

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.

Project: 2021 Behavioral Health Workforce Surveys, Part of the Mental and Substance Use Disorder Practitioner Data Grant Funded by SAMHSA, Grant Number H79FG000028

SAMHSA is requesting from the Office of Management and Budget (OMB) approval to administer two surveys being developed as part of the Mental and Substance Use Disorder Practitioner Data grant: (1) A one-time survey to employers of behavioral health providers and, (2) a one-time survey of licensed clinical behavioral health providers. The information gathered by these surveys will be used to gain critical new insights into, and to document, challenges in recruiting and retaining behavioral health staffing and to assess the strength of available data on the clinical behavioral health workforce actively providing care for mental health and substance use disorders.

Employer Survey

The survey includes questions to assess the following measures: Facility type (e.g., outpatient facility, inpatient, residential); type of behavioral health staff employed (e.g., addiction medicine specialists, psychiatric Nurse Practitioners, marriage and family

therapists); services offered (e.g., assertive community treatment, partial hospitalization); roles and training needs of peer support specialists, case managers, care managers, and pharmacists (e.g., certification, population served, paid status, reimbursement); professions with recruitment and retention challenges (e.g., select from list of professions); reasons behind the challenges (e.g., low wages, high case load) and work-arounds (e.g., use of locum tenens); average wait-time for appointments (e.g., new patient visits); staffing needed to address gaps in care (e.g., estimated FTEs needed by profession type); use of telehealth (e.g., percent of visits); patient mix (e.g., immigrants, LGBTQ communities, number of clients); and form of payment (e.g., percent commercial, Medicaid, self-pay). The survey will be administered online through Qualtrics.

The target population will be the 2,800 member organizations of the National Council of Behavioral Health (NCBH). NCBH members are healthcare organizations and management entities that offer treatment and supports to more than eight million adults and children living with mental illnesses and addictions.

Provider Survey

The survey will help identify how many licensed clinical behavioral health specialists (licensed psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors) are seeing clients for behavioral health needs and the populations served. The survey includes questions to assess the following measures: Demographics (e.g., age, race/ethnicity, sex); professional

and practice setting (e.g., self-employed, outpatient mental health clinic, zip code, hours worked); level of education (e.g., Masters in Social Work, Doctorate in Social Work); types of services provided (e.g., assertive community treatment); number of and type clients served (e.g., Medicaid, Medicare, veteran, immigrants); telehealth use (e.g., current or prior to COVID-19 outbreak); and career satisfaction and burnout (e.g., very satisfied, “I enjoy my work, I have no symptoms of burnout”).

The target population will be a random sample of 5,000 licensed clinical behavioral health providers (licensed psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors) in states where email addresses are available with state licensure data.

The primary objectives of the surveys are to:

- Better understand factors associated with challenges in both recruitment and retention at behavioral health provider organizations.
- Estimate the workforce needed to better address gaps in care for mental health and substance use disorder.
- Obtain new insights on staffing models for treatment of serious mental illness, such as assertive community treatment.
- Collect new data on use of peer support specialists, care coordinators, and pharmacists in behavioral health care.
- Assess whether state licensure data is a reliable data source for building a comprehensive database on clinical behavioral health practitioners who are actively providing client services that require licensure.

EXHIBIT 1—TOTAL ESTIMATED ANNUALIZED BURDEN BY INSTRUMENT

Type of participant activity	Number of participants	Responses per participant	Total responses	Hours per response	Total burden hours	Wage rate	Total hour cost
Employer Survey	2,800	1	2,800	.25	700	\$21.79	\$15,253
Provider Survey	5,000	1	5,000	.25	1,250	21.79	27,237.50
Total	7,800	7,800	1,950	42,490.50

Send comments Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57-B, Rockville, Maryland 20857, OR email a copy to *Carlos.Graham@samhsa.hhs.gov*. Written comments should be received by March 1, 2021.

Carlos Graham,
Social Science Analyst.

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DEPARTMENT OF HOMELAND SECURITY

U.S. Customs and Border Protection

New Dates for the April and October 2021 Customs Broker’s License Examinations

AGENCY: U.S. Customs and Border Protection, Department of Homeland Security.

ACTION: General notice.

SUMMARY: This document announces that U.S. Customs and Border Protection has changed the dates on which the semi-annual examination for an individual broker’s license will be held in April and October 2021.

DATES: The customs broker’s license examination scheduled for April 2021 will be held on Wednesday, April 21, 2021, and the customs broker’s license

examination scheduled for October 2021 will be held on Thursday, October 21, 2021.

FOR FURTHER INFORMATION CONTACT:

Melba Hubbard, Acting Director, Commercial Operations, Revenue and Entry, Office of Trade, (202) 325–6986, or brokermanagement@cbp.dhs.gov.

SUPPLEMENTARY INFORMATION:

Background

Section 641 of the Tariff Act of 1930, as amended (19 U.S.C. 1641), provides that a person (an individual, corporation, association, or partnership) must hold a valid customs broker's license and permit in order to transact customs business on behalf of others, sets forth standards for the issuance of brokers' licenses and permits, and provides for the taking of disciplinary action against brokers that have engaged in specified types of infractions. This section also provides that an examination may be conducted to assess an applicant's qualifications for a license.

The regulations issued under the authority of section 641 are set forth in Title 19 of the Code of Federal Regulations, part 111 (19 CFR part 111). Part 111 sets forth the regulations regarding the licensing of, and granting of permits to, persons desiring to transact customs business as customs brokers. These regulations also include the qualifications required of applicants and the procedures for applying for licenses and permits. Section 111.11 of the CBP regulations (19 CFR 111.11) sets forth the basic requirements for a broker's license, and in paragraph (a)(4) of that section provides that an applicant for an individual broker's license must attain a passing grade (75 percent or higher) on the examination.

Section 111.13 of the CBP regulations (19 CFR 111.13) sets forth the requirements and procedures for the examination for an individual broker's license and states that the customs broker's license examinations will be given on the fourth Wednesday in April and October unless the regularly scheduled examination date conflicts with a national holiday, religious observance, or other foreseeable event.

Due to the limited availability of testing sites caused by state and local restrictions during the COVID–19 pandemic, CBP has changed the regularly scheduled dates of the examination. This document announces that CBP has scheduled the April 2021 customs broker's license examination for Wednesday, April 21, 2021, and the October 2021 customs broker's license examination for Thursday, October 21, 2021.

Dated: December 27, 2020.

Cynthia F. Whittenburg,

*Acting Executive Assistant Commissioner,
Office of Trade.*

[FR Doc. 2020–28966 Filed 12–30–20; 8:45 am]

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DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID FEMA–2020–0016]

Meeting To Implement Pandemic Response Voluntary Agreement Under Section 708 of the Defense Production Act

AGENCY: Federal Emergency Management Agency, Department of Homeland Security (DHS).

ACTION: Announcement of meeting.

SUMMARY: The Federal Emergency Management Agency (FEMA) held a meeting remotely via web conference to implement the Voluntary Agreement for the Manufacture and Distribution of Critical Healthcare Resources Necessary to Respond to a Pandemic.

DATES: The meeting took place on Monday, December 21, 2020, from 11 a.m. to 12:30 p.m. Eastern Time (ET).

FOR FURTHER INFORMATION CONTACT: Robert Glenn, Office of Business, Industry, Infrastructure Integration, via email at OB3I@fema.dhs.gov or via phone at (202) 212–1666.

SUPPLEMENTARY INFORMATION: Notice of these meetings is provided as required by section 708(h)(8) of the Defense Production Act (DPA), 50 U.S.C. 4558(h)(8), and consistent with 44 CFR part 332.

The DPA authorizes the making of “voluntary agreements and plans of action” with, among others, representatives of industry and business to help provide for the national defense.¹ The President's authority to facilitate voluntary agreements was delegated to the Secretary of Homeland Security with respect to responding to the spread of COVID–19 within the United States in Executive Order 13911.² The Secretary of Homeland Security has further delegated this authority to the FEMA Administrator.³

On August 17, 2020, after the appropriate consultations with the Attorney General and the Chairman of

the Federal Trade Commission, FEMA completed and published in the **Federal Register** a “Voluntary Agreement for the Manufacture and Distribution of Critical Healthcare Resources Necessary to Respond to a Pandemic” (Voluntary Agreement).⁴ Unless terminated prior to that date, the Voluntary Agreement is effective until August 17, 2025, and may be extended subject to additional approval by the Attorney General after consultation with the Chairman of the Federal Trade Commission. The Agreement may be used to prepare for or respond to any pandemic, including COVID–19, during that time.

On December 7, 2020, the first plan of action under the Voluntary Agreement—the Plan of Action to Establish a National Strategy for the Manufacture, Allocation, and Distribution of Personal Protective Equipment (PPE) to Respond to COVID–19 (Plan of Action)—was finalized.⁵ The Plan of Action established the Personal Protective Equipment Sub-Committee to Define COVID–19 PPE Requirements (Sub-Committee).

The meetings covered by this notice were held by the Sub-Committee to implement the Voluntary Agreement. The meetings were chaired by the FEMA Administrator or his delegate, and attended by the Attorney General or his delegate and the Chairman of the Federal Trade Commission or his delegate. In implementing the Voluntary Agreement, FEMA adheres to all procedural requirements of 50 U.S.C. 4558 and 44 CFR part 332.

Meeting Objectives: The objectives of the meetings were to:

- (1) Finalize the priority tasks that should be completed first under the Plan of Action;
- (2) Identify which Sub-Committees should begin meeting in January 2021; and
- (3) Identify additional Participants and Attendees who should be invited to participate in the Plan of Action.

Meetings Closed to the Public: By default, the DPA requires meetings held to implement a voluntary agreement or plan of action be open to the public.⁶ However, attendance may be limited if

⁴ 85 FR 50035 (Aug. 17, 2020). The Attorney General, in consultation with the Chairman of the Federal Trade Commission, made the required finding that the purpose of the voluntary agreement may not reasonably be achieved through an agreement having less anticompetitive effects or without any voluntary agreement and published the finding in the **Federal Register** on the same day. 85 FR 50049 (Aug. 17, 2020).

⁵ See 85 FR 78869 (Dec. 7, 2020). See also 85 FR 79020 (Dec. 8, 2020).

⁶ See 50 U.S.C. 4558(h)(7).

¹ 50 U.S.C. 4558(c)(1).

² 85 FR 18403 (Apr. 1, 2020).

³ DHS Delegation 09052, Rev. 00.1 (Apr. 1, 2020); DHS Delegation Number 09052 Rev. 00 (Jan. 3, 2017).