

twice annually for the Board and its two subcommittees (the Report on Carcinogens Subcommittee and the Technical Reports Review Subcommittee).

Dated: April 19, 2001.

Samuel H. Wilson,

Deputy Director, National Institute of Environmental Health Sciences.

Preliminary Agenda—National Toxicology Program (NTP), Board of Scientific Counselors—May 25, 2001

National Institute of Environmental Health Sciences, Rall Building, South Campus, Rodbell Conference Auditorium, Rooms A & B Research Triangle Park, North Carolina

8:30 a.m.

Welcome and Opening Comments

NTP Update

Presentation on NTP Chemical Disposition and Toxicokinetic Studies

Presentation on Pharmacokinetic Modeling of Compounds Studied by the NTP

Concept Review (ACTION)

NTP CERHR—Draft Guidelines for Expert Panels

Public Comments

12:15 p.m.

Lunch

1:15 p.m.

ICCEC Testing Recommendations for Future NTP Studies

Public Comments

Hexavalent Chromium

Public Comments

NTP Board Subcommittee Reviews—Updates

- Report on Carcinogens

- Technical Reports

Public Comments

4–4:30 p.m.

Adjourn

[FR Doc. 01–11391 Filed 5–4–01; 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: 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 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 (301) 443–7978.

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: Participant Feedback Forms for Two CMHS Mental Health Education Training Initiatives—New—This project will collect feedback from mental health professionals who receive training from any of the CMHS-supported Minority Community Based Organizations or Behavioral Health Professional Association contractors. The forms proposed for use in collecting the feedback are refined versions of feedback forms required for use by the Mental Health Care Provider Education in HIV/AIDS Program II and approved by OMB under control number 0930–0195.

The range of mental health issues covered is broad and, depending on the needs of the audiences, the training sites may use any of the following types of curricula: General, ethics, neuropsychiatric, neuropsychiatric designed for non-psychiatrists, and an adherence curriculum. Education sites also vary the complexity and intensity of the training sessions, resulting in sessions of variable length. Service providers attending sessions shorter than 6 hours will provide feedback by completing a single form at the end of the training session. Those attending sessions 6 hours or longer will be asked to complete forms both before and after the training session in order to assess both satisfaction and perceived knowledge gain. Education sites funded under these initiatives will vary considerably in their prior experience in conducting trainings, with some organizations having significant prior experience while others will be developing their training programs. The burden estimates below incorporate and reflect reasonable assumptions regarding the volume, type and length of training sessions conducted by the various organizations likely to be funded under these two initiatives.

The Minority HIV/AIDS Mental Health Services Initiative is expected to be comprised of 12 minority community-based organizations providing mental health HIV/AIDS education trainings to traditional and non-traditional mental health service

providers. Estimates of the numbers of mental health professionals trained and types of training sessions conducted are based on the assumption that half (6) of the funded education sites will be existing education programs and the other half will be new education sites. The six new education sites are expected to train about 300 individuals annually using the general curriculum (and corresponding form—The Participant Feedback Form) with their training sessions being less than 6 hours long. These sites will conduct, on average about 15 training sessions per year with approximately 20 people attending each session.

The remaining six sites are expected to be education sites with existing education training programs and are expected to conduct a total of 25 training sessions each per year with about 20 individuals attending each training session. These six sites should therefore train a total 500 individuals each per year. The majority of these sessions will be less than 6 hours long (about 76% or 19 sessions of the 25 sessions). In contrast to the new education sites, however, these sites are likely to use all of the following curricula: General, ethics, neuropsychiatric, neuropsychiatric designed for non-psychiatrists, and the adherence curriculum. Of the 19 training sessions that are shorter than 6 hours, 10 are expected to use the general curriculum, 3 will use the adherence curriculum, and 2 sessions each for the ethics, neuropsychiatric, neuropsychiatric for non-psychiatrists. Four of the 6 sessions that are longer than 6 hours are expected to use the general curriculum and corresponding pre/post participant forms, and 2 will use the neuropsychiatric curriculum with the accompanying corresponding pre/post neuropsychiatric participant forms. Burden estimates are presented in Table 1 below.

The Behavioral Health Professional Health Association Training Initiative is a continuation effort. This initiative will consist of three Associations providing training to mental health professionals both within and outside of their disciplines. These Associations are required to train a minimum of 1,000 mental health professionals per year using the general, ethics, neuropsychiatric, neuropsychiatric for non-psychiatrists, and adherence curricula. They all have prior experience training mental health professionals and will conduct sessions that are of variable length (i.e., shorter and longer than 6 hours long). Each Association will conduct about 57 trainings per year, the majority of which

(about 90% or about 51 training sessions) will be less than 6 hours long. Of the shorter trainings, each Association will conduct about 20 using the general curriculum, 6 using the ethics curriculum, 12 using the neuropsychiatric curriculum, 9 using

the adherence curriculum and 4 using the neuropsychiatric curriculum for non-psychiatrists. The appropriate post-training feedback form will be administered to trainees after each session. Each Association will also conduct about 6 longer trainings per

year; 4 using the neuropsychiatric curriculum and 2 using the general curriculum. The corresponding pre/post feedback form will be administered at each training session. Table 2 below uses these assumptions to calculate the burden estimate.

TABLE 1.—MINORITY HIV/AIDS MENTAL HEALTH SERVICES INITIATIVE

Form	Responses per respondent	Estimated number of respondents	Estimated completion time (in hours)	Total hours
Minority HIV/AIDS Mental Health Services Initiative—12 Sites				
All Sessions—One form per session completed by Program staff/trainer				
Session Report Form	1	240	0.08	19
Sessions less than 6 hours				
Participant Feedback Form	1	3,000	0.167	501
Neuropsychiatric Participant Feedback Form	1	240	0.167	40
Ethics Participant Feedback Form	1	240	0.167	40
Adherence Participant Feedback Form	1	360	0.167	60
Neuropsychiatric Participant Feedback Form Non-Physicians	1	240	0.167	40
Sessions 6 hours or longer				
Pre-Training Participant Inventory	1	480	0.167	80
Post-Training Participant Inventory	1	480	0.25	120
Neuropsychiatric Pre-Training Participant Inventory	1	240	0.167	40
Neuropsychiatric Post-Training Participant Inventory	1	240	0.25	60
Total		5,760		1,000

TABLE 2.—BEHAVIORAL HEALTH PROFESSIONAL ASSOCIATION TRAINING INITIATIVE

Form	Responses per respondent	Estimated number of respondents	Estimated completion time (in hours)	Total hours
Behavioral Health Professional Association Training Initiative—3 Sites				
All Sessions—One form per session completed by Program staff/trainer				
Session Report Form	1	171	0.08	14
Sessions less than 6 hours				
Participant Feedback Form	1	1,200	0.167	200
Neuropsychiatric Participant Feedback Form	1	720	0.167	120
Ethics Participant Feedback Form	1	360	0.167	60
Adherence Participant Feedback Form	1	540	0.167	90
Neuropsychiatric Participant Feedback Form Non-Physicians	1	240	0.167	40
Sessions 6 hours or longer				
Pre-Training Participant Inventory	1	120	0.167	20
Post-Training Participant Inventory	1	120	0.25	30
Neuropsychiatric Pre-Training Participant Inventory	1	240	0.167	40
Neuropsychiatric Post-Training Participant Inventory	1	240	0.25	60
Total		3,951		674

TABLE 3.—COMBINED ANNUAL BURDEN ESTIMATE

Form	Responses per respondent	Estimated number of respondents	Estimated completion time (in hours)	Total hours
Behavioral Health Professional Association Training Initiative—3 Sites				
All Sessions—One form per session completed by Program staff/trainer				
Session Report Form	1	411	0.08	33
Sessions less than 6 hours				
Participant Feedback Form	1	4,200	0.167	701
Neuropsychiatric Participant Feedback Form	1	960	0.167	160
Ethics Participant Feedback Form	1	600	0.167	100
Adherence Participant Feedback Form	1	900	0.167	150
Neuropsychiatric Participant Feedback Form Non-Physicians	1	480	0.167	80
Sessions 6 hours or longer				
Pre-Training Participant Inventory	1	600	0.167	100
Post-Training Participant Inventory	1	600	0.25	150
Neuropsychiatric Pre-Training Participant Inventory	1	480	0.167	80
Neuropsychiatric Post-Training Participant Inventory	1	480	0.25	120
Total		9,711		1,674

Send comments to Nancy Pearce, SAMHSA Reports Clearance Officer, Room 16–105, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: April 30, 2001.

Richard Kopanda.

Executive Officer, Substance Abuse and Mental Health Services Administration.

[FR Doc. 01–11372 Filed 5–4–01; 8:45 am]

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DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–4650–N–31]

Notice of Submission of Proposed Information Collection to OMB; Issuer's Monthly Remittance Advice and Issuer's Monthly Serial Note Remittance Advice

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: *Comments Due Date:* June 6, 2001.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval number (2503–0015) and should be sent to: Joseph F. Lackey, Jr., OMB Desk Officer, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

FOR FURTHER INFORMATION CONTACT: Wayne Eddins, Reports Management Officer, Q, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410; e-mail Wayne_Eddins@HUD.gov; telephone (202) 708–2374. This is not a toll-free number. Copies of the proposed forms and other available documents submitted to OMB may be obtained from Mr. Eddins.

SUPPLEMENTARY INFORMATION: The Department has submitted the proposal for the collection of information, as described below, to OMB for review, as required by the Paperwork Reduction Act (44 U.S.C. Chapter 35). The Notice lists the following information: (1) The title of the information collection proposal; (2) the office of the agency to collect the information; (3) the OMB approval number, if applicable; (4) the description of the need for the information and its proposed use; (5) the agency form number, if applicable; (6) what members of the public will be affected by the proposal; (7) how frequently information submissions will be required; (8) an estimate of the total number of hours needed to prepare the

information submission including number of respondents, frequency of response, and hours of response; (9) whether the proposal is new, an extension, reinstatement, or revision of an information collection requirement; and (10) the name and telephone number of an agency official familiar with the proposal and of the OMB Desk Officer for the Department.

This Notice also lists the following information:

Title of Proposal: Issuer's Monthly Remittance Advice and Issuer's Monthly Serial Note Remittance Advice.

OMB Approval Number: 2503–0015.

Form Numbers: HUD–11714, HUD–11714SN.

Description of the Need for the Information and its Proposed Use: Government National Mortgage Associations (GNMA) issuers are required to provide summary information to the holder of each GNMA mortgage-backed security with respect to the current month's account transaction and calculations of the holder's fractional share of total cash distribution. The Information collected is used to advise each security holder of the current month's account transactions and calculation of holder's fractional share of total cash distribution.

Respondents: Business or other for-profit, Federal Government.

Frequency of Submission: Monthly.

Reporting Burden: