

organization represented, and a short description of the oral presentation. Only one representative of an organization may be allowed to present oral comments and if accepted by the committee, presentations may be limited to five minutes. Both printed and electronic copies are requested for the record. In addition, any interested person may file written comments with the committee by forwarding their statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Dated: August 13, 2013.

**Melanie Gray,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2013-20051 Filed 8-16-13; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

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

*Name of Committee:* National Institute of Allergy and Infectious Diseases Special Emphasis Panel; NIAID Peer Review Meeting.

*Date:* September 13, 2013.

*Time:* 12:00 p.m. to 4:00 p.m.

*Agenda:* To review and evaluate contract proposals.

*Place:* National Institutes of Health, Rockledge 6700, 6700B Rockledge Drive, Bethesda, MD 20817, (Telephone Conference Call).

*Contact Person:* Dharmendar Rathore, Ph.D., Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, National Institutes of Health/ NIAID, 6700B Rockledge Drive, MSC 7616, Rm 3134, Bethesda, MD 20892, 301-435-2766, [rathored@mail.nih.gov](mailto:rathored@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: August 13, 2013.

**Melanie Gray,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

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## 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.

#### Project: Evaluation of Programs To Provide Services to Persons Who Are Homeless With Mental and/or Substance Use Disorders (Homeless Programs)—New

SAMHSA is conducting a cross-program evaluation of Projects for Assistance in Transition from Homelessness (PATH); Services in Supportive Housing (SSH); and Grants for the Benefit of Homeless Individuals (GBHI), which includes grantee tracks focused on SSH, General GBHI grantees, and Cooperative Agreements to Benefit Homeless Individuals (CABHI). The SAMHSA Homeless Programs aim to support local capacity to provide services for homeless individuals with substance abuse and/or mental health problems. The Homeless Programs national evaluation broadly aims to address the contexts in which projects operate; whether a project is successfully implemented and provides appropriate services to the intended target population; and whether the target population demonstrates improved outcomes.

Data collection efforts for the evaluation will include a *Document Review: Project Director Telephone Follow-up, Site Visits, Evidence-Based Practice (EBP) Self-Assessment, Parts 1 and 2* and *Permanent Supportive Housing (PSH) Self-Assessment* which collect grantee project characteristics, process information such as client flow and project logic models, barriers and facilitators to implementation, and data on the types of treatment and housing services provided.

The *Document Review: Project Director Telephone Follow-up* is a telephone interview that covers the following topics: Grantee Agency and Project Characteristics, Target Population, Stakeholders/Partners, Services, EBPs/Best Practices, Housing, Project Organization and Implementation, Sustainability, Local Evaluation, Technical Assistance and Lessons Learned. Grantee project directors from the GBHI 2010, CABHI 2011-2012, and SSH 2009-2010 cohorts and PATH state contacts (n=158) will be contacted to collect grantee project information which will be used to better understand how grantees develop their grant projects.

*Site Visit Guides* consist of semi-structured discussions with grantee project directors, evaluators, financial staff, clinical treatment staff, case managers, housing supports staff, key stakeholders and consumers/client participants. This approach allows information to be collected from multiple perspectives giving a fuller picture of the grant project. Seventy-five site visits will be conducted during the evaluation (25 per year for 3 years)—60 for GBHI, CABHI and SSH grantees and 15 for PATH grantees. Over the course of multiple discussions the following major topics will be covered: client level process data (client experience with project services and client flow through the project), project components and activities, costs, project services alignment with client need, program outputs and outcomes, training and quality assurance, and relationships with primary partners and stakeholders.

The *EBP Self-Assessment* will provide data needed to assess and aggregate for analyses the resources and processes required for practice implementation, whether the EBP services are being delivered in accordance with their evidence-based components and how the practices are adapted for the projects' target populations, if relevant. The *EBP Self-Assessment* includes two parts. The first part is a general overview of EBP implementation and will be administered to all GBHI, CABHI, and SSH grantees (n=127). The second part is an in-depth assessment for grantees who are implementing one or more of the following EBPs: Assertive Community Treatment (ACT), Integrated Dual Disorders Treatment (IDDT), Illness Management and Recovery (IMR), Supported Employment (SE) and Critical Time Intervention (CTI). The estimated number of grantees who will complete Part Two of the EBP Assessment is 87.

The *PSH Self-Assessment* targets the subset of grantees implementing PSH

models and aims to help identify the extent to which grantees with PSH models meet the relevant dimensions of

PSH. The estimated number of grantees who will complete the PSH Self-Assessment is 100. Both the EBP and

PSH Self-Assessment will be web-based questionnaires.

TOTAL BURDEN HOURS FOR THE HOMELESS PROGRAMS EVALUATION GRANTEE DATA COLLECTION

Instrument/activity	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours
Project Director Telephone Follow-Up .....	158	1	158	3.5	553
Opening Session/Project Director Interview .....	<sup>a</sup> 250	1	250	3.5	875
Case Manager, Treatment, Housing Staff/Provider Interview .....	<sup>b</sup> 375	1	375	2	750
Stakeholder Interview .....	<sup>c</sup> 175	1	175	1.5	262.5
Evaluator Interview .....	<sup>d</sup> 60	1	60	1	60
Client Focus Group .....	<sup>e</sup> 300	1	300	1.5	450
Cost Interview .....	<sup>f</sup> 60&	1	60	2	120
EBP Self-Assessment Part 1 .....	127	1	127	0.58	73.66
EBP Self-Assessment Part 2 .....	87	1	87	0.5	43.5
PSH Self-Assessment .....	100	1	100	0.67	67
<b>TOTAL</b> .....	<sup>g</sup> 1,048	.....	1,692	.....	3,255

<sup>a</sup> 10 respondents × 25 site visits per year = 250 total respondents

<sup>b</sup> 15 respondents × 25 site visits per year = 375 total respondents

<sup>c</sup> 7 respondents × 25 site visits per year = 175 respondents

<sup>d</sup> 3 respondents × 20 site visits per year = 60 respondents (will not be conducted with PATH grantees)

<sup>e</sup> 12 respondents × 25 site visits per year = 300 respondents

<sup>f</sup> 3 respondents × 20 site visits = 60 respondents (will not be conducted with PATH grantees)

<sup>g</sup> Estimated number of total unique respondents; some respondents, such as project directors, will overlap across the data collection activities.

Written comments and recommendations concerning the proposed information collection should be sent by September 18, 2013 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: *OIRA\_Submission@omb.eop.gov*. Although commenters are encouraged to send their comments via email, commenters may also fax their comments to: 202-395-7285. Commenters may also mail them to: Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, DC 20503.

Summer King,  
Statistician .

[FR Doc. 2013-20071 Filed 8-16-13; 8:45 am]

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**DEPARTMENT OF HOMELAND SECURITY**

**Federal Emergency Management Agency**

[Docket ID: FEMA-2013-0020; OMB No. 1660-0114]

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

**AGENCY:** Federal Emergency Management Agency, DHS.

**ACTION:** Notice.

**SUMMARY:** The Federal Emergency Management Agency (FEMA) will submit the information collection abstracted below to the Office of Management and Budget for review and clearance in accordance with the requirements of the Paperwork Reduction Act of 1995. The submission will describe the nature of the information collection, the categories of respondents, the estimated burden (i.e., the time, effort and resources used by respondents to respond) and cost, and the actual data collection instruments FEMA will use.

**DATES:** Comments must be submitted on or before September 18, 2013.

**ADDRESSES:** Submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to the Desk Officer for the Department of Homeland

Security, Federal Emergency Management Agency, and sent via electronic mail to *oira.submission@omb.eop.gov* or faxed to (202) 395-5806.

**FOR FURTHER INFORMATION CONTACT:**

Requests for additional information or copies of the information collection should be made to Director, Records Management Division, 1800 South Bell Street, Arlington, VA 20598-3005, facsimile number (202) 646-3347, or email address *FEMA-Information-Collections-Management@dhs.gov*.

**SUPPLEMENTARY INFORMATION:**

**Collection of Information**

*Title:* FEMA Preparedness Grants: Port Security Grant Program (PSGP).

*OMB Number:* 1660-0114.

*Type of information collection:* Revision of a currently approved information collection.

*Form Titles and Numbers:* FEMA Form 089-5, PSGP Investment Justification.

*Abstract:* The PSGP is an important tool among a comprehensive set of measures to help strengthen the Nation against risks associated with potential terrorist attacks. DHS/FEMA uses the information to evaluate applicants' familiarity with the national preparedness architecture and identify how elements of this architecture have been incorporated into regional/state/local planning, operations, and investments.

*Affected Public:* State, Local or Tribal Government; business or other for-profit.