that any owner of a severe repetitive loss property who refuses an offer of mitigation may appeal the decision of FEMA to increase the chargeable insurance premium rate on that property. The process requires the owner to submit a written appeal, including any supporting documentation for their appeal to FEMA within 90 days of the notice of the insurance rate increase. This extension

of a currently approved collection of information is necessary to ensure that the property owner is given the opportunity to provide additional documentation that supports one of the six allowable bases for appeal, outlined in the authorizing legislation, and implemented at 44 CFR 79.7(d).

Collection of Information

Title: Severe Repetitive Loss (SRL) Appeals Process.

Type of Information Collection: Extension of a currently approved collection.

OMB Number: 1660-0104.

Form Numbers: None.

Abstract: The SRL program provides property owners with the ability to appeal an increase in their flood insurance premium rate if they refuse an offer of mitigation under this program. The property owner must submit information to FEMA to support their appeal.

Affected Public: Federal Government, and individuals or households.

Estimated Total Annual Burden Hours: 100.

ANNUAL BURDEN HOURS

Project/activity	Number of respondents (A)	Frequency of responses (B)	Number of responses (C)	Hours per burden response (AxB)	Total annual burden hours (AxBxC)
Appeal written request and supporting documentation	10	1	10	10	100
Total	10	10	10	100

Comments: Written comments are solicited to (a) evaluate whether the proposed data collection is necessary for the proper performance of the agency, including whether the information shall have practical utility; (b) evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) enhance the quality, utility, and clarity of the information to be collected; and (d) minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses. Comments must be submitted on or before April 29, 2008.

ADDRESSES: Interested persons should submit written comments to Director, Records Management and Privacy, Office of Management Directorate,

Federal Emergency Management Agency, 500 C Street, SW., Room 609, Washington, DC 20472.

FOR FURTHER INFORMATION CONTACT: Cecelia Rosenberg, Branch Chief, Mitigation Directorate, (202) 646-3321 for additional information. You may contact the Records Management Branch for copies of the proposed collection of information at facsimile number (202) 646-3347 or e-mail address: FEMA-Information-Collections@dhs.gov.

Dated: February 19, 2008.

John A. Sharets-Sullivan,
Director, Records Management and Privacy, Office of Management Directorate, Federal Emergency Management Agency, Department of Homeland Security.

[FR Doc. E8-3904 Filed 2-28-08; 8:45 am]

BILLING CODE 9110-11-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice; 60-day notice and request for comments; Extension of a currently approved collection 1660-0025, Standard Forms: SF-LLL, SF-424, SF-270, FEMA Forms: 20-10, 20-15, 20-16A,B,C, 20-17, 20-18, 20-19, 20-20, and 76-10A.

SUMMARY: The Federal Emergency Management Agency, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on a proposed continuing