

*Name of Committee:* National Institute of Neurological Disorders and Stroke Special Emphasis Panel; Clinical Trial Readiness Review Meeting.

*Date:* December 13, 2024.

*Time:* 10:00 a.m. to 3:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Address:* National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Ana Olariu, Ph.D., Scientific Review Officer, Scientific Review Branch, Division of Extramural Activities, NINDS/NIH/DHHS, NSC, 6001 Executive Boulevard, Rockville, MD 20852, 301-496-9223 [Ana.Olariu@nih.gov](mailto:Ana.Olariu@nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.853, Clinical Research Related to Neurological Disorders; 93.854, Biological Basis Research in the Neurosciences, National Institutes of Health, HHS).

Dated: November 14, 2024.

**David W. Freeman,**

*Supervisory Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2024-27047 Filed 11-19-24; 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) 276-0361.

#### Project: Zero Suicide in Health Systems Evaluation—New Package

The Substance Abuse and Mental Health Services Administration (SAMHSA)'s Center for Mental Health Services (CMHS) is requesting clearance for the new data collection associated with the evaluation of the SAMHSA Zero Suicide in Health Systems (Zero Suicide Evaluation). The Zero Suicide program is authorized under the CURES Act. SAMHSA is required to evaluate the Zero Suicide grant, specifically (1) evaluate the activities supported by grants awarded, disseminate, as appropriate, the findings from the evaluation; and (2) provide appropriate information, training, and technical assistance, as appropriate, to eligible

entities that receive a grant under this section, in order to help such entities to meet the requirements of this section, including assistance with selection and implementation of evidence.

The goal of the Zero Suicide program is the reduction of suicide and suicide attempts across America, focusing on individuals who are 25 years and older. The purpose of this program is to implement the Zero Suicide intervention and prevention model for adults throughout a health system or systems. The Zero Suicide model is a comprehensive, multi-setting approach to suicide prevention in health systems. To accomplish this critical, lifesaving work, it is essential that the effectiveness of these programs be evaluated on an ongoing basis, with implementation of suicide prevention programs continually informed by high-quality evaluation results. SAMHSA will use this data to reduce suicide ideation, suicide attempts, and deaths due to suicide.

SAMHSA has awarded new grants and continued funding to 25 grantees, Cohort 5 (15 grantees) with project period of Sept 30, 2023, to Sept 29, 2028; and Cohort 4 (10 grantees; includes one tribal organization) with project period of March 31, 2021, to March 30, 2026. SAMHSA has requested funding for 11 grantees to be funded as Cohort 6 in the fiscal year 2025.

The Zero Suicide Evaluation is designed to evaluate the implementation, effectiveness, and overall impact of the Zero Suicide program upon grantees in the United States. The evaluation will assess Zero Suicide program activities implemented by grantees and ultimately provide SAMHSA with the information needed to understand and document program effectiveness on reducing suicide morbidity and mortality, specifically among those who encounter the healthcare system. While acknowledging the lack of evidence for cultural adaptations to evidence-based and empirically supported treatments and interventions, and that research has not been conducted with historically marginalized and underserved communities (e.g., Black, Asian, Autistic, Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual Plus (LGBTQIA+), and others), Zero Suicide pushes systems to ensure that clients' cultural contexts are considered and honored in what treatments are offered and how those treatments are adapted. Thus, with behavioral health equity as a central component woven throughout the Zero

Suicide Framework, the proposed evaluation will ensure that each study includes specific behavioral health equity tenets to ensure a culturally specific understanding of Zero Suicide implementation, outcomes, and impacts.

The Zero Suicide Evaluation includes four studies: Systems Change, Work Force, Consumer Experience, and Impact. The purpose of the Systems Change Study is to understand how grantees are implementing the Zero Suicide Program. The Systems Change Study collection instruments include the: Prevention Strategies Inventory (PSI), Behavioral Health Provider Survey (BHPS), Case Studies, and Cost Sub-Studies.

The purpose of the Workforce Study is to document staff awareness and perceptions associated with the Zero Suicide activities implemented by Zero Suicide-participating Healthcare Organizations (HCOs). The Workforce Study instruments include the: Work Force Survey (WFS), Training Activity Summary Page (TASP), and the Training Utilization and Preservation Survey (TUPS).

The purpose of Consumer Experience Study is to understand the relationship between Zero Suicide activities and key clinical outcomes (i.e., suicide risk, depression), along with consumer perceptions of care, access to care, services received, and treatment adherence. The Consumer Experience Study instruments include the: BHPS, Consumer Experience Survey (CES), Clinical Outcomes Form (COF), and Grantee Performance Data.

The Impact Study will use secondary data and quasi-experimental designs to develop a control group and estimate the causal impact of the Zero Suicide Program on suicide morbidity and mortality.

Ultimately, the purpose of the Zero Suicide Evaluation is to build the program's knowledge base of effectiveness by thoroughly describing the implementation, outcomes, and impact of a program meant to reduce deaths by suicide.

The total annualized burden is an estimated 15,504 respondents for the Zero Suicide instruments, with a combined hourly estimate to be 4,902 hours. Burden estimates are based on the data collection requirements and the number of respondents. The estimated response burden to collect this information associated with the Zero Suicide Evaluation annualized over the requested 3-year clearance period is presented below:

TOTAL AND ANNUALIZED AVERAGES: RESPONDENTS, RESPONSES AND HOURS

| Type of respondent                     | Form                 | Number of respondents per year | Responses per respondent | Total number of responses | Burden per response (hours) | Annual burden (hours) | Hourly wage rate | Total cost     |
|--|----------------------|--------------------------------|--------------------------|---------------------------|-----------------------------|-----------------------|------------------|----------------|
| Project Evaluator <sup>1</sup>         | PSI                  | 40                             | 4                        | 160                       | 1                           | 160                   | \$61.53          | \$9,845        |
| Grantee/HCO administrator <sup>2</sup> | BHPS                 | 47                             | 1                        | 47                        | 0.5                         | 24                    | 61.53            | 1,477          |
| Grantee/HCO administrator <sup>2</sup> | KII—Case Studies     | 7                              | 1                        | 7                         | 1                           | 7                     | 61.53            | 431            |
| HCO Staff <sup>3</sup>                 | KII—Case Studies     | 27                             | 1                        | 27                        | 1                           | 27                    | 26.81            | 724            |
| Grantee/HCO administrator <sup>2</sup> | KII—Cost Sub studies | 2                              | 1                        | 2                         | 1                           | 2                     | 61.53            | 123            |
| HCO Staff <sup>3</sup>                 | WFS                  | 9,400                          | 1                        | 9,400                     | 0.25                        | 2,350                 | 26.81            | 63,004         |
| Project Evaluator <sup>1</sup>         | TASP                 | 40                             | 10                       | 400                       | 0.25                        | 100                   | 36.67            | 3,667          |
| HCO Staff <sup>3</sup>                 | TUPS—Baseline        | 3,334                          | 1                        | 3,334                     | 0.25                        | 834                   | 26.81            | 22,360         |
| HCO Staff <sup>3</sup>                 | TUPS—6 month         | 252                            | 1                        | 252                       | 0.5                         | 126                   | 26.81            | 3,378          |
| HCO Staff <sup>3</sup>                 | TUPS—12 month        | 189                            | 1                        | 189                       | 0.5                         | 95                    | 26.81            | 2,547          |
| Clinicians                             | C—SIF                | 180                            | 8.3                      | 1,494                     | 0.25                        | 374                   | 57.21            | 21,397         |
| Consumer                               | CES—Baseline         | 1,128                          | 1                        | 1,128                     | 0.4                         | 451                   | 7.25             | 3,270          |
| Consumer                               | CES—6-month          | 843                            | 1                        | 843                       | 0.4                         | 337                   | 7.25             | 2,443          |
| Consumer                               | C—KII                | 15                             | 1                        | 15                        | 1                           | 15                    | 7.25             | 109            |
| <b>Total</b>                           |                      | <b>15,504</b>                  |                          | <b>17,298</b>             |                             | <b>4,902</b>          |                  | <b>134,773</b> |

Abbreviation: HCO = Healthcare Organization.  
<sup>1</sup> BLS OES May 2022 National Industry-Specific Occupation Employment and Wage Estimates average annual salary for Survey Researchers (code 19-3022); [https://www.bls.gov/oes/cuSeetrent/naics5\\_541720.htm](https://www.bls.gov/oes/cuSeetrent/naics5_541720.htm).  
<sup>2</sup> BLS OES May 2022 National Industry-Specific Occupation Employment and Wage Estimates average annual salary for Medical and Health Services Managers (code 11-9111); <https://www.bls.gov/oes/current/oes119111.htm>.  
<sup>3</sup> BLS OES May 2022 National Industry-Specific Occupation Employment and Wage Estimates average annual salary for Community and Social Service Occupations (code 29-1000); <https://www.bls.gov/oes/current/oes210000.htm>.  
<sup>4</sup> BLS OES May 2022 National Industry-Specific Occupation Employment and Wage Estimates average annual salary for Health Diagnosing and Treating Practitioners (code 29-1000); [https://www.bls.gov/oes/current/oes\\_nat.htm#29-0000](https://www.bls.gov/oes/current/oes_nat.htm#29-0000).  
<sup>5</sup> BLS OES May 2022 Characteristics of minimum wage workers, 2022; <https://www.bls.gov/opub/reports/minimum-wage/2022/home.htm#:~:text=ln%202022%2C%2078.7%20million%20workers,wage%20of%20%247.25%20per%20hour>.

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

**Alicia Broadus,**  
 Public Health Advisor.  
 [FR Doc. 2024-27065 Filed 11-19-24; 8:45 am]  
 BILLING CODE 4162-20-P

**DEPARTMENT OF THE INTERIOR**

**Bureau of Land Management**  
 [BLM\_NV\_FRN\_MO#4500183119]

**Notice of Segregation of Public Land for the Esmeralda Solar Projects, Esmeralda County, Nevada**

**AGENCY:** Bureau of Land Management, Interior.  
**ACTION:** Notice of segregation.

**SUMMARY:** Through this notice the Bureau of Land Management (BLM) is segregating public lands included in seven rights-of-way applications, serialized as NVNV106386133, for the Leeward Esmeralda (NVNV105848463), Connect Gen Smoky Valley (NVNV105848465), Arevia Gold Dust (NVNV105851657), Invenergy Nivloc (NVNV105851658), NextEra Esmeralda (NVNV105851682), Red Ridge 1

(NVNV105852204) and Red Ridge 2 (NVNV105852205) solar energy projects, from appropriation under the public land laws, including the Mining Law, but not the Mineral Leasing or Material Sales Acts, for a period of up to 2 years from the date of publication of this notice, subject to valid existing rights. This segregation is to allow for the orderly administration of the public lands to facilitate consideration of development of renewable energy resources. The public lands segregated by this notice total 117,384.38 acres.

**DATES:** This segregation for the lands identified in this notice is effective on November 20, 2024.

**FOR FURTHER INFORMATION CONTACT:** Perry B. Wickham, Field Manager, at telephone: (775) 482-7801; address: P.O. Box 911, 1553 S Main Street, Tonopah, NV 89049; or email: [pwickham@blm.gov](mailto:pwickham@blm.gov). Individuals in the United States who are deaf, deafblind, hard of hearing, or have a speech disability may dial 711 (TTY, TDD, or TeleBraille) to access telecommunication relay services. Individuals outside the United States should use the relay services offered within their country to make international calls to the point-of-contact in the United States.

**SUPPLEMENTARY INFORMATION:** Regulations found at 43 CFR 2091.3-1(e) and 2804.25(f) allow the BLM to segregate public lands within a right-of-way application area for solar energy development from the operation of the public land laws, including the Mining

Law, by publication of a **Federal Register** notice. The BLM uses this segregation authority to preserve its ability to approve, approve with modifications, or deny proposed rights-of-way, and to facilitate the orderly administration of the public lands. This segregation is subject to valid existing rights, including existing valid mining claims located before this segregation notice. Licenses, permits, cooperative agreements, or discretionary land use authorizations of a temporary nature that would not impact lands identified in this notice may be allowed with the approval of an authorized officer of the BLM during the segregation period. The lands segregated under this notice are legally described as follows:

**Mount Diablo Meridian, Nevada**

- T. 1 N., R. 37 E.,  
 Secs. 1 thru 5 and secs. 8 thru 16, unsurveyed;  
 Sec. 21, unsurveyed;  
 Sec. 22, partly unsurveyed, excepting M.S. No. 4895, Placer mining claims Blanco, Blanco #1, Blanco #2, Blanco #4, Blanco # 5, and Blanco #6;  
 Secs. 23 thru 26, unsurveyed;  
 Sec. 27, partly unsurveyed, excepting M.S. No. 4895, Placer mining claims Blanco, Blanco #1, Blanco #2, Blanco #4, Blanco # 5, and Blanco #6;  
 Secs. 35 and 36, unsurveyed.
- T. 2 N., R. 37 E.,  
 Secs. 23 thru 26;  
 Sec. 32, S½NE¼, W½, and SE¼; sec. 33, W½ and SE¼;  
 Secs. 34 thru 36.
- Tps. 1 and 2 N., R. 38 E., unsurveyed.
- T.1 N., R. 38 ½ E.,  
 Secs. 4 thru 9, unsurveyed;