

*Inventors:* Juan Marugan, Joshua McCoy, Samarjit Patnaik, Steven Titus, Wei Zheng, Noel T. Southall, Wenwei Huang (NHGRI).

*Relevant Publications:* None.

*Patent Status:* U.S. Provisional Application No. 61/388,482 filed September 30, 2010 (HHS Reference No. E-258-2010/0-US-01).

*Licensing Status:* Available for licensing.

*Licensing Contact:* Steve Standley, PhD; 301-435-4074; [sstand@od.nih.gov](mailto:sstand@od.nih.gov).

*Collaborative Research Opportunity:* The National Center for Translational Therapeutics is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize this technology further. Please contact Ms. Lili Portilla at [Lilip@nih.gov](mailto:Lilip@nih.gov) for more information.

Dated: June 3, 2011.

**Richard U. Rodriguez,**

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

[FR Doc. 2011-14261 Filed 6-8-11; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Eunice Kennedy Shriver National Institute of Child Health & Human Development; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), 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:* National Institute of Child Health and Human Development Special Emphasis Panel, Intellectual and Developmental Disabilities Research Centers 2011 (P30) Review.

*Date:* June 29-30, 2011.

*Time:* 8 a.m. to 6 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Embassy Suites at the Chevy Chase Pavilion, 4300 Military Road, NW., Washington, DC 20015.

*Contact Person:* Cathy J. Wedeen, PhD, Scientific Review Officer, Division of Scientific Review, OD, Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, 6100 Executive Blvd., Room 5B01-G, Bethesda, MD 20892, 301-496-1485, [wedeenc@mail.nih.gov](mailto:wedeenc@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.864, Population Research; 93.865, Research for Mothers and Children; 93.929, Center for Medical Rehabilitation Research; 93.209, Contraception and Infertility Loan Repayment Program, National Institutes of Health, HHS)

Dated: June 3, 2011.

**Jennifer S. Spaeth,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2011-14264 Filed 6-8-11; 8:45 am]

**BILLING CODE 4140-01-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: Addiction Technology Transfer Centers (ATTC) National Workforce Data Collection—NEW

The ATTC Network, a nationwide, multidisciplinary resource that draws upon the knowledge, experience and latest research of recognized experts in the field of addictions and behavioral health, is a unique CSAT initiative formed in 1993 in response to a shortage of well-trained addiction and behavioral health professionals in the public sector. The ATTC Network works to enhance the knowledge, skills and aptitudes of the addiction/behavioral health treatment and recovery services workforce by disseminating current health services research from the National Institute on Drug Abuse, National Institute on Alcohol Abuse and Alcoholism, National Institute of Mental Health, Agency for Health Care Policy and Research, National Institute of Justice, and other sources, as well as other SAMHSA programs. To accomplish this, the ATTC Network (1) Develops and updates state-of-the-art

research based curricula and professional development training, (2) coordinates and facilitates meetings between Single State Authorities, Provider Associations and other key stakeholders, and (3) provides ongoing technical assistance to individuals and organizations at the local, regional and national levels.

In response to the emerging shortages of qualified addiction treatment and recovery services professionals, SAMHSA/CSAT instructed the ATTC National Office to lead the ATTC Network in the development and implementation of a national addiction treatment workforce data collection effort of those individuals who work in substance use specialty treatment services. The purpose of this survey and data collection is to gather information to guide the formation of effective national, regional, state, and organizational policies and strategies aimed at successfully recruiting and retaining a sufficient number of adequately prepared providers who are able to respond to the growing needs of those affected by substance use and mental health disorders; including co-occurring disorders and trauma. This data collection will offer a unique perspective on the clinical treatment field so that CSAT and the ATTC Network can better understand current successful strategies and methodologies being used in the workforce and develop appropriate training for emerging trends in the field.

Although SAMHSA/CSAT is the primary target audience for data collection findings, it is expected that the data collected and resulting reports will also be useful to the ATTC Network, as well as to Single State Agencies, provider organizations, professional organizations, training and education entities, and individuals in the workforce.

#### Overview of Data Collection and Purposes

Data will be collected from two main sources: (1) A random sample of clinical directors or a designated direct care supervisor from facilities listed in the I-SATS database. (2) A national sample of clinical directors and key thought leaders, identified by CSAT in conjunction with the ATTC network, in the substance use disorders treatment field. Respondents will be asked to participate in at least one of three (3) distinct methods. They are:

- A Web-based Clinical Director Survey (also available in paper format).
- On-line Focus Groups.

• Key Informant Telephone Interviews.

In addition to this original data collection, existing national data sets will also be utilized. Such data systems will include:

- Census 2000 datasets.
- National Survey of Substance Abuse Treatment Services (N-SSATS).
- SAMHSA Treatment Gap Projection Analysis.
- Treatment Episode Data.
- Bureau of Labor datasets such as Current Employment Statistics.
- Annapolis Coalition Data.

*Clinical Director Survey:* The Clinical Director Survey asks 57 questions of the clinical director or a designated direct care supervisor (direct care refers to staff members who spend a majority of their time providing clinical care for clients with substance use and/or co-occurring disorders as their primary diagnosis). For the purpose of this survey, the clinical director is defined as the person whose role it is to oversee direct clinical service delivery for this facility. The instrument asks respondents to report demographic information about both themselves and the direct care staff they supervise, information about the facility at which they currently work, as well as information about their job satisfaction, recruitment and retention strategies, clinician training and preparation, and staff turnover.

*On-line Focus Groups:* On-line Focus Groups will be utilized to gather qualitative data from two sources: (1) Clinical supervisors and/or direct care staff in leadership positions; (2) Thought leaders in addiction/behavioral health treatment to include Single State Authorities (SSAs), addiction treatment agency directors, academics, and policymakers. An on-line platform, <http://IdeaScale.com> will be used to gather qualitative data about future trends in substance use and co-occurring disorders and trauma treatment. IdeaScale will also be used to gather information from clinical supervisors and direct care staff on effective and creative staff development, recruitment, and retention strategies being used by the agency for which they

work. These ideas will be posted for this community of invited participants to comment on and discuss; thus allowing a national audience to participate in this on-line focus group.

*Key Informant Telephone Interviews:* Based on participation in the on-line focus groups, a minimum of 40 IdeaScale respondents will be selected for telephone interviews. The purpose of these interviews is to enrich understanding surrounding current and future trends in substance use and co-occurring disorders and trauma treatment as well as effective workforce development, recruitment, and retention strategies. An interview script has been developed to guide the question formation for the interviews.

**Overview of Questions Related to Data Collection**

The objectives of the national addiction treatment workforce data collection effort are to understand the national demographics of the current workforce and how this differs across regions and states, in addition to exploring issues related to workforce development: (1) Staff training, recruitment and retention; (2) Professional development; and 3. Support for strategies and methodologies to prepare, recruit, retain, and sustain the workforce. To accomplish these objectives, CSAT outlined three primary questions to be addressed by the workforce data collection:

*(1) What are the basic demographics of the workforce?*

For the purposes of the ATTC data collection effort, this means that we will comprehensively describe the workforce comprised of direct care staff, clinical supervisors, and administrators in agencies represented in the Inventory of Substance Abuse Treatment Services (I-SATS).

*(2) What are the anticipated workforce development needs for 2011–2016?*

For the purposes of this data collection, the ATTC Network will identify the growth and capacity-

building needs over the next five years of direct care staff, clinical supervisors, and administrators in agencies represented in the I-SATS registry.

*(3) What are the common strategies and methodologies to prepare, retain, and maintain the workforce?*

Identification of potentially effective strategies used to prepare and recruit individuals to enter the workforce (as previously defined), and encourage them to remain in the workforce and stay current on clinical and other job related skills (e.g., evidence based practices).

This will be the first national survey of the substance use disorders treatment workforce. The quantitative survey and the qualitative interviews and analysis will be used to provide a snapshot of the current state of the addiction treatment workforce as it relates to demographics, workforce development needs, and retention and maintenance of a strong workforce. These data will provide national benchmark data that can be used to inform ongoing policy and practice.

Information collected from this workforce data collection will help CSAT and the ATTC Network to better understand the needs of the workforce and categorize some best practices for providing support to the field now and in the future. Emerging trends in addiction and/or co-occurring and trauma treatment and the existence of mental health problems in substance use disorder treatment and recovery services will be identified and shared with those in the addiction/behavioral health treatment field so appropriate training and funding can be allocated. The information from this data collection will also help CSAT identify areas where deficiencies in substance use and/or co-occurring disorder and trauma treatment exist and provide assistance to regions (and states) to help them develop and adopt strategies for addressing this.

The chart below summarizes the annualized burden for this project.

Type of respondent	Number of respondents	Responses per respondent	Hours per response	Total annual burden hours
Clinical directors or supervisors; Web-based survey .....	569	1	.66	376
Clinical directors or supervisors; On-line focus groups .....	450	1	.5	225
Clinical directors or supervisors; Telephone interviews .....	20	1	.5	10
Thought leaders; On-line focus groups .....	250	1	.5	125
Thought leaders; Telephone interviews .....	20	1	.5	10
<b>Total .....</b>	<b>1,109</b>	<b>.....</b>	<b>.....</b>	<b>746</b>

Written comments and recommendations concerning the proposed information collection should be sent by July 11, 2011 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: June 3, 2011.

**Elaine Parry,**

*Director, Office of Management, Technology and Operations.*

[FR Doc. 2011-14279 Filed 6-8-11; 8:45 am]

BILLING CODE 4162-20-P

## DEPARTMENT OF HOMELAND SECURITY

### Coast Guard

[Docket No. USCG-2011-0521]

#### Navigation Safety Advisory Council; Vacancies

**AGENCY:** Coast Guard, DHS.

**ACTION:** Request for applications.

**SUMMARY:** The Coast Guard seeks applications for membership on the Navigation Safety Advisory Council (NAVSAC). NAVSAC provides advice and recommendations to the Secretary, Department of Homeland Security, through the Commandant of the U.S. Coast Guard, on matters relating to prevention of maritime collisions, rammings, and groundings, including the Inland and International Rules of the Road, navigation regulations and equipment, routing measures, marine information, diving safety, and aids to navigation systems.

**DATES:** Applicants must submit a cover letter and resume on or before July 29, 2011.

**ADDRESSES:** Applicants should send their cover letter and resume to Mr. Mike Sollosi, Alternate Designated Federal Officer (ADFO), at the following address: Commandant (CG-553), Attn: Mr. Mike Sollosi, U.S. Coast Guard, 2100 2nd Street SW., STOP 7580, Washington, DC 20593-7580.

**FOR FURTHER INFORMATION CONTACT:** Mr. Mike Sollosi, the NAVSAC Alternate Designated Federal Officer (ADFO), at phone 202-372-1545, fax 202-372-1991, or e-mail [Mike.M.Sollosi@uscg.mil](mailto:Mike.M.Sollosi@uscg.mil); or Mr. Dennis Fahr, at telephone 202-372-1531 or e-mail [Dennis.Fahr@uscg.mil](mailto:Dennis.Fahr@uscg.mil).

**SUPPLEMENTARY INFORMATION:** The NAVSAC is an advisory committee authorized in 33 U.S.C. 2073 and chartered under 5 U.S.C. App. (Pub. L. 92-463). NAVSAC provides advice and recommendations to the Secretary, through the Commandant of the U.S. Coast Guard, on matters relating to prevention of maritime collisions, rammings, and groundings, including the Inland and International Rules of the Road, navigation regulations and equipment, routing measures, marine information, diving safety, and aids to navigation systems.

The NAVSAC is expected to meet at least twice each year, or more often with the approval of the Designated Federal Officer (DFO). Members may be reimbursed for travel and per diem, as allowed by regulations and Department policy. All travel for NAVSAC business must be approved in advance by the DFO. The NAVSAC is comprised of not more than 21 members who shall have expertise in Inland and International vessel navigation Rules of the Road, aids to maritime navigation, maritime law, vessel safety, port safety, or commercial diving safety. Each member shall be appointed to represent the viewpoints and interests of one of the following groups or organizations, and at least one member shall be appointed to represent each membership category:

- a. Commercial vessel owners or operators;
- b. Professional mariners;
- c. Recreational boaters;
- d. The recreational boating industry;
- e. State agencies responsible for vessel or port safety;
- f. The Maritime Law Association.

Members serve as representatives and are not Special Government Employees as defined in section 202(a) of Title 18, United States Code.

The Coast Guard will consider applications for eight positions that will become vacant on November 11, 2011, in the following categories:

- a. Commercial vessel owners or operators (one position);
- b. Professional mariners (two positions);
- c. Recreational boaters (one position);
- d. The recreational boating industry (one position);
- e. State agencies responsible for vessel or port safety (one position); and
- f. The Maritime Law Association (two positions).

Members shall serve terms of office of up to three years, and approximately one-third of members' terms of office shall expire each year. A member appointed to fill an unexpired term shall be appointed for the remainder of such term. In the event NAVSAC is

terminated, all appointments to the Council shall terminate.

Registered lobbyists are not eligible to serve on Federal advisory committees. Registered lobbyists are lobbyists required to comply with provisions contained in the Lobbying Disclosure Act of 1995 (Pub. L. 110-81, as amended).

In support of the Coast Guard policy on gender and ethnic nondiscrimination, we encourage qualified men and women and members of all racial and ethnic groups to apply. The Coast Guard values diversity; all the different characteristics and attributes that enhance the mission of the Coast Guard.

Dated: June 2, 2011.

**Dana A. Goward,**

*Director, Marine Transportation Systems Management, U.S. Coast Guard.*

[FR Doc. 2011-14332 Filed 6-8-11; 8:45 am]

BILLING CODE 9110-04-P

## DEPARTMENT OF HOMELAND SECURITY

### Federal Emergency Management Agency

[Internal Agency Docket No. FEMA-1978-DR; Docket ID FEMA-2011-0001]

#### Tennessee; Major Disaster and Related Determinations

**AGENCY:** Federal Emergency Management Agency, DHS.

**ACTION:** Notice.

**SUMMARY:** This is a notice of the Presidential declaration of a major disaster for the State of Tennessee (FEMA-1978-DR), dated May 9, 2011, and related determinations.

**DATES:** *Effective Date:* May 9, 2011.

**FOR FURTHER INFORMATION CONTACT:** Peggy Miller, Office of Response and Recovery, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, (202) 646-3886.

**SUPPLEMENTARY INFORMATION:** Notice is hereby given that, in a letter dated May 9, 2011, the President issued a major disaster declaration under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121 *et seq.* (the "Stafford Act"), as follows:

I have determined that the damage in certain areas of the State of Tennessee resulting from severe storms, flooding, tornadoes, and straight-line winds on April 4, 2011, is of sufficient severity and magnitude to warrant a major disaster declaration under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121 *et*