

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]

BILLING CODE 4140-01-M

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