

and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information.

Proposed Project

Evaluation of Medication-Assisted Treatment (MAT) for Opioid use disorder—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC seeks a three-year OMB approval to collect evaluation information for Medication-Assisted Treatment (MAT) for Opioid use disorder.

About 2.4 million people aged 18 or older have opioid use disorders (OUDs)

in the United States. At any given time, only half of these people receive some form of treatment, which may include medication-assisted treatment (MAT) or abstinence-based psychotherapy or self-help treatments (*i.e.*, counseling without medication [COUN]). The rise in opioid overdose deaths, up from 2014–2015 due partly to a 72% rise in synthetic opioid overdose deaths alone, shows that engaging and retaining clients in OUD treatment is an urgent public health need. Only a few studies are available to help clients and providers make informed decisions about the risks and benefits associated with the different types of MATs. This information is crucial because even though each MAT drug helps prevent withdrawal symptoms and decreases cravings, differences in treatment approach and settings influence how people respond to the medication and, thus, their long-term treatment success.

The purpose of this evaluation is to conduct an epidemiologic, mixed-methods evaluation of OUD treatment in

real-world outpatient settings. The study aims to have 3,000 participants from real-world outpatient settings to better understand the relationship between type of MAT and individual, provider, and contextual characteristics related to retention in treatment and abstinence from opioid use. The sites will be located across 10 diverse metropolitan statistical areas (MSAs) with four sites in each MSA. At each site, about 75 participants are expected to participate for a total of 300 per MSA. Across all MSAs, the study will aim to have 750 client participants in each of the four treatment conditions (MMT, BUP, NAL, and COUN).

The study will use a mixed-method approach using quantitative methods such as multilevel latent growth models, propensity score matching, latent class analysis and advance mediation analysis and qualitative methods such as interactive coding and analysis for common themes. The only cost to respondents will be time spent responding to the survey/screener.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Instrument name	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total burden (hours)
Provider site staff	Client Permission Form	15	100	5/60	125
	Visit Form	15	525	10/60	1,313
	Site Director Questionnaire	15	2	1	30
	Focus Groups	27	1	90/60	41
Client respondents	Client Screener	1,333	1	5/60	111
	Client Check-in	1,000	2	15/60	500
	Client Questionnaire	2,412	1	49/60	1,978
	Focus Groups	27	1	90/60	41
Total					4,139

Leroy A. Richardson,
Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Title: Administration for Native Americans Objective Work Plan (OWP) and Objective Progress Report (OPR).

OMB No.: 0970–0452.

Description: Content and formatting changes are being made to the

Administration for Native Americans’ (ANA) Objective Work Plan (OWP) and Objective Progress Report (OPR). The OWP is used by applicants when they submit their proposals and then by grantees to monitor their projects once the award is made by ANA. Slight content changes are proposed for the OWP approved under information collection OMB No. 0970–0452, Expiration Date 6/30/2018. An extension of expiration date is also requested. This will streamline the information collection and reduce the number of elements.

OWP: The following are proposed content changes to the document: ANA proposes to eliminate Problem Statement and Results and Benefits and Criteria for Evaluation of results and benefits from the OWP. These elements will no longer be required by applicants for ANA discretionary grants. ANA will

consolidate staffing into one field for both lead and support staff.

ANA will require applicants to differentiate between administrative activities and milestone activities. Administrative activities are those directly related to grant administration, such as reporting and attending post-award training. Milestone activities are key activities needed to complete project objectives. These activities may result in a single output; therefore ANA will require applicants to identify outputs related to milestone activities as necessary.

OPR: Currently, ANA requires grantees to report on the status of results and benefits in the OPR. This section will be deleted as ANA no longer requires grantees to identify results or benefits from their project, just outcomes. Outcomes will be reported annually in a separate OMB approved form.

Respondents: Tribal Governments, Native non-profit organizations, Tribal

Colleges & Universities applying for ANA funding.

The following is the hour of burden estimate for this information collection:

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
OWP	300	1	2	600
OPR	275	2	1	550

Estimated Total Annual Burden Hours: 1,150.

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street Washington, DC 20201, Attn: ACF Reports Clearance Officer. Email address: infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) The accuracy of the agency's estimate of the burden of the proposed collection of information; (b) the quality, utility, and clarity of the information to be collected; and (c) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Robert Sargis,
Reports Clearance Officer.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[CFDA Number: 93.676]

Announcement of the Award of Six Single-Source Program Expansion Supplement Grants Under the Unaccompanied Children's Program

AGENCY: Office of Refugee Resettlement, ACF, HHS.

ACTION: Notice of award of six single-source program expansion supplement

grants under the Unaccompanied Children's (UC) Program.

SUMMARY: The Administration for Children and Families, Office of Refugee Resettlement (ORR), announces the award of six single-source program expansion supplement grants for a total of \$14,821,314 under the UC Program.

DATES: Supplemental award funds will support activities for four grantees from October 1, 2016, through December 31, 2016, and for two grantees from October 1, 2016, through September 30, 2017.

FOR FURTHER INFORMATION CONTACT: Jallyn Sualog, Director, Division of Unaccompanied Children Operations, Office of Refugee Resettlement, 330 C Street SW., Washington, DC 20201. Phone: 202-401-4997. Email: DCSProgram@acf.hhs.gov.

SUPPLEMENTARY INFORMATION: ORR is continuously monitoring its capacity to shelter the UC referred to the Department of Health and Human Services (HHS), and the information received from interagency partners, to inform any future decisions or actions. The six recipients are:

Organization	Location	Amount
Heartland Human Care, Inc	Chicago, IL	\$845,855
International Educational Services, Inc	San Benito, TX	131,109
International Educational Services, Inc	Los Fresnos, TX	1,118,780
Cayuga Home for Children DBA Cayuga Centers	New York, NY	979,200
Southwest Key	Phoenix, AZ	2,460,800
Southwest Key	Brownsville, TX	9,285,570

ORR has been identifying additional capacity to provide shelter for potential increases in apprehensions of UC at the U.S. Southern Border. Planning for increased shelter capacity is a prudent step to ensure that ORR is able to meet its responsibility, by law, to provide shelter for Unaccompanied Children referred to its care by the Department of Homeland Security (DHS).

The expansion supplement grants will support the need to increase shelter capacity to accommodate the increasing numbers of UCs being referred by DHS. All grantees have the infrastructure,

licensing, experience and appropriate level of trained staff to meet the service requirements and the urgent need for expansion of services. The grantees provide residential services to UC in the care and custody of ORR, as well as services to include counseling, case management, and additional support services to the family or to the UC and their sponsor when a UC is released from ORR's care and custody.

ORR has specific requirements for the provision of services. Award recipients must have the infrastructure, licensing, experience, and appropriate level of

trained staff to meet those requirements. The expansion of the existing program and its services through this supplemental award is a key strategy for ORR to be prepared to meet its responsibility to provide shelter for UC referred to its care by DHS and so that the U.S. Border Patrol can continue its vital national security mission to prevent illegal migration and trafficking, and to protect the borders of the United States.