

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Meeting

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

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

Name of Committee: Frederick National Laboratory Advisory Committee.

Date: February 3–4, 2015.

Time: 9:00 a.m. to 2:00 p.m.

Agenda: Ongoing and New Activities at the Frederick National Laboratory for Cancer Research.

Place: National Institutes of Health, 31 Center Drive, Building 31, Wing C; 6th Floor, Conference Room 10, Bethesda, MD 20892.

Contact Person: Thomas M. Vollberg, Sr., Ph.D., Executive Secretary, National Cancer Institute, National Institutes of Health, 9609 Medical Center Drive, Room 7W–102, Bethesda, MD 20892, 240–276–6341, vollbert@mail.nih.gov.

Any interested person may file written comments with the committee by forwarding the 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.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: <http://deainfo.nci.nih.gov/advisory/fac/fac.htm>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: December 22, 2014.

Melanie J. 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 for the Partnerships for Success Program—New

SAMHSA is conducting a cross-site evaluation of the Strategic Prevention Framework (SPF) Partnerships for Success (PFS) program, focusing on the PFS II cohort (first funded in 2012), PFS 2013 cohort (first funded in 2013), and PFS 2014 cohort (first funded in 2014) at both the grantee and community subrecipient levels. Grantees include states, jurisdictions, and tribal entities that subsequently fund community subrecipients to implement substance use prevention interventions. The overall goals of these SPF PFS cohorts is to prevent the onset and reduce the progression of substance abuse, prioritizing underage drinking (UAD) among persons age 12 to 20, prescription drug misuse and abuse (PDM) among persons age 12 to 25, or both; reduce substance abuse-related problems; strengthen prevention capacity and infrastructure at the grantee and community levels; and leverage, redirect, and align statewide funding streams and resources for prevention.

The SPF–PFS cross-site evaluation broadly aims to document and assess the factors that contribute to the effectiveness of the PFS approach to SAMHSA's mission of reducing UAD and PDM, including costs, inputs, outputs, and contextual factors. Targeted evaluation outcomes include both grantee- and community-level substance use intervening variables (e.g., perceived risk of binge drinking), consumption (e.g., past year PDM), and

consequences (e.g., alcohol or prescription drug overdoses), especially those related to UAD and PDM.

The SPF–PFS cross-site evaluation will examine infrastructure, with a primary focus on monitoring grantees and community subrecipients to ensure they follow the SPF process, but will place a special emphasis on assessing capacity changes of the community subrecipients who all should be purposefully selected for their high need and low capacity. Another important aspect of the infrastructure evaluation for the SPF–PFS cross-site will be an examination of leveraged partner relationships. In addition, the SPF–PFS cross-site evaluation will collect detailed data about implemented evidence-based interventions, to provide a comprehensive typology of interventions and assess how various types and combinations impact outcomes. The SPF PFS cross-site also will examine economic issues, including associations between funding and outcomes and the cost-effectiveness of various intervention types and combinations.

The SPF–PFS cross site evaluation is expected to have numerous program and policy implications and outcomes at the national, state, and community levels. It will provide valuable information to the prevention field about best practices in real world settings, along with what types of adaptations community implementers make to evidence based interventions to better fit their targeted populations and settings. SPF–PFS cross-site findings will provide guidance to governmental entities and communities as to what types of interventions should be funded and implemented to reduce UAD and PDM. More specifically, this guidance will include information on what combinations or types of interventions work the best. Beyond intervention type and cost, the SPF–PFS cross-site evaluation also will provide a valuable assessment of the importance of leveraged funding as well as providing information about the process states, jurisdictions, tribes, and communities undergo to leverage funding. Information and guidance about leveraging that comes from the SPF–PFS cross site evaluation will allow the federal government, state, tribes, jurisdictions, and local communities to more effectively and efficiently use their resources and sustain future prevention efforts.

Data collection efforts for the evaluation include a *Grantee-Level Instrument—Revised (GLI-R)*, a *Community-Level Instrument—Revised (CLI-R)*, and a *Project Director (PD)*