

other Federal agencies in order to provide a full range of services to veterans. CSAP will also be able to monitor their outcomes and activities per the NOMS. The total annual burden estimate is shown below:

SAMHSA/CSAP program	Number of grantees	Number of respondents	Responses per respondent	Hours/response	Total hours
FY 11					
Science/Services:					
Fetal Alcohol	23	4,800	3	0.4	5,760
Capacity:					
HIV/Targeted Capacity	122	31,964	3	0.83	79,590
SPF SIG	51	.....	0	.....	.....
SPF SIG/Community Level* .....	.....	765	1	0.83	635
SPF SIG/Program Level* .....	.....	19,125	3	0.4	22,950
PFS	5	.....	0	.....	.....
PFS/Community Level* .....	.....	75	1	0.83	62
PFS/Program Level* .....	.....	1,875	3	0.4	2,250
PPC	N/A	N/A	N/A	N/A	N/A
FY 12					
Science/Services:					
Fetal Alcohol	23	4,800	3	0.4	5,760
Capacity:					
HIV/Targeted Capacity	122	31,964	3	0.83	79,590
SPF SIG	51	.....	0	.....	.....
SPF SIG/Community Level* .....	.....	765	1	0.83	635
SPF SIG/Program Level* .....	.....	19,125	3	0.4	22,950
PFS	10	.....	0	.....	.....
PFS/Community Level* .....	.....	150	1	0.83	125
PFS/Program Level* .....	.....	3,750	3	0.4	4,500
PPC	50	25,000	1	0.83	20,750
FY 13					
Science/Services:					
Fetal Alcohol	23	4,800	3	0.4	5,760
Capacity:					
HIV/Targeted Capacity	122	31,964	3	0.83	79,590
SPF SIG	35	.....	0	.....	.....
SPF SIG/Community Level* .....	.....	525	1	0.83	436
SPF SIG/Program Level* .....	.....	13,125	3	0.4	15,750
PFS	15	.....	0	.....	.....
PFS/Community Level* .....	.....	225	1	0.83	187
PFS/Program Level* .....	.....	5,625	3	0.4	6,750
PPC	50	25,000	1	0.83	20,750
Annual Average .....	.....	11,271	.....	.....	18,739

* The Strategic Prevention Framework State Incentive Grant (SPF SIG) and Partnerships for Success (PFS) have a three level evaluation: The Grantee, Community and Program Level. The Grantee level data will be pre-populated by SAMHSA. The use of the Community Level instrument is optional as they relate to targeted interventions implemented during the reporting period. At the program level, items will be selected in line with direct services implemented.

Written comments and recommendations concerning the proposed information collection should be sent by September 29, 2011 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to

submit comments by fax to: 202-395-7285.

Rose Shannon,
Director, Division of Executive Correspondence.

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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: Transformation Accountability Reporting System—(OMB No. 0930-0285)—Revision

This revised instrument will allow SAMHSA to collect information on two new strategic initiatives—*Trauma and Violence* and *Military Families*. The new items will be added to the Transformation Accountability (TRAC) Reporting System is a real-time, performance management system that captures information on mental health services delivered in the United States. A wide range of client and program information is captured through TRAC for approximately 400 grantees.

With the addition of new questions regarding military families, experiences with trauma, and experiences with violence GFA, there is a proposed new data collection instrument up for comment. Approval of this information collection will allow SAMHSA to continue to meet Government Performance and Results Act of 1993 (GPRA) reporting requirements that quantify the effects and accomplishments of its discretionary grant programs which are consistent with OMB guidance.

CMHS has increased the number of questions in the instrument to satisfy reporting needs. The following paragraphs present a description of the changes made to the information collection. These questions will be contained in new sections in the Services tool.

Violence and Trauma—CMHS proposes to add the following 6 items in a new section entitled “Violence and Trauma”.

1. Have you ever experienced violence or trauma in any setting (including community or school violence; domestic violence; physical, psychological, or sexual maltreatment/assault within or outside of the family; natural disaster; terrorism; neglect; or traumatic grief)? No, (skip to next section)

2. Did any of these experiences feel so frightening, horrible, or upsetting that in the past and/or the present that you:

2a. Have had nightmares about it or thought about it when you did not want to?

2b. Tried hard not to think about it or went out of your way to avoid situations that remind you of it?

2c. Were constantly on guard, watchful, or easily startled?

2d. Felt numb and detached from others, activities, or your surroundings?

3. In the past 30 days, how often have you been hit, kicked, slapped, or otherwise physically hurt?

• **Experiences With Violence and Trauma**—One of SAMHSA’s 10 Strategic Initiatives is trauma and violence. In order to capture this information, CMHS is adding six new questions to be asked of respondents. This information will help in SAMHSA’s overall goal of reducing the behavioral health impacts of violence and trauma by encouraging substance abuse treatment programs to focus on trauma-informed services.

Military Family and Deployment—CMHS proposes to add the following 6 new items in a new section entitled “Military Family and Deployment”.

1. Have you ever served in the Armed Forces, in the Reserves, or the National Guard [select all that apply]? No, (Skip to #2)

1b. Are you currently on active duty in the Armed Forces, in the Reserves, or the National Guard [select all that apply]?

1c. Have you ever been deployed to a combat zone?

2. Is anyone in your family or someone close to you on active duty in the Armed Forces, in the Reserves, or the National Guard, or separated or retired from Armed Forces, Reserves, or the National Guard? No, (Skip to next section)

3. What is the relationship of that person (Service Member) to you?

3b. Has the Service Member experienced any of the following (check all that apply):

○ Deployed in support of Combat Operations (e.g. Iraq or Afghanistan)

○ Was physically Injured during combat Operations

○ Developed combat stress symptoms/ difficulties adjusting following deployment, including PTSD, Depression, or suicidal thoughts

○ Died or was killed

• **Veteran Family Status and Areas of Deployment**—SAMHSA is also interested in collecting data on active duty and veteran military members. Collection of these data will allow CMHS to identify the number of veterans served, deployment status and location, and family veteran status in conjunction with the types of services they may receive. Identifying a client’s veteran status and deployment area allows CMHS and the grantees to monitor these clients and explore whether special services or programs are needed to treat them for substance abuse and other related issues. Identification of veteran status and other military family issues will also allow coordination between SAMHSA and other Federal agencies in order to provide a full range of services to veterans. CMHS will also be able to monitor their outcomes and activities per the NOMS. The total annual burden estimate is shown below:

ESTIMATES OF ANNUALIZED HOUR BURDEN—CMHS CLIENT OUTCOME MEASURES FOR DISCRETIONARY PROGRAMS

Type of response	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden	Hourly wage cost	Total hour cost
Client-level baseline interview	15,681	1	15,681	0.48	7,527	¹ \$15	\$112,905
Client-level 6-month reassessment interview	10,646	1	10,646	0.367	3,907	15	58,605
Client-level discharge interview ²	4,508	1	4,508	0.367	1,655	15	24,825
Client-level baseline chart abstraction	2,352	1	2,352	0.1	235	15	3,525
Client-level reassessment chart abstraction ³	9,017	1	9,017	0.1	902	15	13,530
Client-level Subtotal ⁴	15,681	.....	15,681	.....	14,226	15	213,390
Infrastructure development, prevention, and mental health promotion quarterly record abstraction ...	942	4	3,768	4	15,072	⁵ 35	527,520

ESTIMATES OF ANNUALIZED HOUR BURDEN—CMHS CLIENT OUTCOME MEASURES FOR DISCRETIONARY PROGRAMS—Continued

Type of response	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden	Hourly wage cost	Total hour cost
Total	16,623	.....	.....	.....	29,298	.....	740,910

¹ Based on minimum wage.

² Based on an estimate that it will be possible to conduct discharge interviews on 40 percent of those who leave the program.

³ Chart abstraction will be conducted on 100 percent of those discharged.

⁴ This is the maximum additional burden if all consumers complete the baseline and periodic reassessment interviews.

⁵ To be completed by grantee Project Directors, hence the higher hourly wage.

Written comments and recommendations concerning the proposed information collection should be sent by September 29, 2011 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202-395-7285.

Rose Shannon,
Director, Division of Executive Correspondence.

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DEPARTMENT OF HOMELAND SECURITY

Office of the Secretary

[Docket No. DHS-2011-0045]

Privacy Act of 1974; Department of Homeland Security/Federal Emergency Management Agency—001 National Emergency Family Registry and Locator System of Records

AGENCY: Privacy Office, DHS.

ACTION: Notice of Privacy Act system of records.

SUMMARY: In accordance with the Privacy Act of 1974, the Department of Homeland Security proposes to update and reissue a current Department of Homeland Security system of records titled, “Department of Homeland Security/Federal Emergency Management Agency—001 National Emergency Family Registry and Locator System of Records.” This system of records allows the Department of Homeland Security/Federal Emergency Management Agency to collect and maintain records on adults displaced from their homes or pre-disaster location after a Presidential-declared emergency or disaster. This system of

records has been updated to include Law Enforcement Officials in categories of records, individuals, routine uses, and record source categories. This updated system will be included in the Department of Homeland Security's inventory of record systems.

DATES: Submit comments on or before September 29, 2011. This new system will be effective September 29, 2011.

ADDRESSES: You may submit comments, identified by docket number DHS-2011-0045 by one of the following methods:

- *Federal e-Rulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.

- *Fax:* 703-483-2999.

- *Mail:* Mary Ellen Callahan, Chief Privacy Officer, Privacy Office, Department of Homeland Security, Washington, DC 20528.

- *Instructions:* All submissions received must include the agency name and docket number for this rulemaking. All comments received will be posted without change to <http://www.regulations.gov>, including any personal information provided.

- *Docket:* For access to the docket to read background documents or comments received go to <http://www.regulations.gov>.

FOR FURTHER INFORMATION CONTACT: For general questions please contact: Dr. Lesia Banks, (202-212-4491), Acting Privacy Officer, Federal Emergency Management Agency, 500 C Street, NW, Washington, DC 20475. For privacy issues please contact: Mary Ellen Callahan (703-235-0780), Chief Privacy Officer, Privacy Office, Department of Homeland Security, Washington, DC 20528.

SUPPLEMENTARY INFORMATION:

I. Background

In accordance with the Privacy Act of 1974, 5 U.S.C. 552a, the Department of Homeland Security (DHS) Federal Emergency Management Agency (FEMA) proposes to update and reissue a current DHS/FEMA system of records titled, “DHS/FEMA-001 National

Emergency Family Registry and Locator (NEFRLS) System of Records,” 74 FR 48767, September 29, 2009.

The DHS/FEMA NEFRLS System of Records collects information from Law Enforcement Officials (LEOs) for the purpose of responding to a Missing Persons Report. The information collected from LEOs is to facilitate identity verification and their status as a member of law enforcement.

During Hurricane Katrina, displaced individuals experienced numerous difficulties in reuniting with family members after the disaster. As a result, Congress mandated in Section 689c of the Post-Katrina Emergency Management Reform Act (PKEMRA) of 2006, Public Law 109-295, that FEMA establish NEFRLS. FEMA has the discretionary authority to activate NEFRLS to help reunify families separated after an emergency or disaster declared by the President as defined in the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207.

The collection of a LEO's identifying information increased the amount of identifying information collected and maintained by the DHS/FEMA-001 NEFRLS System of Records. Information collected is stored on FEMA secured servers, and/or stored in locked cabinets with secured facility access controls.

Previously, the DHS/FEMA-001 NEFRLS System of Records only allowed two groups of individuals limited access. The groups were: (1) Registrants: displaced individuals registered in the system; and (2) searchers: individuals who are searching for family or household members who registered in the system. The DHS/FEMA-001 NEFRLS System of Records now allows FEMA NEFRLS Administrators to have limited access to records for the purpose of sharing registrants' information with LEOs pursuant to an official missing persons report. This increases the likelihood of reunifying family and friends displaced by a Presidential-declared emergency or disaster.