

The meetings will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the grant review cycle.

(Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: March 13, 1995.

**Margery G. Grubb,**

*Senior Committee Management Specialist, NIH.*

[FR Doc. 95-6566 Filed 3-16-95; 8:45 am]

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## Public Health Service

### Agency Forms Submitted to the Office of Management and Budget for Clearance

Each Friday the Public Health Service (PHS) publishes a list of information collection requests under review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the PHS Reports Clearance Office on (202)-690-7100.

The following requests have been submitted for review since the list was last published on Friday, February 24.

1. Reporting Requirements for Federal Maternal and Child Health Set-Aside Programs—42 CFR PART 51(A)—0915-0169 (Reinstatement, with change)—Approval is requested for forms and regulations to implement amendments to 42 USC 706(A)(3) made by OBRA '89. The amendments require information from SPRANS and CISS projects to be reported annually to Congress on numbers of persons served or trained, evaluations performed, and Healthy Children 2000 objectives addressed. Respondents: Not-for-profit institutions; businesses or other for-profit; State, Local or Tribal Government; Number of Respondents: 580; Number of Responses per Respondent: 1; Average Burden per Response: 2 hours; Estimated Annual Burden: 1,160 hours. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, D.C. 20503.

2. National Exposure Registry—0923-0006 (Reinstatement, no change)—

Authorized under the Superfund mandate, this information collection is undertaken in order to develop the National Exposure Registry. Its purpose is to collect information on the health of persons exposed to a defined substance at a specific site. Respondents are individuals working or residing near sites identified by ATSDR as containing substances of specific health concern. Respondents: Individuals or households; Number of Respondents: 15,167; Number of Responses per Respondent: 1; Average Burden per Response: 0.42 hours; Estimated Annual Burden: 6320 hours. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, D.C. 20503.

3. Cosmetic Product Experience Reports—CFR Part 730—0910-0047 (Extension, no change)—Experience data, when correlated with cosmetic product ingredient data, gives FDA scientists valuable insight into potentially unsafe cosmetic ingredients, thereby improving FDA's ability to accomplish its mission of protecting consumers from injuries resulting from harmful ingredients in cosmetics. Respondents: Businesses or other for-profit; Number of Respondents: 125; Number of Responses per Respondent: 1 form FDA-2706 @ 1 hour and 16 forms FDA-2704 @ .2 hours each; Average Burden per Response: 4.2 hours; Estimated Annual Burden: 525 hours. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Written comments and recommendations concerning the proposed information collections should be sent within 30 days of this notice directly to the individual designated.

Dated: March 14, 1995.

**James Scanlon,**

*Director, Data Policy Staff, Office of the Assistant Secretary for Health and PHS Reports Clearance Officer.*

[FR Doc. 95-6637 Filed 3-16-95; 8:45 am]

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## Substance Abuse and Mental Health Services Administration

### Single Source Grant to CODAC Behavioral Health Services of Pima County, Inc.

**AGENCY:** Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration (SAMHSA), HHS.

**ACTION:** Notice of intent to award a single source demonstration grant to support a comprehensive outpatient treatment and prevention program for substance-abusing mothers and their infants in Pima County, Arizona.

**SUMMARY:** The Center for Substance Abuse Treatment (CSAT), SAMHSA, is publishing this notice to provide information to the public concerning a planned single source grant award to CODAC Behavioral Health Services of Pima County, Inc. This is not a formal request for applications. Assistance will be provided only to CODAC Behavioral Health Services of Pima County, Inc., based on the receipt of a satisfactory application that is approved by a peer review group and the CSAT National Advisory Council.

### Authority/Justification

The grant will be made under the authority of Section 510(b)(1) of the Public Health Service Act, as amended.

An award is being made on a single source basis because the Conference Report to the Treasury/Postal Service and General Appropriations Act of 1995, Pub. L. 103-329, provides directive language that the appropriation includes \$500,000 for CSAT to support CODAC Behavioral Health Services of Pima County, Inc., for "a comprehensive treatment and prevention program for substance-abusing mothers and their infants." Providing assistance through a grant is the appropriate mechanism to fund this activity because it is our intent to provide support for a public purpose and agency involvement in the actual conduct of the activity is not required. The grant is subject to review as governed by Executive Order 12372, Intergovernmental Review of Federal Programs.

### Background

Scientific evidence indicates that certain individuals are at greater risk of disease, dysfunction and death as a consequence of alcohol and other drug use and abuse. Women, and in particular, pregnant and postpartum women, their infants and children who live at or near the poverty line, are among the most vulnerable of these. For them, substance use/abuse, chemical dependency, and the biological, psychiatric, psychological and socio-economic co-factors of substance abuse (herein referred to as "alcohol and other drug problems") may be severe. Unfortunately, the treatment infrastructure has not kept pace with the demand or complexity of need in response to the serious problem of

maternal alcohol and other drug use/abuse and the resulting complications experienced by this population. When women do seek treatment they often face strained substance abuse treatment agencies that lack the capacity, financial resources, or appropriate family-centered approaches to effectively meet the multiple treatment needs of women and their children. Few treatment agencies have the capability to provide all services required to meet the needs of this population, such as treatment for critical health and mental health problems and injuries resulting from histories of physical and sexual abuse; child care and development; parenting skills development; and child abuse and neglect prevention. Both residential and outpatient treatment services specifically designed for women are necessary to ensure that the full range of services is available. This is necessary because the needs and circumstances of clients can vary considerably. Some women are unwilling or unable to enter residential treatment; outpatient treatment is therefore the most appropriate option for them. Some residential programs have a combination of residential and outpatient care designed as part of their treatment approach, and for some programs, outpatient services are available as part of required or voluntary continuing care.

CODAC has offered substance abuse treatment, prevention and general mental health services in Pima County for 25 years, during which time it has become a nationally-known center for provision of residential and outpatient substance abuse treatment services for women and their children. CODAC targets women in the criminal justice system, ethnic minority women, and low-income women, all high-risk groups according to the Office of National Drug Control Policy. The majority of women served by CODAC are between 19 and 24 years of age, approximately 2% are African American, 30% Latino, 60% Caucasian, 1% Native American and 7% other (including multiracial).

CODAC has also initiated comprehensive residential treatment and prevention services to substance abusing mothers and their infants, under Section 508 of the Public Health Services Act, CSAT's Services Grant Program for Pregnant and Postpartum Women (PPW). The residential services are complemented by outpatient case management and treatment referral services funded by the Center for Substance Abuse Prevention (CSAP) since 1990. The CSAP project (Comprehensive Assistance to Mothers & Infants Outpatient Program

Expansion—CAMI) comprises a wide range of services, including ensuring that the women receive prenatal care, education/job development, and housing.

Funding for CAMI is due to expire April 30, 1995. Among CAMI's innovations in outpatient prevention and treatment have been early detection and screening of infants and children (and referral for services as necessary), parenting training, outreach to difficult to reach target populations, and follow-up of clients post-treatment. From February 1991 to June 1994, CAMI has served 249 women, 153 infants and approximately 200 children. Of the 40 women who had been in treatment and are presently involved in 6 month post-treatment reevaluations, 79% have abstained from use of all drugs except tobacco (72% continue to smoke). Importantly, clients in CAMI have demonstrated a significant decrease in drug use during the second trimester of pregnancy. This reduces the probability of perinatal effects of drug use and therefore the costs of medical and associated care.

Providing continuing support for CAMI under the CSAT PPW program helps to ensure linkage between the residential and follow-up phases of treatment and thereby improve the likelihood of sustained recovery for the discharged mothers and their children as well as for women to enter the outpatient program only. This will, in turn, result in positive, wide-ranging impact on the Tucson community.

This grant will support comprehensive outpatient services to mothers and their infants, including:

- (1) Outpatient substance abuse treatment;
- (2) Expanded outreach to women not yet engaged in treatment;
- (3) Coordination of services for women enrolled in the PPW program, including continuing care (aftercare) services;
- (4) Expanding treatment, psychological counseling and educational groups tailored specifically to the needs of women in treatment;
- (5) Expanding the wellness component and strengthening its linkage with the PPW residential program;
- (6) Expanding the mentoring program;
- (7) Provision of child care services for women enrolled only in the outpatient program; and
- (8) Expanded prevention services directed toward at-risk populations.

This grant is consistent with the State of Arizona drug abuse treatment plan. Providing funding to CODAC under this grant will help ensure that the

prevention and treatment approaches devised and implemented by CODAC can continue to serve as models for programs serving women and their children throughout the country.

The project will be funded for one year in the amount of approximately \$500,000.

The Catalog of Federal Domestic Assistance number for this program is 93.101.

**FOR FURTHER INFORMATION CONTACT:** Maggie Wilmore, CSAT/SAMHSA, Rockwall II, 7th Floor, 5600 Fishers Lane, Rockville, Maryland 20857. Telephone (301) 443-8160.

Dated: March 13, 1995.

**Richard Kopanda,**

*Acting Executive Officer, Substance Abuse and Mental Health Services Administration.*

[FR Doc. 95-6612 Filed 3-16-95; 8:45 am]

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## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

### Office of the Assistant Secretary for Community Planning and Development

[Docket No. N-95-1917; FR-3778-N-28]

### Federal Property Suitable as Facilities to Assist the Homeless

**AGENCY:** Office of the Assistant Secretary for Community Planning and Development, HUD.

**ACTION:** Notice.

**SUMMARY:** This Notice identifies unutilized, underutilized, excess, and surplus Federal property reviewed by HUD for suitability for possible use to assist the homeless.

**ADDRESSES:** For further information, contact William Molster, room 7256, Department of Housing and Urban Development, 451 Seventh Street SW., Washington, DC 20410; telephone (202) 708-1226; TDD number for the hearing- and speech-impaired (202) 708-2565 (these telephone numbers are not toll-free), or call the toll-free Title V information line at 1-800-927-7588.

**SUPPLEMENTARY INFORMATION:** In accordance with 56 FR 23789 (May 24, 1991) and section 501 of the Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11411), as amended, HUD is publishing this Notice to identify Federal buildings and other real property that HUD has reviewed for suitability for use to assist the homeless. The properties were reviewed using information provided to HUD by Federal landholding agencies regarding unutilized and underutilized buildings