

Place: National Institutes of Health, Building 31, C-Wing, 6th Floor, Room 10, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Paulette S. Gray, Ph.D., Director, Division of Extramural Activities, National Cancer Institute—Shady Grove, National Institutes of Health, 9609 Medical Center Drive, Room 7W444, Bethesda, MD 20892, 240-276-6340, grayp@mail.nih.gov.

Name of Committee: National Cancer Advisory Board and NCI Board of Scientific Advisors.

Open: June 21, 2017, 8:00 a.m. to 12:00 p.m.

Agenda: Joint meeting of the National Cancer Advisory Board and NCI Board of Scientific Advisors; NCI Board of Scientific Advisors Concepts Review.

Place: National Institutes of Health, Building 31, C-Wing, 6th Floor, Room 10, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Paulette S. Gray, Ph.D., Director, Division of Extramural Activities, National Cancer Institute—Shady Grove, National Institutes of Health, 9609 Medical Center Drive, Room 7W444, Bethesda, MD 20892, 240-276-6340, grayp@mail.nih.gov.

Name of Committee: NCI Board of Scientific Advisors *Ad Hoc* Subcommittee on HIV and AIDS Malignancy.

Open: June 21, 2016, 1:00 p.m. to 5:00 p.m.

Agenda: Discussion on HIV and AIDS Malignancy.

Place: National Institutes of Health, Building 31, C-Wing, 6th Floor, Room 10, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Dr. Robert Yarchoan, Executive Secretary, NCI Board of Scientific Advisors *Ad Hoc* Subcommittee on HIV and AIDS Malignancy, National Cancer Institute, National Institutes of Health, 10 Center Drive, Building 10, Room 6N106, Bethesda, MD 20892, (301) 496-0328, robert.yarchoan@nih.gov.

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.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: NCAB: <http://deainfo.nci.nih.gov/advisory/ncab/ncab.htm>, BSA: <http://deainfo.nci.nih.gov/advisory/bsa/bsa.htm>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support;

93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: May 18, 2017.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Call for Nominations for the Non-Federal Members of the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC)

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Secretary of Health and Human Services, in accordance with the 21st Century Cures Act, is seeking nominations for the non-federal members of the ISMICC.

FOR FURTHER INFORMATION CONTACT: Pamela Foote, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, 14E53C, Rockville, MD 20857; telephone: 240-276-1279; email: pamela.foote@samhsa.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background and Authority

The ISMICC is established in accordance with section 6031 of the 21st Century Cures Act, and the Federal Advisory Committee Act, 5 U.S.C. App., as amended, to report to the Secretary, Congress, and any other relevant federal department or agency on advances in serious mental illness (SMI) and serious emotional disturbance (SED), research related to the prevention of, diagnosis of, intervention in, and treatment and recovery of SMI, SED, and advances in access to services and support for adults with SMI or children with SED. In addition, the ISMICC will evaluate the effect that federal programs related to serious mental illness have on public health, including public health outcomes such as (A) rates of suicide, suicide attempts, incidence and prevalence of SMIs, SEDs, and substance use disorders, overdose, overdose deaths, emergency hospitalizations, emergency room boarding, preventable emergency room visits, interaction with the criminal justice system, homelessness, and unemployment; (B) increased rates of

employment and enrollment in educational and vocational programs; (C) quality of mental and substance use disorders treatment services; or (D) any other criteria as may be determined by the Secretary. Finally, the ISMICC will make specific recommendations for actions that agencies can take to better coordinate the administration of mental health services for adults with SMI or children with SED. Not later than 1 (one) year after the date of enactment of the 21st Century Cures Act, and 5 (five) years after such date of enactment, the ISMICC shall submit a report to Congress and any other relevant federal department or agency.

II. Committee Composition

The ISMICC will consist of federal members listed below or their designees and non-federal public members.

Federal Membership: The ISMICC will be composed of the following federal members or their designees:

- The Secretary of Health and Human Services;
- The Assistant Secretary for Mental Health and Substance Use;
- The Attorney General;
- The Secretary of the Department of Veterans Affairs;
- The Secretary of the Department of Defense;
- The Secretary of the Department of Housing and Urban Development;
- The Secretary of the Department of Education;
- The Secretary of the Department of Labor;
- The Administrator of the Centers for Medicare and Medicaid Services; and
- The Commissioner of the Social Security Administration.

In accordance with the Committee's authorizing statute, the Committee shall also "include not less than 14 non-Federal public members appointed by the Secretary of Health and Human Services." 21st Century Cures Act, section 6031(e)(2).

All non-Federal public members are appointed as Special Government Employees for their service on the ISMICC, of which:

(A) At least 2 members shall be an individual who has received treatment for a diagnosis of a serious mental illness;

(B) At least 1 member shall be a parent or legal guardian of an adult with a history of a serious mental illness or a child with a history of a serious emotional disturbance;

(C) At least 1 member shall be a representative of a leading research, advocacy, or service organization for adults with a serious mental illness;

(D) At least 2 members shall be—

(i) A licensed psychiatrist with experience in treating serious mental illnesses;

(ii) A licensed psychologist with experience in treating serious mental illnesses or serious emotional disturbances;

(iii) A licensed clinical social worker with experience treating serious mental illnesses or serious emotional disturbances; or

(iv) A licensed psychiatric nurse, nurse practitioner, or physician assistant with experience in treating serious mental illnesses or serious emotional disturbances;

(E) At least 1 member shall be a licensed mental health professional with a specialty in treating children and adolescents with a serious emotional disturbance;

(F) At least 1 member shall be a mental health professional who has research or clinical mental health experience in working with minorities;

(G) At least 1 member shall be a mental health professional who has research or clinical mental health experience in working with medically underserved populations;

(H) At least 1 member shall be a State certified mental health peer support specialist;

(I) At least 1 member shall be a judge with experience in adjudicating cases related to criminal justice or serious mental illness;

(J) At least 1 member shall be a law enforcement officer or corrections officer with extensive experience in interfacing with adults with a serious mental illness, children with a serious emotional disturbance, or individuals in a mental health crisis; and

(K) At least 1 member shall have experience providing services for homeless individuals and working with adults with a serious mental illness, children with a serious emotional disturbance, or individuals in a mental health crisis.

The Department strives to ensure that the membership of HHS federal advisory committees is fairly balanced in terms of points of view represented and the committee's function. Every effort is made to ensure that the views of women, all ethnic and racial groups, sexual and gender minorities and people with disabilities are represented on HHS Federal advisory committees and, therefore, the Department encourages nominations of qualified candidates from these groups. The Department also encourages geographic diversity in the composition of the Committee. Appointment to the ISMICC shall be made without discrimination

on the basis of age, race, ethnicity, gender, sexual orientation, gender identity, disability, and cultural, religious, or socioeconomic status. Requests for reasonable accommodation to enable participation on the Committee should be indicated in the nomination submission.

III. Who is eligible?

Nominations for non-federal public members are encouraged, and self-nominations are permitted as well. Only one nomination per individual is required. Multiple nominations for the same individual will not increase likelihood of selection. The Secretary may select non-federal public members from the pool of submitted nominations or other sources as needed to meet statutory requirements and to form a balanced committee that represents the diversity within the population of individuals with SMI or SED. Those eligible for nomination include representatives of leading major SMI or SED research, advocacy and service organizations, parents or guardians of individuals with a serious mental illness or serious emotional disturbance, individuals who have received treatment for a diagnosis of a serious mental illness, a licensed psychiatrist, psychologist, clinical social worker, marriage and family therapist, licensed professional counselor, psychiatric nurse, nurse practitioner, or physician assistant with experience in treating SMI or SED, other licensed mental health professionals, criminal justice professionals, researchers and other individuals with professional or personal experience with a SMI or SED. Those eligible for nomination also include mental health professionals with research or clinical experience with minorities or underserved populations, certified peer support specialists, judges with experience related to criminal justice or SMI, law enforcement or corrections officers with experience in SMI and SED, and individuals with experience providing services for homeless individuals, adults with SMI and children with SED. In accordance with White House Office of Management and Budget guidelines (FR Doc. 2014–19140), federally-registered lobbyists are not eligible.

IV. Responsibilities of Appointed Non-Federal Public Members

As specified in the Committee's authorizing statute (section 6031 of the 21st Century Cures Act), the Committee, not later than 1 year after the date of enactment of this Act, and 5 years after such date of enactment, shall submit to Congress and any other relevant Federal

department or agency a report including: (1) A summary of advances in serious mental illness and serious emotional disturbance research related to the prevention of, diagnosis of, intervention in, and treatment and recovery of serious mental illnesses, serious emotional disturbances, and advances in access to services and support for adults with a serious mental illness or children with a serious emotional disturbance; (2) an evaluation of the effect that Federal programs related to serious mental illness have on public health, including public health outcomes such as (A) rates of suicide, suicide attempts, incidence and prevalence of serious mental illnesses, serious emotional disturbances, and substance use disorders, overdose, overdose deaths, emergency hospitalizations, emergency room boarding, preventable emergency room visits, interaction with the criminal justice system, homelessness, and unemployment; (B) increased rates of employment and enrollment in educational and vocational programs; (C) quality of mental and substance use disorders treatment services; or (D) any other criteria as may be determined by the Secretary; and; (3) specific recommendations for actions that agencies can take to better coordinate the administration of mental health services for adults with a serious mental illness or children with a serious emotional disturbance.

V. Member Terms

A member of the Committee appointed under subsection (e)(2), non-federal, shall serve for a term of 3 years, and may be reappointed for 1 or more additional 3-year terms. Any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of such term. A member may serve after the expiration of the member's term until a successor has been appointed.

VI. Meetings

The ISMICC shall meet not fewer than 2 times each year.

VII. Submission Instructions and Deadline

Nominations should include: A cover letter and a current curriculum vitae or resume. Cover letters should be no longer than 3 pages, indicate which slot/slots the individual is applying for, describe relevant personal and professional experience with serious mental illness or serious emotional disturbance, and indicate their contact information. Up to 2 letters of support are permitted in addition to the

nomination, with a page limit of 3 pages per letter. Please do not include other materials unless requested.

Nominations are due June 2, 2017, by midnight eastern daylight time, and may be sent to Pamela Foote, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, 14E53C, Rockville, MD 20857; email: pamela.foote@samhsa.hhs.gov by standard or express mail, or via email:

Carlos Castillo,

Committee Management Officer.

[FR Doc. 2017-10616 Filed 5-23-17; 8:45 am]

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ADVISORY COUNCIL ON HISTORIC PRESERVATION

Notice of Issuance of Program Comment for Communications Projects on Federal Lands and Property

AGENCY: Advisory Council on Historic Preservation.

ACTION: Program Comment Issued to Tailor the Section 106 Review Process for Communications Projects on Federal Lands and Property.

SUMMARY: The Advisory Council on Historic Preservation (ACHP) issued a Program Comment for Communications Projects on Federal Lands and Property at the request of the U.S. Department of Homeland Security (DHS) to accelerate the review of these projects, particularly broadband deployment, under Section 106 of the National Historic Preservation Act. The Program Comment can be used by federal land and property managing agencies who must comply with the requirements of Section 106 when deploying communications activities on public lands and property. Federal agencies using the Program Comment may fulfill their Section 106 responsibilities for the relevant undertakings by implementing the terms of this comment, which include processes for the identification of historic properties and consideration of effects to these properties. The Program Comment also identifies certain undertakings that require no further Section 106 review under specified conditions.

DATES: The Program Comment was issued by the ACHP on May 8, 2017 and went into effect that day.

ADDRESSES: Address all questions concerning the Program Comment to Charlene Dwin Vaughn, AICP, Office of Federal Agency Programs, Advisory Council on Historic Preservation, 401 F Street NW., Suite 308, Washington DC

20001-2637. You may submit questions through electronic mail to: cvaughn@achp.gov.

FOR FURTHER INFORMATION CONTACT:

Charlene Vaughn, (202) 517-0207, cvaughn@achp.gov.

SUPPLEMENTARY INFORMATION: Section 106 of the National Historic Preservation Act (NHPA), as amended, 54 U.S.C. 306108 (“Section 106”), requires federal agencies to take into account the effects of undertakings they carry out, license, permit, or fund to historic properties and provide the Advisory Council on Historic Preservation (“ACHP”) a reasonable opportunity to comment with regard to such undertakings. The ACHP has issued the regulations that set forth the process through which federal agencies comply with these responsibilities. Those regulations are codified under 36 CFR part 800 (“Section 106 regulations”).

Under Section 800.14(e) of those regulations, federal agencies can request the ACHP to issue a “Program Comment” on a particular category of undertakings in lieu of conducting reviews for each individual undertaking in the category. An agency can meet its Section 106 responsibilities with regard to the effects of those undertakings by implementing an applicable Program Comment that has been issued by the ACHP.

I. Background

At the request of the DHS, the ACHP has issued a Program Comment that provides a new efficiency in the Section 106 review for the deployment of communications projects. A program alternative was initially proposed by the White House Office of Science and Technology and an interagency Working Group comprised of representatives from the U.S. Department of the Interior’s Bureau of Land Management, National Park Service (NPS), Fish and Wildlife Service; Department of Defense; the U.S. Department of Agriculture’s Forest Service and Rural Utilities Service (RUS); and the Federal Communications Commission (FCC). The purpose of this Working Group was to explore how best to accelerate the deployment of communications projects, particularly broadband activities, on federal lands and properties by evaluating the Section 106 program alternatives outlined in 36 CFR 800.14. Many members of the Working Group had previously participated in another Interagency Working Group for Accelerating Broadband Infrastructure Deployment, established in 2012. This Interagency Working Group published a

report with recommendations to expedite reviews and implement efficiencies for the deployment of broadband infrastructure on federal lands. Since this effort had not directly resulted in revisions based on the existing Section 106 regulations, in 2016 the Broadband Interagency Working Group, formerly known as the Broadband Opportunity Council, was established. This group reaffirmed the need to tailor the Section 106 review process so it could expedite broadband deployment, especially in rural and underserved communities.

The Working Group initially pursued a Standard Treatment in accordance with 36 CFR 800.14(d) consisting of a series of “best practices” in the deployment of broadband. If followed, these practices were likely to result in determinations of “no historic properties affected” or “no adverse effect” on historic properties. However, the Working Group was particularly interested in incorporating select provisions of the two FCC Nationwide Programmatic Agreements (NPAs) executed in 2001 and 2005, respectively, among FCC, the National Conference of State Historic Preservation Officers (NCSHPO), and the ACHP for tower siting and collocation activities on existing towers. The NPAs have been successfully used by applicants for more than a decade for streamlining the Section 106 review of tower siting and collocation activities. Use of the Standard Treatment alone would not have allowed federal land and property managing agencies to implement the efficiencies in the NPAs. Further, by their own terms, the NPAs state that they do not apply on federal lands and tribal lands.

II. Conversion of the Standard Treatment to a Program Comment

After meeting several times and receiving feedback on the draft Standard Treatment, it was recognized that the best practices proposed in the Standard Treatment would not achieve the review efficiencies that were being sought by the federal agencies. The Working Group, therefore, agreed to convert the Standard Treatment into a Program Comment under 36 CFR 800.14(e). The Program Comment would enable Property Managing Agencies (PMAS) and Land Managing Agencies (LMAs) to alter the standard Section 106 review process to achieve the desired process efficiencies, such as establishing limits to areas of potential effects (APEs), limiting the level of effort needed to identify historic properties in certain areas, and utilizing FCC’s NPAs’ exemptions, as appropriate.