

Written comments and recommendations concerning the proposed information collection should be sent by January 12, 2017 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, 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: 202-395-5806. 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.

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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: National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119)—Revision

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Health Statistics and Quality (CBHSQ) is requesting a revision to the National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119), which expires on February 28, 2017. The N-MHSS provides annual national and state-level data on the number and characteristics of mental health treatment facilities in the United States and biennial national and state-level data on the number and characteristics of persons treated in these facilities.

The N-MHSS will provide updated information about facilities for SAMHSA's online Behavioral Health Treatment Services Locator (see: *https://findtreatment.samhsa.gov*), which was last updated with information from the abbreviated N-MHSS (N-MHSS-Locator Survey) in 2015. An abbreviated N-MHSS (N-MHSS-Locator Survey) will be conducted in 2017 and 2019 to update the information about facilities in the online Locator. A full-scale N-MHSS will be conducted in 2018 to collect (1) information about facilities needed for updating the online Locator, such as the facility name and address, specific services offered, and special client groups served and (2) additional information about client counts and the demographics of persons treated in these facilities. Three small surveys are proposed for adding new facilities to the online Locator as they become known to SAMHSA. Both the 2017 N-MHSS-Locator Survey and the addition of new facilities to the online Locator will use the same N-MHSS-Locator Survey instrument.

This request for a revision seeks to change the content of the currently approved abbreviated N-MHSS (*i.e.*, N-MHSS-Locator) survey instrument, and the previously approved 2014 and 2016 full-scale N-MHSS (OMB No. 0930-0119) to accommodate two related N-MHSS activities:

(1) collection of information from the total N-MHSS universe of mental health treatment facilities during 2017, 2018, and 2019; and

(2) collection of information on newly identified facilities throughout the year as they are identified so that new facilities can quickly be added to the online Locator.

The survey mode for both data collection activities will be web with telephone follow-up. A paper questionnaire will also be available to facilities who request one.

The database resulting from the N-MHSS will be used to update SAMHSA's online Behavioral Health Treatment Services Locator and to produce an electronic version of a national directory of mental health facilities, for use by the general public, behavioral health professionals, and treatment service providers. In addition, a data file derived from the survey will be used to produce a summary report providing national and state-level outcomes. The summary report and a public-use data file will be used by researchers, mental health professionals, State governments, the U.S. Congress, and the general public.

The request for OMB approval will include a request to conduct an abbreviated N-MHSS-Locator survey in 2017 and 2019, and the full-scale N-MHSS in 2018.

The following table summarizes the estimated annual response burden for the N-MHSS:

ESTIMATED ANNUAL RESPONSE BURDEN FOR THE N-MHSS

Type of respondent	Number of respondents	Responses per respondent	Average hours per response	Total burden hours
Facilities in N-MHSS-Locator Survey universe in 2017 and 2019	17,000	1	0.42	7,140
Newly identified facilities in Between-Survey Update in 2017, 2018, and 2019 ¹	1,700	1	0.42	714
Facilities in full-scale N-MHSS universe in 2018	17,000	1	0.75	12,750
Average Annual Total	18,700	1	0.62	9,724

¹ Collection of information on newly identified facilities throughout the year, as they are identified, so that new facilities can quickly be added to the Locator.

Written comments and recommendations concerning the proposed information collection should be sent by December 28, 2016 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,
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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 (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed project or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Comments are invited on: (a) Whether the proposed collection of information is 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—Talk. They Hear You.” Campaign Evaluation: Case Studies—NEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) is requesting approval from the Office of Management and Budget (OMB) for a new data collection, “Talk. They Hear You.” Campaign Evaluation: Case Studies (the “case studies”). This collection includes three instruments:

1. Parent/Caregiver Pre-Test/Post-Test Survey
2. Youth Pre-Test and Post-Test Survey
3. Parent/Caregiver Interview Guide

The case studies collection is part of a larger effort to evaluate the impact of the “Talk. They Hear You.” Campaign. These evaluations will help determine the extent to which the campaign has been successful in educating parents and caregivers nationwide about effective methods for reducing underage drinking. The Campaign is designed to educate and empower parents and caregivers to talk with children about alcohol. To prevent initiation of underage drinking, the campaign targets parents and caregivers of children aged 9–15, with the specific aims of:

1. Increasing parents’ awareness of the prevalence and risk of underage drinking
2. Equipping parents with the knowledge, skills, and confidence to prevent

- underage drinking
3. Increasing parents’ actions to prevent underage drinking.

For this evaluation, SAMHSA intends to measure knowledge and attitudes before and after a focused campaign outreach effort in areas that have not previously had significant exposure to the campaign. Participants in the evaluation will be recruited from a middle school community, and will include parents/caregivers and students. School administrators and partnering organization(s), such as parent organizations and/or local prevention organizations will assist in the dissemination of campaign materials and data collection efforts. There will be two sites selected for the case studies—one site will serve as the experimental group and the other site will serve as the control group. The experimental group will be exposed to the “Talk. They Hear You.” messages using standard campaign materials and dissemination strategies, which will be coordinated through a local partner organization. The control group will not be intentionally exposed to the campaign materials. The case studies will include baseline surveys of parents/caregivers and children of middle-school age in both the experimental and control communities, followed by exposure to campaign materials in the experimental community, and post-exposure surveys of parents and children in both communities. Additionally, SAMHSA will conduct 30 interviews with parents and caregivers following the post-exposure surveys at the experimental site to obtain more detailed information about the specific impact of the campaign.

ANNUALIZED HOURLY BURDEN

Instrument	Total No. of respondents	Total responses/ respondent	Total responses	Hrs. per response	Total hour burden
Pre-test survey for 9–15-year old youth	1,093	1	1,093	0.17	185.8
Post-test survey for 9–15-year old youth	1,093	1	1,093	0.17	185.8
Pre-test survey for parents and caregivers	690	1	690	0.17	117.3
Post-test survey for parents and caregivers	690	1	690	0.17	117.3
Individual interviews with parents and caregivers	30	1	30	1	30
Total	1,783	3,596	636.2