SUMMARY: The Administration for Children and Families (ACF), Children’s Bureau (CB) announces the award of a single-source expansion supplement to the University of Oklahoma, National Resource Center for Youth Services, Tulsa, OK, to support expanded technical assistance to address emerging technical assistance needs for States and Tribes as they seek to implement legislation and changing programs dedicated to former foster youth. The grantee is the recipient of a cooperative agreement to administer the National Resource Center for Youth Development (NRCYD). The grantee has been providing technical assistance services through a cooperative agreement since September 30, 2009, pursuant to the legislative authority of the Promoting Safe and Stable Families Program, Section 435(d), Title IV–B, subpart 2, of the Social Security Act [42 U.S.C. 629e].

In February 2008, the National Youth in Transition Database (NYTD) final regulation was promulgated. NYTD requires States to begin collecting information from youth in foster care and young adults formerly in foster care every six months, beginning October 1, 2010. State representatives continue to identify implementation of NYTD as a significant challenge, particularly since it will require State agencies to remain in contact with youth who may no longer be receiving services from the agency. The implementation of NYTD over the next four years will require the NRCYD to continue to provide additional technical assistance to States to implement this regulation effectively. Additionally, many States see the implementation of NYTD as a method to engage youth and to strengthen youth involvement in services at the State and local level. This type of youth engagement work involves long-term systemic technical assistance. The expansion grant will allow the NRCYD to support these State initiatives over the long term.

Another significant development affecting the provision of services to youth and young adults was the passage of the Fostering Connections to Success and Increasing Adoptions Act of 2008, Public Law 110–351, signed into law October 7, 2008. Among other provisions, the law for the first time provides an opportunity for certain Indian Tribes to receive direct funding for independent living services and education and training vouchers under the Chafee Foster Care Independence Program. The supplement will allow the NRCYD to provide more intensive technical assistance and on-site consultation to States and Tribes to continue to assist them in implementing these provisions.

FOR FURTHER INFORMATION CONTACT: Jan Shafer, Children’s Bureau, 1250 Maryland Avenue, SW., Washington, DC 20024. Telephone: 202–205–8172; E-mail: jan.shafer@acf.hhs.gov.


Bryan Samuels,
Commissioner, Administration on Children, Youth and Families.

[FR Doc. 2010–25711 Filed 10–12–10; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration For Children and Families

Award of a Single-Source Program Expansion Supplement to Chapel Hill Training Outreach Project, Inc.

AGENCY: Children’s Bureau, ACF, ACF, HHS.

ACTION: Notice.

CFDA Number: 93.505.

Legislative Authority: Social Security Act, Title V, Section 511 (42 U.S.C. 701), as amended by the Patient Protection and Affordable Care Act of 2010 (ACA) [Pub.L. 111–148].

Amount of Award: $90,000.

Project Period: September 30, 2010 to September 29, 2011.

SUMMARY: The Administration for Children and Families (ACF), Children’s Bureau (CB) announces the award of a single-source program expansion supplement to Chapel Hill Training Outreach Project, Inc. in Chapel Hill, NC, the administrator of the FRIENDS National Resource Center for the Community-Based Child Abuse Prevention Program (NRCCBCAP), to support technical assistance and support for the implementation of the new home visiting program by ACF and Health Resources Services Administration (HRSA) grantees under the Maternal, Infant and Early Childhood Home Visiting program, authorized by the Patient Protection and Affordable Care Act.

Supplemental funding will assist in the initial planning and implementation of this new program. Award funds will be used to:

• Provide logistical support for outreach, planning, executing, and follow-up with prospective applicants, ACF and HRSA grantees, and other stakeholders;
• Support consultation time with various experts on evidence-based home visitation and implementation science;
• Convene meetings/calls/webinars with ACF and HRSA grantees and various experts and stakeholders including national program model developers;
• Provide staff time for support for general communication, other meetings, transition information to new TA contractor; and,
• Develop a temporary Web site or other electronic tools for the program that would make key information available in a timely and accessible manner.

FOR FURTHER INFORMATION CONTACT: Melissa Brodowski, Office on Child Abuse and Neglect, Children’s Bureau, 1250 Maryland Ave., SW., #8111, Washington, DC 20024. Telephone: 202–206–2629, E-mail: melissa.brodowski@acf.hhs.gov.


Bryan Samuels,
Commissioner, Administration on Children, Youth and Families.

[FR Doc. 2010–25710 Filed 10–12–10; 8:45 am]

BILLING CODE 4184–29–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Award of a Single-Source Grant to Chapin Hall at the University of Chicago, Chicago, IL

AGENCY: Office of Planning, Research, and Evaluation, ACF, HHS.

ACTION: Notice.

CFDA Number: 93.395.

Statutory Authority: This award is authorized under section 1110 of the Social Security Act (42 U.S.C. 1310).

Amount of Award: $448,618.


SUMMARY: The Administration for Children and Families (ACF), Office of Planning, Research and Evaluation (OPRE) announces the award of a single-source grant to Chapin Hall at the University of Chicago, Chicago, IL, to study the characteristics, dynamics, and context of the child-only Temporary Assistance for Needy Families (TANF) client population. Chapin Hall’s application was received at ACF as an unsolicited proposal and underwent objective review on December 17, 2009,
where the following criteria were applied: Objectives and Need for Assistance, Facilities and Resources, Cost, and Relevance to ACF.

The Federal objective reviewers determined that the proposal evidenced a high technical quality, with well-qualified staff from respected institutions operating within a reasonable budget. Reviewers found that the proposal would add value compared to past research, through its focus on long-term child-only caseload dynamics, its use of State data, and its analysis of types of case that have not received as much attention in past research. The panel also pointed out that child-only cases are a high priority issue for ACF. The proposed project offers an updated and more detailed picture of the TANF child-only caseload, including the dynamics of client entry and exit from the caseload. It also provides a timely opportunity, in light of pending TANF reauthorization, to gather policy information about a vulnerable and important ACF client group.

OPRE will administer the grant in collaboration with HHS—Office of the Assistant Secretary for Planning and Evaluation (ASPE).

FOR FURTHER INFORMATION CONTACT: Matthew Borus, Office of Planning, Research and Evaluation, Administration for Children and Families, 370 L'Enfant Promenade, SW., Washington, DC 20447; Telephone: 202–401–5739; E-mail: Matthew.Borus@acf.hhs.gov.

Dated: October 6, 2010.

Naomi Goldstein,
Director, Office of Planning, Research and Evaluation.

[FR Doc. 2010–25722 Filed 10–12–10; 8:45 am]
BILLING CODE 4184–07–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (HHS) notifies Federal agencies of the Laboratories and Instrumented Initial Testing Facilities (IITF) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines). The Mandatory Guidelines were first published in the Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 16444); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); and April 30, 2010 (75 FR 22809).

A notice listing all currently certified Laboratories and Instrumented Initial Testing Facilities (IITF) is published in the Federal Register during the first week of each month. If any Laboratory/IITF’s certification is suspended or revoked, the Laboratory/IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines.

If any Laboratory/IITF has withdrawn from the HHS National Laboratory Certification Program (NLCP) during the past month, it will be listed at the end and will be omitted from the monthly listing thereafter.

This notice is also available on the Internet at http://www.workplace.samhsa.gov and http://www.drugfreeworkplace.gov.

FOR FURTHER INFORMATION CONTACT: Ms. Giselle Hersh, Division of Workplace Programs, SAMHSA/CSAP, Room 2–1042, One Choke Cherry Road, Rockville, Maryland 20857; 240–276–2600 (voice), 240–276–2610 (fax).

SUPPLEMENTARY INFORMATION: The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100–71. The “Mandatory Guidelines for Federal Workplace Drug Testing Programs,” as amended in the revisions listed above, requires strict standards that Laboratories and Instrumented Initial Testing Facilities (IITF) must meet in order to conduct drug and specimen validity tests on urine specimens for Federal agencies.

To become certified, an applicant Laboratory/IITF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a Laboratory/IITF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and IITFs in the applicable stage of certification do not meet the minimum requirements described in the HHS Mandatory Guidelines. A Laboratory/IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA) which attests that it has met minimum standards.

In accordance with the Mandatory Guidelines dated April 30, 2010 (75 FR 22809), the following Laboratories and Instrumented Initial Testing Facilities (IITF) meet the minimum standards to conduct drug and specimen validity tests on urine specimens:


Aegis Analytical Laboratories, 345 Hill Ave., Nashville, TN 37210, 615–255–2400. (Formerly: Aegis Corporation, Aegis Analytical Laboratories, Inc.)

Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504–361–8989/800–433–3823. (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.)


Baptist Medical Center-Toxicology Laboratory, 11401 I–30, Little Rock, AR 72209–7056, 501–202–2783. (Formerly: Forensic Toxicology Laboratory Baptist Medical Center).

Clinical Reference Lab, 8433 Quivira Road, Lenexa, KS 66215–2802, 800–445–6017.

Doctors Laboratory, Inc., 2906 Julia Drive, Valdosta, GA 31602, 229–671–2281.

DrugScan, Inc., P.O. Box 2969, 1119 Mearns Road, Warminster, PA 18974, 215–674–9310.


Laboratory Corporation of America Holdings, 7207 N. Gessner Road, Houston, TX 77040, 713–856–8288/800–800–2387.

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ