

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 (Telephone Conference Call).

*Contact Person:* Eva Petrakova, PhD, MPH Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6158, MSC 7804, Bethesda, MD 20892. 301-435-1716. [petrakoe@mail.nih.gov](mailto:petrakoe@mail.nih.gov)

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Nutrition Literacy.

*Date:* July 10, 2006.

*Time:* 10:30 a.m. to 11:30 a.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 (Telephone Conference Call).

*Contact Person:* Lee S. Mann, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3186, MSC 7848, Bethesda, MD 20892. 301-435-0677. [mannl@csr.nih.gov](mailto:mannl@csr.nih.gov)

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; HOP EPI.

*Date:* July 13, 2006.

*Time:* 8:30 a.m. to 6 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* One Washington Circle Hotel, One Washington Circle, Washington, DC 20037.

*Contact Person:* Heidi B. Friedman, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 1012A, MSC 7770, Bethesda, MD 20892. 301-435-1721. [hfriedman@csr.nih.gov](mailto:hfriedman@csr.nih.gov)

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; IRAP Member Conflicts.

*Date:* July 14, 2006.

*Time:* 8:30 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* One Washington Circle Hotel, One Washington Circle, Washington, DC 20037.

*Contact Person:* Heidi B. Friedman, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 1012A, MSC 7770, Bethesda, MD 20892. 301-435-1721. [hfriedman@csr.nih.gov](mailto:hfriedman@csr.nih.gov)

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Emotion Stress and Decision Making.

*Date:* July 19, 2006.

*Time:* 2 p.m. to 3 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 (Telephone Conference Call).

*Contact Person:* Victoria S. Levin, MSW, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3172, MSC 7848, Bethesda, MD 20892. 301-435-0912. [levin@csr.nih.gov](mailto:levin@csr.nih.gov)

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 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: June 22, 2006.

**Linda Payne,**

*Acting Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 06-5886 Filed 6-29-06; 8:45 am]

**BILLING CODE 4140-01-M**

**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) 276-1243.

**Proposed Project: Mandatory Guidelines for Federal Workplace Drug Testing Programs (OMB No. 0930-0158)—Revision**

SAMHSA's Mandatory Guidelines for Federal Workplace Drug Testing Programs will request OMB approval for the Federal Drug Testing Custody and Control Form for Federal agency and federally regulated drug testing programs which must comply with the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs (69 FR 19644) dated April 13, 2004, and for the information provided by laboratories for the National Laboratory Certification Program (NLCP).

The Federal Drug Testing Custody and Control Form is used by all Federal agencies and employers regulated by the Department of Transportation to document the collection and chain of custody of urine specimens at the collection site, for laboratories to report results, and for Medical Review Officers to make a determination. The Federal Drug Testing Custody and Control Form approved by OMB three years ago is being resubmitted for OMB approval without any revision.

Prior to an inspection, a laboratory is required to submit specific information regarding its laboratory procedures. Collecting this information prior to an inspection allows the inspectors to thoroughly review and understand the laboratory(s) testing procedures before arriving at the laboratory.

The NLCP application form has not been revised compared to the previous form.

The annual total burden estimates for the Federal Drug Testing Custody and Control Form, the NLCP application, the NLCP inspection checklist, and NLCP recordkeeping requirements are shown in the following table.

Form/respondent	Burden/response (Hrs.)	Number of responses	Total annual burden (Hrs.)
Custody and Control Form			
Donor .....	.08	7,096,000	567,680
Collector .....	.07	7,096,000	496,720
Laboratory .....	.05	7,096,000	354,800
Medical Review Officer .....	.05	7,096,000	354,800
Laboratory Application .....	3.00	3	9
Laboratory Inspection Checklist .....	3.00	100	300
Laboratory Recordkeeping .....	250.00	50	12,500
<b>Total .....</b>			<b>1,786,809</b>

Written comments and recommendations concerning the proposed information collection should be sent by July 31, 2006 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202-395-6974.

Dated: June 26, 2006.

**Anna Marsh,**

*Director, Office of Program Services.*

[FR Doc. E6-10286 Filed 6-29-06; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Notice Regarding Substance Abuse and Mental Health Services Administration's National Registry of Evidence-Based Programs and Practices (NREPP): Priorities for NREPP Reviews

*Summary:* The Substance Abuse and Mental Health Services Administration (SAMHSA) is committed to preventing the onset and reducing the progression of mental illness, substance abuse, and substance-related problems among all individuals, including youth. As part of this effort, SAMHSA has expanded and refined the agency's National Registry of Evidence-based Programs and Practices (NREPP). Two previous notices announcing these changes have been published in the **Federal Register** (70 FR 165, Aug. 26, 2005, 50381-50390; 71 FR 49, Mar. 14, 2006, 13133-13155).

This notice explains how SAMHSA and its three Centers will prioritize interventions submitted for NREPP reviews during Fiscal Year 2007 and provides guidance on the submission process. This information can be helpful to individuals and organizations seeking to have an intervention reviewed and listed on the new NREPP Web site.

*For Further Information Contact:* Kevin D. Hennessy, Ph.D., Science to Service Coordinator/SAMHSA, 1 Choke Cherry Road, Room 8-1017, Rockville, MD 20857, (240) 276-2234.

Dated: June 26, 2006.

**Eric B. Broderick,**

*Acting Deputy Administrator, SAMHSA, Assistant Surgeon General.*

#### Substance Abuse and Mental Health Services Administration's National Registry of Evidence-Based Programs and Practices (NREPP): Priorities for NREPP Reviews

##### Background

The Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-Based Programs and Practices (NREPP) is a voluntary rating and classification system designed to provide the public with reliable information on the scientific basis and practicality of interventions that prevent and/or treat mental and substance use disorders. Descriptive information and quantitative ratings are provided across several key areas for all interventions reviewed by NREPP. This information will be available to the public through a new NREPP Web site (<http://www.nrepp.samhsa.gov>) scheduled for launch by the end of 2006.

Public input from a range of stakeholders has improved NREPP's accessibility and usefulness as a "decision support tool" to help States, Territories, community-based organizations, and other interested stakeholders identify interventions that may meet their needs. NREPP will provide useful information—including ratings on the strength of evidence and readiness for dissemination—to assist individuals and organizations in identifying interventions that may address their particular needs and match their specific capacities and resources.

Each of SAMHSA's Centers—the Center for Substance Abuse Prevention, the Center for Substance Abuse Treatment, and the Center for Mental Health Services—will establish annual review priorities regarding the types of interventions to be included in NREPP. In general, these priorities will represent the interests and needs of relevant stakeholders and reflect SAMHSA's matrix and grant priorities.

This notice describes the Centers' priorities for Fiscal Year 2007 and provides guidance to individuals and organizations who may be considering submitting an intervention for NREPP review.

##### SAMHSA's NREPP Priorities

SAMHSA is prioritizing for NREPP review interventions that prevent and/or treat mental and/or substance use disorders. For NREPP purposes,

SAMHSA defines interventions as programs, practices, and/or environmental strategies designed to change behavioral outcomes among a definable population or within a definable geographic area.

The agency anticipates that it will take a minimum of 3 to 5 years to expand NREPP to include a broader array of interventions to prevent and/or treat mental and/or substance use disorders.

SAMHSA encourages submissions of culturally appropriate interventions targeting specific populations.

##### Minimum Review Requirements

In order to facilitate the submission of interventions likely to receive strong reviews within NREPP, all potential submissions should provide documentation that they meet the following three minimum requirements:

1. The intervention demonstrates one or more positive changes (outcomes) in mental health and/or substance use behavior among individuals, communities, or populations;
2. Intervention results have been published in a peer-reviewed publication or documented in a comprehensive evaluation report; and
3. Documentation (e.g., manuals, process guides, tools, training materials) of the intervention and its proper implementation is available to the public to facilitate dissemination.

Submitted interventions that do not meet all three of these minimum requirements will not be considered for potential NREPP review.

##### Priority Review Points

Submitted interventions meeting the three minimum requirements will be prioritized through a system of awarded points. Interventions will receive one priority point, and thus higher priority for potential NREPP review, if they have been evaluated using a quasi-experimental or experimental study design. Such studies may include a pre/post design with comparison or control group, or longitudinal/time series design with a minimum of three data points, one of which must be a baseline assessment.

One priority point may also be obtained if the primary outcome(s) of the submitted intervention is in one or more of the following areas, categorized by the Center funding the review:

Center for Substance Abuse Prevention (CSAP)

CSAP Priority Areas focus on comprehensive community strategies, actions and interventions that: