

Link for the tables: <https://www.samhsa.gov/sites/default/files/grants/pdf/ti-17-014-tables.pdf>.

Send all comments via email to OpioidSTR@samhsa.hhs.gov. Comments should be received by June 19, 2017.

Summer King,
Statistician.

[FR Doc. 2017-07947 Filed 4-19-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Treatment; Notice of Meeting

Pursuant to Public Law 92-463, notice is hereby given that the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) National Advisory Council will meet on May 2, 2017, 1:00 p.m.–2:00 p.m. (EDT) in a closed teleconference meeting.

The meeting will include discussions and evaluations of grant applications reviewed by SAMHSA's Initial Review Groups, and involve an examination of confidential financial and business information as well as personal information concerning the applicants. Therefore, the meeting will be closed to the public as determined by the SAMHSA Acting Deputy Assistant Secretary for Mental Health and Substance Use in accordance with Title 5 U.S.C. § 552b(c)(4) and (6) and Title 5 U.S.C. App. 2, § 10(d).

Meeting information and a roster of Council members may be obtained by accessing the SAMHSA Committee Web site at <http://www.samhsa.gov/about-us/advisory-councils/csat-national-advisory-council> or by contacting the CSAT National Advisory Council Designated Federal Officer; Tracy Goss (see contact information below).

Council Name: SAMHSA's Center for Substance Abuse Treatment National Advisory Council.

Date/Time/Type: May 2, 2017, 1:00 p.m.–2:00 p.m. EDT, CLOSED.

Place: SAMHSA, 5600 Fishers Lane, Rockville, Maryland 20857.

Contact: Tracy Goss, Designated Federal Officer, CSAT National Advisory Council, 5600 Fishers Lane, Rockville, Maryland 20857 (mail), Telephone: (240) 276-0759, Fax: (240) 276-2252, Email: tracy.goss@samhsa.hhs.gov.

Summer King,

Statistician, SAMHSA.

[FR Doc. 2017-08006 Filed 4-19-17; 8:45 am]

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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 (SAMHSA) 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: 2018 National Survey on Drug Use and Health (OMB No. 0930-0110)—Revision

The National Survey on Drug Use and Health (NSDUH) is a survey of the U.S. civilian, non-institutionalized population aged 12 years old or 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, the Office of National Drug Control Policy (ONDCP), federal government agencies, and other organizations and researchers to establish policy, direct program activities, and better allocate resources.

While NSDUH must be updated periodically to reflect changing substance use and mental health issues and to continue producing current data, for the 2018 NSDUH only the following minor changes are planned: (1) At the request of ONDCP, re-inserted the marijuana marketplace module, previously included in the 2014 NSDUH (as well as prior years), into the respondent-administered portion of the 2018 questionnaire; (2) the addition of four new questions, asked only of respondents age 18 and older, about the perception of problems with and recovery from drug/alcohol and mental health problems; and (3) included other minor wording changes to improve the flow of the interview, increase respondent comprehension or to be consistent with text in other questions.

The marijuana marketplace module consists of a series of questions that seek to gather data such as the location, quantity, cost and type of marijuana being purchased across the nation. This module is unchanged from the version last included in the 2014 NSDUH. As with all NSDUH/NHSDA surveys conducted since 1999, the sample size of the survey for 2018 will be sufficient to permit prevalence estimates for each of the fifty states and the District of Columbia. Prior to 2002, the NSDUH was referred to as the National Household Survey on Drug Abuse (NHSDA).

The total annual burden estimate is shown below.

ANNUALIZED ESTIMATED BURDEN FOR 2018 NSDUH

Instrument	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours
Household Screening	133,586	1	133,586	0.083	11,088
Interview	67,507	1	67,507	1.000	67,507
Screening Verification	4,008	1	4,008	0.067	269
Interview Verification	10,126	1	10,126	0.067	678
Total	133,586	215,227	79,542

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 15E57B, 5600 Fishers Lane, Rockville, MD 20857 OR email a copy at summer.king@samhsa.hhs.gov. Written comments should be received by June 19, 2017.

Summer King,
Statistician.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

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of automated collection techniques or other forms of information technology.

Proposed Project: State Targeted Response to the Opioid Crisis (Opioid STR) Evaluation—NEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) plans to award up to 59 grants to states and territories to help address the national opioid crisis by increasing access to treatment, reducing unmet treatment needs, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD).

SAMHSA's Center for Behavioral Health Statistics and Quality (CBHSQ) will be conducting a cross-site evaluation of the Opioid STR grant program. The proposed data collection is necessary to evaluate how the Opioid STR state/territory grantees plan and implement prevention, treatment and recovery services. Additionally, a subset of communities/programs will be selected to participate in supplemental evaluation activities designed to provide detailed information related to the implementation of services at the program/community level, as well as the impacts of the program on client outcomes.

SAMHSA has developed a set of interview protocols and survey measures that will collect information from all state/territory grantees (up to 59), and subset (up to 20) programs/communities that provide services and activities funded by the grant. In addition, SAMHSA's Performance Accountability and Reporting System (SPARS) will be used to collect individual-level data using CSAT's Government Performance and Results Act (GPRA) for Discretionary Grant Programs Client Outcome Measure (OMB No. 0930-0208) from individuals receiving services from participating communities/programs.

Specific data collected as part of the Opioid STR evaluation include the following:

State Survey: The State Survey will be administered to State Project Directors/Program Managers to collect information about the state/territory's planned and implemented activities to address opioid misuse, using Opioid STR funding. The State Survey will be administered three (3) times, in September/October 2017, March/April 2018, and March/April 2019.

Community/Program Survey: The Community/Program Survey will be administered to Community/Program Directors or Program Managers to collect information about the community/program's readiness to implement activities that address opioid misuse, their actual implementation of activities that address opioid misuse, and initial outcomes of their implemented activities. The Community/Program Survey will be administered three (3) times, in September/October 2017, March/April 2018, and March/April 2019.

Community/Program Interview Protocol: The Community/Program Interview Protocol will be used with up to two (2) Community/Program Directors or Program Managers during in-person site visits to each participating community/program. Interviews will collect in-depth information about the community's/program's implementation of activities to address opioid misuse, using Opioid STR funding.

CSAT GPRA Client Outcome Measure: The CSAT GPRA Client Outcome Measure will be used with each client served in the Communities/Programs to collect data about client's progress as a result of receiving services. This data will be collected at three time intervals: intake to services, 6 month follow-up, and at discharge.