

stakeholders, such as district attorney offices, judges and service providers. An outcomes evaluation will examine the effect of the intensive case management model on the eligibility to have records sealed, social, psychological and health status, HIV risk behavior, and the actual proportion of subjects who have their records sealed.

The experimental study in Cuyahoga County consists of two groups of randomly assigned subjects. An *intent-to-treat group* is scheduled to receive intensive case management consisting of an intensive TASC case management model during the one-year period of supervision followed by an additional three years of less intensive case management services. A *control group* will receive treatment as usual, consisting of the TASC case management model now in place. In Clermont County there will be only an

experimental group. The evaluation procedures in both locations will consist of a baseline interview and follow-up interviews over a 4-year period that tracks outcomes to the point at which subjects are eligible for sealing of records. Follow-up interviews and file studies will test for a wide array of possible effects, including recidivism, employment, education, drug use, family relationships, support of children, mental and physical health, HIV/AIDS risk factors, assumption of personal responsibility and life adjustment factors.

The evaluation will involve 900 projected participants over a five-year period. Evaluation interviews will take place at baseline, 6 months, 12 months, and 42-months. Each interview will last 1½ to 2 hours depending of the memory and speed of the respondents. The interview goal is a minimum 80%

completion rate. Interview data will be supplemented by a file study of arrest records and the number of criminal records expunged. Additionally, two focus groups of clients in the intent to treat group will be conducted in each county at 3, 6, 12, 18, 24, and 30 months to provide feedback on client perceptions of the case management programs. One group at each site will consist of clients in compliance with the program and one group will consist of clients not in compliance. Groups will consist of 8 to 10 participants chosen at random from the compliant and noncompliant clients. Additional file study data will be gathered on the number of case management sessions and the number and frequency of other interventions in the intent-to-treat and control groups.

Data collection	Number of respondents	Responses/ respondent	Hours per response	Total hr. burden
Baseline Interview	900	1	1.33	1,197
Follow-up Battery: 6-, 12-, & 42-month	900	3	1.50	4,050
Client Focus Groups: 3-, 6-,12-,18-, 24-months (Cuyahoga) ..	50	1	1.50	75
Client Focus Groups: 3-, 6-, 9-, 12-, 18-, 24-, 36-& 42-months (Clermont)	80	1	1.50	120
File Data Collection (Staff Time) MCSIS, Ohio DRC, TASC ..	3	7	2.00	42
Multimodality Quality Assurance (MQA)—(Treatment Program Staff)	84	1	.75	63
Stakeholders: Attitudes Towards Sealing Records	12	3	.167	6
Stakeholder Focus Groups: 6-,12-, 24-months	36	1	1.50	54
Key Officials Attitudinal Survey	12	3	.167	6
Total Burden	1,047			5,613
5-Year Annual Average	1,047			1,123

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Allison Herron Eydt, 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: 202-395-6974.

Dated: June 24, 2003.

Anna Marsh,

Acting Executive Officer, Substance Abuse and Mental Health Services Administration.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Fiscal Year (FY) 2003 Funding Opportunity

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice of funding availability for SAMHSA Cooperative Agreements to Expand the National Child Traumatic Stress Initiative Intervention Development and Evaluation Centers.

SUMMARY: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) announces the availability of FY 2003 funds for the cooperative agreement described below. A synopsis of this funding opportunity, as well as many other Federal Government funding opportunities, is also available at the Internet site: www.fedgrants.gov.

This notice is not a complete description of the cooperative agreement; potential applicants must obtain a copy of the Request for Applications (RFA), including Part I, Cooperative Agreements to Expand the National Child Traumatic Stress Initiative Intervention Development and Evaluation Centers, Part II, General Policies and Procedures Applicable to all SAMHSA applications for Discretionary Grants and Cooperative Agreements, and the PHS 5161-1 (Rev. 7/00) application form before preparing and submitting an application.

Funding Opportunity Title: Cooperative Agreements to Expand the National Child Traumatic Stress Initiative—Short Title: Child Traumatic Stress Initiative Intervention Development and Evaluation Centers.

Funding Opportunity Number: SM 03-011.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.243.

Authority: Section 582 of the Public Health Service Act, as amended and subject to the availability of funds.

Funding Opportunity Description: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) is accepting applications for fiscal year 2003 cooperative agreements to expand the National Child Traumatic Stress Initiative (NCTSI) Intervention Development and Evaluation Centers. Funds are available under Section 582 to local mental health providers for the purpose of developing knowledge of best practices and providing mental health services to children and youth suffering from post-traumatic stress as a result of having experienced or witnessed a traumatic event.

The purpose of the NCTSI is to improve treatment and services for all children and adolescents in the United States who have experienced traumatic events or witnessed such events. A network of centers, the NCTSN, has been established to promote the development and use of effective treatment and services, to develop resources on trauma for professionals, consumers, and the public, and to develop trauma-focused public education and professional training and other field development activities.

This announcement solicits for three specific types of child and adolescent traumatic stress Intervention Development and Evaluation (IDE) Centers that will facilitate the NCTSI achievement of its overall goals of improving access to and quality of services for child and adolescent traumatic stress: Rural/Tribal/Frontier Intervention Development and Evaluation Center; Service Systems Models Intervention Development and Evaluation Center; and Traumatic Stress and Substance Abuse Intervention Development and Evaluation Center.

Eligible Applicants: The following domestic public and private non-profit entities are eligible to apply. Community-based and faith-based organizations, out-patient clinics, public or private universities, psychiatric or general hospitals, units of State or local governments, Indian tribes and tribal organizations, partnerships of multiple clinical centers, programs and/or community service providers applying as a single center (in which case one of the participating organizations must be designated as the applicant organization).

Applicant organizations may apply for the Intervention Development and Evaluation Centers (this announcement) and/or the Community Treatment and Services Centers (RFA SM-03-012). A separate, complete application is required for each category. An

organization that is selected for funding in both programs will receive funding only for its proposed Intervention Development and Evaluation Center.

Organizations that are currently grantees of the NCTSI are not eligible to apply as the applicant organization under this announcement.

Applicant organizations must apply for one of the specific IDE centers—Rural/Tribal/Frontier; Service Systems Models; or Traumatic Stress and Substance Abuse—and address the requirements for that specific center in the application. Applicant organizations may submit separate applications for more than one of the specific IDE centers.

Due Date for Applications: August 7, 2003.

Estimated Funding Available/Number of Awards: It is expected that approximately \$1.8 million will be available to fund three new centers in the Intervention Development and Evaluation Program of the National Child Traumatic Stress Network (NCTSN). Annual awards may be up to \$600,000 in total costs (direct and indirect) for each year for up to 4 years. Actual funding levels will depend on the availability of funds. Second, third, and fourth project year funding may be supplemented by SAMHSA for activities that fall within the scope and intent of this RFA. Applications with proposed budgets that exceed \$600,000 will be returned without review.

Is Cost Sharing Required: No.

Period of Support: Applicants must request support for four years and provide a separate budget for each year. While SAMHSA's intent for this program is to fund the full four year period requested, continued funding is contingent on the availability of funds.

How to Get Full Announcement and Application Materials: Complete application kits may be obtained by calling: the SAMHSA Mental Health Information Center at (800) 789-2647, Monday through Friday, 8:30 a.m. to 5 p.m., EDT; TDD: (301) 443-9006; Fax: (301) 984-8796; P.O. Box 42490, Washington, DC 20015. The PHS 5161-1 application form and the full text of the funding announcement are also available electronically via SAMHSA's World Wide Web Home Page: <http://www.samhsa.gov> (Click on 'Grant Opportunities').

When requesting an application kit, the applicant must specify the funding opportunity title and number for which detailed information is desired. All information necessary to apply, including where to submit applications and application deadline instructions, are included in the application kit.

Contact for Additional Information: Malcolm Gordon, Ph.D., Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Division of Prevention, Traumatic Stress, and Special Programs, 5600 Fishers Lane, Room 17C-17, Rockville, MD 20857, (301) 443-2957, E-mail: mgordon@samhsa.gov.

Dated: June 25, 2003.

Anna Marsh,

Acting Executive Officer, Substance Abuse and Mental Health Services Administration.

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DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4820-N-30]

Notice of Proposed Information Collection: Comment Request; Reporting Requirements Associated with 24 CFR 203.508b and 24 CFR 235.1001—Providing Information

AGENCY: Office of the Assistant Secretary for Housing-Federal Housing Commissioner, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: *Comments Due Date:* September 2, 2003.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Wayne Eddins, Reports Management Officer, Department of Housing and Urban Development, 451 7th Street, SW., L'Enfant Plaza Building, Room 8003, Washington, DC 20410 or Wayne_Eddins@hud.gov.

FOR FURTHER INFORMATION CONTACT: Joseph McCloskey, Director, Office of Single Family Asset Management, Department of Housing and Urban Development, 451 7th Street SW., Washington, DC 20410, telephone (202) 708-1672 (this is not a toll free number) for copies of the proposed forms and other available information.

SUPPLEMENTARY INFORMATION: The Department is submitting the proposed information collection to OMB for review, as required by the Paperwork