accommodated during the scheduled open public hearing session, ONC will take written comments after the meeting until close of business.

Persons attending ONC’s advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

ONC welcomes the attendance of the public at its advisory committee meetings. Seating is limited at the location, and ONC will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Judy Sparrow at least seven (7) days in advance of the meeting.

ONC is committed to the orderly conduct of its advisory committee meetings. Please visit our Web site at http://healthit.hhs.gov for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (Pub. L. 92–463, 5 U.S.C., App. 2).

Dated: July 28, 2009.

Judith Sparrow,
Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.

[FR Doc. E9–18374 Filed 7–30–09; 8:45 am]
BILLING CODE 4150–45–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the National Biodefense Science Board

AGENCY: Department of Health and Human Services, Office of the Secretary.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services is hereby giving notice that the National Biodefense Science Board (NBSB) will be holding a public meeting. The meeting is open to the public.

DATES: The NBSB will hold a public meeting on September 25, 2009 from 8 a.m. to 5 p.m. EDT. The agenda is subject to change as priorities dictate.

ADDITIONAL INFORMATION:

Availability of Materials: The meeting agenda, and other materials will be posted on the NBSB Web site at http://www.hhs.gov/aspr/omsph/nbsb/index.html prior to the meeting.

Procedures for Providing Public Input: Any member of the public providing oral comments at the meeting must sign-in at the registration desk and provide his/her name, address, and affiliation. All written comments must be received prior to September 17, 2009, and should be sent by e-mail to NBSB@hhs.gov with “NBSB Public Comment” as the subject line, or mailed to Leigh Sawyer, 330 C Street, SW., Switzer Building Room 5127, Washington, DC 20201. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person.

Dated: July 24, 2009.

Nicole Lurie,
Assistant Secretary for Preparedness and Response, Rear Admiral, U.S. Public Health Service.

[FR Doc. E9–18374 Filed 7–30–09; 8:45 am]
BILLING CODE 4150–37–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Biodefense Science Board: Notification of a Public Teleconference

AGENCY: Department of Health and Human Services, Office of the Secretary.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Biodefense Science Board (NBSB) will hold three teleconference meetings. The meetings are open to the public. Pre-registration is NOT required, however, individuals who wish to participate in the public comment session should e-mail NBSB@HHS.GOV to RSVP.

DATES: The meetings will be held on August 14, 2009, from 12 p.m. to 2 p.m. EDT; October 14, 2009, 12 p.m. to 2 p.m. EDT; and on November 13, 2009, 12 p.m. to 2 p.m. EST.

ADDITIONAL INFORMATION:

Availability of Materials: The meetings will occur by teleconference. To attend, please call 1–866–395–4129, pass-code “ASPR.” Please call 15 minutes prior to the beginning of the conference call to facilitate attendance.

FOR FURTHER INFORMATION CONTACT: Ms. Erin Fults, National Biodefense Science Board, Department of Health and Human Services, Room 5128, Switzer Building, 330 C St., SW., Washington, DC 20201. Phone: 202–260–1201; E-mail: NBSB@HHS.GOV

SUPPLEMENTARY INFORMATION: Pursuant to section 319M of the Public Health Service Act (42 U.S.C. 247d–7) and section 222 of the Public Health Service Act (42 U.S.C. 217a), the Department of Health and Human Services established the National Biodefense Science Board. The Board shall provide expert advice and guidance to the Secretary on scientific, technical, and other matters of special interest to the Department of Health and Human Services regarding current and future chemical, biological, nuclear, and radiological agents, whether naturally occurring, accidental, or deliberate. The Board may also provide advice and guidance to the Secretary on other matters related to public health emergency preparedness and response.

Background: The tentative agenda includes updates from the chairs of the: Pandemic Influenza Working Group, MCM Markets and Sustainability Working Group, Disaster Medicine Working Group, Personal Preparedness Working Group, and the Disaster Mental Health Subcommittee. Additional topics surrounding the current H1N1 influenza outbreak will be considered during the public meeting. This agenda is subject to change as priorities dictate.

Availability of Materials: The meeting agenda, and other materials will be posted on the NBSB Web site at http://www.hhs.gov/aspr/omsph/nbsb/index.html prior to the meeting.

Procedures for Providing Public Input: Any member of the public providing oral comments at the meeting must sign-in at the registration desk and provide his/her name, address, and affiliation. All written comments must be received prior to September 17, 2009, and should be sent by e-mail to NBSB@hhs.gov with “NBSB Public Comment” as the subject line, or mailed to Leigh Sawyer, 330 C Street, SW., Switzer Building Room 5127, Washington, DC 20201. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person. department of health and human services
of the public the opportunity to provide comments to the Board. Public participation and ability to comment will be limited to time and space available. Public comment will be limited to no more than 3 minutes per speaker. To be placed on the public participant list, you should notify the operator when you enter the call-in number.

Any members of the public who wish to have printed material distributed to the NBSB should submit materials via email at NBSB@HHS.GOV, with “NBSB Public Comment” as the subject line, prior to the close of business one week before each meeting (conference call). A draft agenda and any additional materials/agendas will be posted on the NBSB Web site (HTTP://WWW.HHS.GOV/ASPR/OMSPH/NBSB/) prior to the meeting.

Dated: July 24, 2009.
Nicole Lurie,
Assistant Secretary for Preparedness and Response, Rear Admiral, U.S. Public Health Service.

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: Drug and Alcohol Services Information System (DASIS)—(OMB No. 0930–0106)—Revision

The DASIS consists of three related data systems: the Inventory of Substance Abuse Treatment Services (I–SATS); the National Survey of Substance Abuse Treatment Services (N–SSATS), and the Treatment Episode Data Set (TEDS). The I–SATS includes all substance abuse treatment facilities known to SAMHSA. The N–SSATS is an annual survey of all substance abuse treatment facilities listed in the I–SATS. The TEDS is a compilation of client-level admission data and discharge data submitted by States on clients treated in facilities that receive State funds. Together, the three DASIS components provide information on the location, scope and characteristics of all known drug and alcohol treatment facilities in the United States, the number of persons in treatment, and the characteristics of clients receiving services at publicly funded facilities. This information is needed to assess the nature and extent of these resources, to identify gaps in services, to provide a database for treatment referrals, and to assess demographic and substance-related trends in treatment. In addition, several National Outcome Measures (NOMS) data elements are collected in TEDS to assess the performance of the Substance Abuse Prevention and Treatment (SAPT) Block Grant.

The request for OMB approval will include a request to conduct the 2010 through 2012 N–SSATS and Mini-N–SSATS. The Mini-N–SSATS is a procedure for collecting services data from newly identified facilities between main cycles of the survey and will be used to improve the listing of treatment facilities in the on-line treatment facility locator. The N–SSATS questionnaire is expected to remain unchanged except for minor modifications to wording. If there is a need for substantial revision to the N–SSATS questionnaire during the period of this clearance, a supplemental request for clearance will be submitted.

The OMB request will also include the collection of TEDS data, including the addition of two new NOMS data elements to the TEDS client-level record. To the extent that states already collect the elements from their treatment providers, the following elements will be included in the TEDS data collection: Frequency of attendance at self-help programs in past 30 days at admission; and frequency of attendance at self-help programs in past 30 days at discharge. No significant changes are expected in the other DASIS activities.

Estimated annual burden for the DASIS activities is shown below:

<table>
<thead>
<tr>
<th>Type of respondent and activity</th>
<th>Number of respondents</th>
<th>Responses per respondent</th>
<th>Hours per response</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>States:</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>TEDS Admission Data</td>
<td>52</td>
<td>4</td>
<td>6.25</td>
<td>1,300</td>
</tr>
<tr>
<td>TEDS Discharge Data</td>
<td>52</td>
<td>4</td>
<td>8.25</td>
<td>1,716</td>
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<tr>
<td>TEDS Discharge Crosswalks</td>
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<td>1</td>
<td>10</td>
<td>50</td>
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<tr>
<td>I–SATS Update</td>
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<td>70</td>
<td>.08</td>
<td>314</td>
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<tr>
<td>State Subtotal</td>
<td></td>
<td></td>
<td></td>
<td>3,380</td>
</tr>
<tr>
<td>Facilities:</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I–SATS Update</td>
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<td>1</td>
<td>.08</td>
<td>16</td>
</tr>
<tr>
<td>N–SSATS questionnaire</td>
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<tr>
<td>Augmentation screener</td>
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<td>80</td>
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<tr>
<td>Mini N–SSATS</td>
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<td>.42</td>
<td>840</td>
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<td>Facility Subtotal</td>
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<td>Total</td>
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<td></td>
<td>15,706</td>
</tr>
</tbody>
</table>

1 States forward to SAMHSA information on newly licensed/approved facilities and on changes in facility name, address, status, etc. This is submitted electronically by nearly all States.

2 Facilities forward to SAMHSA information on new facilities and on changes to existing facilities. This is submitted by e-mail by nearly all facilities.