TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN¹

Reporting Activity	No. of Respondents	Annual Frequency per Response	Total Annual Responses		
Annual Report	4	1	4	5	20

¹There are no capital costs or operating and maintenance costs associated with this collection of information.

Based on FDA records, there are approximately four manufactures of automated blood cell separator devices. We estimate that the manufacturers will spend approximately 5 hours preparing and submitting the annual report.

Other burden hours required for § 864.9245 are reported and approved under OMB control number 0910–0120 (premarket notification submission 501(k), 21 CFR part 807, subpart E), and OMB control number 0910–0437 (MDR).

Dated: July 24, 2009.

Jeffrey Shuren,

Associate Commissioner for Policy and Planning.

[FR Doc. E9–18354 Filed 7–30–09; 8:45 am]

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: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase VI–NEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services is responsible for the national evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program (Children's Mental Health Initiative—

CMHI) that will collect data on child mental health outcomes, family life, and service system development and performance. Data will be collected on 26 service systems, and approximately 5,541 children and families.

Data collection for this evaluation will be conducted over a five-year period. Child and family outcomes of interest will be collected at intake and during subsequent follow-up sessions at sixmonth intervals. The length of time that individual families will participate in the study ranges from 12 to 24 months depending upon when they enter the evaluation. The outcome measures include the following: Child symptomatology and functioning, family functioning, satisfaction, and caregiver strain. The core of service system data will be collected every 18-24 months throughout the 5-year evaluation period, with a sustainability survey conducted in years 3 and 5. Service utilization and cost data will be tracked and submitted to the national evaluation every six months using two tools, the Flex Fund Tool and the Services and Costs Data Tool, to estimate average cost of treatment per child, distribution of costs, and allocation of costs across service categories. Service delivery and system variables of interest include the following: Maturity of system of care development in funded system of care communities, adherence to the system of care program model, and client service experience. We will also conduct a comprehensive evaluation of the CMHI's data driven technical assistance: this component of the evaluation will employ a mixedmethods approach, combining qualitative and quantitative data to provide a comprehensive assessment of the continuous quality improvement (CQI) process in funded system of care communities. Specifically, data will be gathered through three complementary activities: A baseline survey of key

constituents in all funded communities; a subsequent monitoring survey administered every two years to the same constituents; and biennial case studies of four selected communities.

In addition, the evaluation will include three special studies: (1) The sector specific assessment and quasiexperimental comparison study will examine in more detail the outcomes and service experience of children from multiple child-serving sectors and, through child-level matching, compare these outcomes with those not receiving system of care services; (2) The Alumni Network Study will examine the effectiveness of the system of care Alumni Network Web site by evaluating end-user satisfaction and usability of the Web site and will also assess the collaboration between communities via a Web-based Networking and Collaboration Survey that will measure the nature and extent of the interaction between communities; (3) The Study of State Strategies for Sustainability will examine the state's role in sustaining communities after federal funding ceases and describe effective strategies for sustaining funded systems of care. A short version of the sustainability survey developed for this evaluation will be used to gather this information.

Internet-based technology such as Web-based surveys and data entry and management tools will be used in this evaluation. The measures of the national evaluation address the national outcome measures for mental health programs as currently established by SAMHSA.

The average annual respondent burden is estimated below. The estimate reflects the average number of respondents in each respondent category, the average number of responses per respondent per year, the average length of time it will take to complete each response, and the total average annual burden for each category of respondent, and for all categories of respondents combined.

PHASE VI ESTIMATE OF RESPONDENT BURDEN

[Note: Total burden is annualized over a 5-year period]

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Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-year aver- age annual burden hours
	Sy	stem of Care As	ssessment			
Interview Guide A. Core Agency Representative. Interview Guide B. Project Director. Interview Guide C. Family Representative/Rep- resentative of Family/Ad- vocacy Organizations. Interview Guide D. Program Evaluator. Interview Guide E. Intake Worker. Interview Guide F. Care Co- ordinator. Interview Guide G. Direct Service Delivery Staff. Interview Guide H. Care Review Participant. Interview Guide I. Caregiver of Child or Youth Served by the Program. Interview Guide L. Direct Service Staff from Other Public Child-Serving Agencies. Interview Guide M. Care Record/Chart Review. Interview Guide N. Other Staff. Interview Guide O. Debrief- ing Document. Interview Guide P. Youth Respondent. Interview Guide R. Cultural and Linguistic Com- petence Coordinator. Interview Guide S. Social Marketing Communica- tions Manager.	Key site informants	1598	3	1.00	1,794	359
	Child	and Family Ou	tcome Study			
Caregiver Information Questionnaire, Revised: Caregiver—Intake (CIQ-RC-I). Caregiver Information Questionnaire, Revised: Staff as Caregiver—Intake (CIQ-RS-I).	Caregiver Staff as Caregiver.	² 5,541	1	0.37	2,032	406
Caregiver Information Questionnaire, Revised: Caregiver—Follow-Up (CIQ-RC-F). Caregiver Information Questionnaire, Revised: Staff as Caregiver—Follow-Up (CIQ-RS-F).	CaregiverStaff as Caregiver.	5,541	34	0.28	6,280	1,256
Caregiver Strain Question- naire (CGSQ).	Caregiver	5,541	5	0.17	4,627	925
Child Behavior Checklist 1½-5 (CBCL 1½-5).	Caregiver	5,541	5	0.33	9,226	1,845

PHASE VI ESTIMATE OF RESPONDENT BURDEN—Continued

[Note: Total burden is annualized over a 5-year period]

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Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-year aver- age annual burden hours
Child Behavior Checklist 6– 18 (CBCL 6–18).						
Education Questionnaire, Revision 2 (EQ-R2).	Caregiver	5,541	5	0.33	9,226	1,845
Living Situations Question- naire (LSQ).	Caregiver	5,541	5	0.08	2,300	460
Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (BERS-2C).	Caregiver	44,909	5	0.17	4,099	820
Columbia Impairment Scale (CIS).	Caregiver	⁵ 5,348	5	0.08	2,219	444
Parenting Stress Index (PSI).	Caregiver	⁶ 2,030	5	0.08	846	169
Devereux Early Childhood Assessment for Infants (DECA 1–18M). Devereux Early Childhood Assessment for Toddlers (DECA 18–36M). Devereux Early Childhood Assessment (DECA 2– 5Y).	Caregiver	⁷ 1,528	5	0.08	637	127
Preschool Behavioral and Emotional Rating (PreBERS).	Caregiver	1,528	5	0.10	764	153
Delinquency Survey, Revised (DS-R).	Youth	83,624	5	0.13	2,416	483
Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS-2Y).	Youth	3,624	5	0.17	3,026	605
Gain Quick-R: Substance Problem Scale (GAIN).	Youth	3,624	5	0.08	1,504	301
Substance Use Survey, Revised (SUS-R).	Youth	3,624	5	0.10	1,812	362
Revised Children's Manifest Anxiety Scales (RCMAS).	Youth	3,624	5	0.05	906	181
Reynolds Adolescent Depression Scale—Second Edition (RADS-2).	Youth	3,624	5	0.05	906	181
Youth Information Question- naire, Revised—Intake (YIQ-R-I).	Youth	3,624	1	0.25	906	181
Youth Information Question- naire, Revised—Follow- Up (YIQ-R-F).	Youth	3,624	4	0.25	3,624	725
		Service Experien	ce Study			
Multi-Sector Service Contacts, Revised: Caregiver—Intake (MSSC–RC-I).	Caregiver	5,541	1	0.25	1,385	277

PHASE VI ESTIMATE OF RESPONDENT BURDEN—Continued

[Note: Total burden is annualized over a 5-year period]

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-year aver- age annual burden hours
Multi-Sector Service Contacts, Revised: Staff as Caregiver—Intake (MSSC-RS-I).	Staff as Caregiver.					
Multi-Sector Service Contacts, Revised: Caregiver—Follow-Up (MSSC–RC–F). Multi-Sector Service Contacts, Revised: Staff as Caregiver—Follow-Up (MSSC–RS–F).	CaregiverStaff as Caregiver.	5,541	4	0.25	5,541	1,108
Cultural Competence and Service Provision Ques- tionnaire, Revised (CCSP-R).	Caregiver	5,541	94	0.13	2,955	591
Youth Services Survey for Families (YSS-F).	Caregiver	5,541	4	0.12	2,593	519
Youth Services Survey (YSS).	Youth	3,624	4	0.08	1,203	241
	Comparison	and Sector Stu	dy: Juvenile Jus	tice		
Court Representative Questionnaire (CRQ).	Court representatives	¹⁰ 212	5	0.50	530	106
Electronic Data Transfer of Juvenile Justice Records.	Key site personnel	212	5	0.03	35	7
	Comparis	son and Sector S	Study: Education	ı		
Teacher Questionnaire (TQ)	Teacher	212	5	0.50	530	106
School Administrator Questionnaire (SAQ).	School administrators	212	5	0.50	530	106
Electronic Data Transfer of Education Records.	Key site personnel	212	5	0.03	35	7
	Compariso	on and Sector St	udy: Child Welfa	re		
Child Welfare Sector Study Questionnaire—Intake (CWSQ-I).	Care coordinators	212	1	0.50	106	21
Child Welfare Sector Study Questionnaire—Follow-Up (CWSQ-F).	Care coordinators	212	4	0.50	424	85
Electronic Data Transfer of Child Welfare Records.	Key site personnel	212	5	0.03	35	7
		Sustainability	Study			
Sustainability Survey: Brief Form.	Project Director	79	2	0.17	26	5
Sustainability Survey	Providers 11	126	2	0.75	189	38
	Caregiver 11	42	2	0.75	63	13

PHASE VI ESTIMATE OF RESPONDENT BURDEN—Continued

[Note: Total burden is annualized over a 5-year period]

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Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-year aver- age annual burden hours
		CQI Initiative Ev	aluation			
CQI Baseline Survey, Web-Based.	Key site personnel	208	1	0.50	104	21
CQI Monitoring Survey, Web-Based.	Key site personnel	208	2	0.50	208	42
CQI Local Focus Group Guide.	Key site personnel	30	2	1.00	60	12
CQI National Focus Group Guide.	National TA providers	20	2	1.00	40	8
	ı	Alumni Networki	ng Study			
Networking and Collaboration Survey.	Key site personnel	248	2	0.50	248	50
Alumni Network Web Site Satisfaction Survey.	Key site personnel, National TA providers, Branch staff.	458	2	0.25	229	46
	S	Services and Cos	sts Study			
Flex Funds Data Dictionary/ Tool.	Local programming staff compiling/entering administrative data on children/youth.	¹² 1,306	133	0.03	129	26
Services and Costs Data Dictionary/Data Entry Ap- plication.	Local evaluator, staff at partner agencies, and programming staff compiling/entering service and cost records on children/youth.	5,541	14 100	0.05	27,705	5,541
	Summary of Ar	nualized Burder	n Estimates for 5	5 Years		
	Number of distinct respondents		Number of responses per respondent	Average 5- year burden per response (hours)	Total annual b	ourden (hours)
Caregivers	5,541		0.9	2.2		10,959
Youth	3,624		0.9	1.0	3,2	
Providers/Administrators	598		10.8	1.0	6,59	
Total Summary		9,763	13		20,8	
	•		•	•		

¹An average of 23 stakeholders in up to 26 grant communities will complete the System of Care Assessment interview. These stakeholders will include site administrative staff, providers, agency representatives, family representatives, and youth.

² Number of respondents across 26 grantees (5223), in addition to 318 children/families from the comparison sample. Average based on a 5 percent attrition rate at each data collection point.

⁴Approximate number of caregivers with children over age 5, based on Phase IV data submitted as of 12/08. Also includes 318 children/families from the comparison sample.

⁵ Approximate number of caregivers with children 3 and older, based on Phase IV data submitted as of 12/08. Also includes 318 children/families from the comparison sample.

⁶ Approximate number of caregivers with either: (1) children served at the roughly 7 early childhood-focused communities, for whom the instrument is required; or (2) children aged 0 to 12 at other communities, where the instrument is optional (we estimate that ½ of caregivers will be administered the instrument when it is optional). Estimates are based on Phase IV data submitted as of 12/08.

⁷ Approximate number of caregivers with either: (1) children served at the roughly 7 early childhood-focused communities, for whom the instrument is required; or (2) children aged 0 to 5 at other communities, where the instrument is optional (we estimate that ½ of caregivers will be administered the instrument when it is optional). Estimates are based on Phase IV data submitted as of 12/08.

⁸ Based on Phase IV finding that approximately 63 percent of the children in the evaluation were 11 years old or older. Also includes 318 children/families from the comparison sample.

³Number of responses per respondent is five over the course of the study (once every 6 months for 24 months, with one baseline/intake response, and 4 follow-up responses).

9 With the exception of the MSSC-R, respondents only complete Service Experience Study measures at follow-up points. See Footnote #3 for the explanation about the average number of responses per respondent.

Approximate number of children/families in each sector, for the Sector and Comparison Study. This includes cases within the communities, as well as within the comparison sample.

For each community, 1 respondent will be a caregiver and 3 respondents will be administrators/providers.

- 12 Assumes that each community will use flexible funds expenditures on average for approximately one quarter of the children/youth enrolled.
 13 Assumes that three expenditures, on average, will be spent on each child/youth receiving flexible fund benefits.

14 Assumes that each child/youth in system of care communities and in the comparison sample will have 100 service episodes, on average.

Written comments and recommendations concerning the proposed information collection should be sent by August 28, 2009 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: 202-395-6974.

Dated: July 27, 2009.

Elaine Parry,

Director, Office of Program Services. [FR Doc. E9-18317 Filed 7-30-09; 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

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Project: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase V (OMB No. 0930-0280)-Revision

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) is responsible for the

National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program, which collects data on child mental health outcomes, family life, and service system development and performance. Data will be collected on 30 service systems and roughly 8,810 children and families.

The data collection for this evaluation will be conducted for a 3-year period. The core of service system data will be collected twice (every 18 to 24 months) during the 3-year evaluation period. A sustainability survey will be conducted in selected years. Service delivery and system variables of interest include the following: Maturity of system of care development; adherence to the system of care program model; services received by youth and their families, and the costs of those services; and consumer service experience.

The length of time that individual families will participate in the study ranges from 18 to 36 months depending on when they enter the evaluation. Child and family outcomes of interest will be collected at intake and during subsequent follow-up interviews at sixmonth intervals. Client service experience information is collected at these follow-up interviews. Measures included in an outcome interview are determined by the type of assessment (intake or follow-up), child's age, and whether the respondent is the caregiver or a youth.

The outcome measures include the following: Child symptomatology and functioning, family functioning, material resources, and caregiver strain. The caregiver interview package includes the Caregiver Information Questionnaire, Child Behavior Checklist, Behavioral and Emotional Rating Scale (BERS), Education Questionnaire, Columbia Impairment Questionnaire, Living Situations

Questionnaire, Family Life Ouestionnaire, and Caregiver Strain Questionnaire at intake, and also includes the Multi-service Sector Contacts Form, Cultural Competence and Service Provision Questionnaire and the Youth Services Survey (a national outcome measurement tool) at follow-up assessments. Caregivers of children under age 6 complete the Vineland Screener to assess development, and do not complete the BERS. The Youth Interview package includes the Youth Information Questionnaire, Revised Children's Manifest Anxiety Scale, Reynolds Depression Scale, BERS (youth version), Delinquency Survey, Substance Use Survey, GAIN-Quick: Substance Dependence Scale, and Youth Services Survey (youth version).

The evaluation also includes three special studies: (1) An evidence-based practices study that examines the effects of various factors on the implementation and use of evidence-based treatments and approaches in system of care communities; (2) A cultural and linguistic competence study that examines the extent to which the cultural and linguistic characteristics of communities influence program implementation and provider adaptation of evidence-based treatments, and provider service delivery decisions based on provider culture and language; and (3) an evaluation of the communities' use of reports produced by the national evaluation for continuous quality improvement. The national evaluation measures address the national outcome measures for mental health programs as currently established by SAMHSA.

Table 1 summarizes which national evaluation components are unchanged from the original 2006 submission and which are new or changed.

TABLE 1—STUDY COMPONENT AND INSTRUMENT REVISIONS FOR PHASE V RE-SUBMISSION

	New or changed for 2009 resubmission	No change	Nature of change				
System of Care Assessment							
Site Visit Tables							