Biophysics Research; 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.862, Genetics and Developmental Biology Research; 93.88, Minority Access to Research Careers; 93.96, Special Minority Initiatives; 93.859, Biomedical Research and Research Training, National Institutes of Health, HHS)

Dated: November 17, 2016.

#### Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2016–28149 Filed 11–22–16; 8:45 am] **BILLING CODE 4140–01–P** 

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

# Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Member Conflict: AIDS and Related Research.

Date: December 5–6, 2016.

Time: 10:00 a.m. to 3:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Virtual Meeting).

Contact Person: Kenneth A Roebuck, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5106, MSC 7852, Bethesda, MD 20892, (301) 435— 1166, roebuckk@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Social Sciences and Population Studies: Special Topics.

Date: December 8, 2016.

Time: 11:00 a.m. to 1:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call). Contact Person: Kate Fothergill, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3142, Bethesda, MD 20892, 301–435–2309, fothergillke@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Member Conflict: AIDS and AIDS Related Research.

Date: December 9, 2016.

Time: 12:00 p.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Jose H Guerrier, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5218, MSC 7852, Bethesda, MD 20892, 301–435– 1137, guerriej@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS).

Dated: November 17, 2016.

### Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2016–28143 Filed 11–22–16; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# National Cancer Institute; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the National Cancer Institute Special Emphasis Panel, November 18, 2016, 03:00 p.m. to November 18, 2016, 05:00 p.m., National Cancer Institute Shady Grove, 9609 Medical Center Drive, 3W030, Rockville, MD 20850 which was published in the **Federal Register** on October 17, 2016, 81 FR 71516.

The meeting notice is amended to change the date and time from November 18, 2016, 3:00 p.m.–5:00 p.m. to December 15, 2016, 12:30 p.m.–2:30 p.m. The meeting is closed to the public.

Dated: November 17, 2016.

#### Melanie I. Pantoia.

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2016–28144 Filed 11–22–16; 8:45 am] BILLING CODE 4140–01–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **Substance Abuse and Mental Health Services Administration**

### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the 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.

### Proposed Project: Evaluation of the Cooperative Agreements to Benefit Homeless Individuals (CABHI) Program (OMB No. 0930–0339)—REVISION

SAMHSA is conducting a cross-site evaluation of the FY2016 cohort of the CABHI grant program. The CABHI Evaluation builds on a previous evaluation of SAMHSA's 2009–2012 homeless services grant programs (i.e., Grants for the Benefit of Homeless Individuals, Services in Supportive Housing, and CABHI), under which the approved data collection tools were developed and implemented. SAMHSA is requesting approval from OMB to revise the burden inventory, which has been calculated based on the number of FY2016 CABHI grantees, and to modify

the data collection mode of a project director interview.

In 2016, SAMHSA awarded 30 CABHI grants across three levels: States (up to \$1.5 million per year), Local Governments (up to \$800,000 per year), and Communities (up to \$400,000 per year). The grantees are united by the goal of enhancing and expanding infrastructure and capacity for mental health and substance abuse treatment and related support services for individuals experiencing chronic homelessness or veterans, families, or youth experiencing homelessness as a result of these conditions. This is accomplished through the provision of permanent supportive housing, behavioral health treatment, and recovery support services, and enrollment in health insurance, Medicaid, or other mainstream benefit programs.

The primary task of the CABHI evaluation is to conduct a comprehensive process and outcome evaluation, addressing questions related to the implementation of the CABHI grant projects and the extent to which they were able to meet the program's goals. Process evaluation primarily represents what is done to and for the client (e.g., services provided); this aspect of the evaluation will also include a focus on structure, or the resources available in the service delivery system, which represent the capacity to deliver quality care, but not the care itself. The outcome evaluation will focus on outputs, which are the most immediate or proximal results of project activities (e.g., changes in partner collaboration, the number of clients enrolled in mainstream benefits), and client outcomes, particularly those related to behavioral health and homelessness and housing instability. The data collection tools included in this request collect a wide range of quantitative and qualitative data on characteristics of the grantee organization and its partnerships; the system within which the project is embedded; relationships with stakeholders; characteristics of the target population; services received, including implementation of EBPs; staffing patterns; costs of services; barriers and facilitators of project implementation; and project sustainability efforts. Data collection efforts that will support the evaluation are described below.

The Project Director (PD) Phone Interview/Web Survey is designed to systematically collect key grant project characteristics which will directly inform the process evaluation

component and will also provide essential data by documenting the partnerships and services each grantee includes in their project. The interview includes two components, a semistructured telephone interview and a Web survey, which represents a change from the original approval. The interview was developed to be conducted as a telephone interview; however, some sections are better suited for self-administration through a Webbased survey (e.g., reporting which services the project is providing to clients) and the instrument has been modified accordingly. The PD Phone Interview/Web Survey is composed of the following sections: Grantee Agency and Project Characteristics, Target Population, Stakeholders/Partners, Services, Evidence-Based Practices (EBPs), Housing, Project Organization and Implementation, Sustainability, Local Evaluation, Technical Assistance. and Lessons Learned. A total of 39 respondents are expected to complete the PD Phone Interview/Web Survey; this includes one respondent from all of the CABHI grantees (n=30) and the State sub-recipients (n=9). This data collection will occur one time during Year 1 and one time during Year 3 of the evaluation.

Site Visits will consist of in-person, semi-structured discussions with grant project directors, State sub-recipient coordinators, project evaluators, financial staff, behavioral health treatment staff, case managers, housing providers, other support services staff, primary partner staff and other key stakeholders, and project client participants. The purpose of the Site Visits is to collect detailed qualitative information and economic data on project activities conducted by the grantees and their partners, which will directly inform the process evaluation. The qualitative data will also provide essential information for the outcome evaluation component by documenting the interventions provided to clients and the implementation, barriers, facilitators, challenges and successes for each grant project visited. Each CABHI grant project (n=30) will be visited once during Year 2 and once during Year 3 of the evaluation. No changes have been made to the Site Visit instruments.

The EBP Self-Assessment is a Webbased survey designed to collect information on the services implemented in CABHI grant projects that have a demonstrable evidence base, providing a description of the EBP interventions received by project clients. The EBP Self-Assessment tool is

divided into two parts. Part 1 collects information on general implementation of the projects' primary EBPs (i.e., those received by the most project clients). Thirty-six respondents (9 State subrecipients, 12 Local Governments, and 15 Communities) are expected to complete Part 1 of the EBP Self-Assessment, which may be completed up to 3 times based on the number of primary EBPs being implemented by the project. Part 2 collects detailed implementation data on a selected group of EBPs (i.e., Assertive Community Treatment, Integrated Dual Disorders Treatment, Illness Management and Recovery, Supported Employment, Critical Time Intervention, and Supplemental Security Income [SSI]/Social Security Disability Insurance [SSDI] Outreach, Access, and Recovery) and will be administered only to projects using the selected EBPs and only for the EBPs they are implementing. Thirty-six respondents (9 State sub-recipients, 12 Local Governments, and 15 Communities) are expected to complete Part 2 of the EBP Self-Assessment, which may be completed up to 3 times based on the number of Part 2 EBPs being implemented by the project. Respondents for both Part 1 and 2 may include grant project directors, State sub-recipient coordinators, or other staff knowledgeable about the project's EBPs. The EBP Self-Assessment will be administered in Year 2 of the evaluation. No changes have been made to the EBP Self-Assessment instrument.

The Permanent Supportive Housing (PSH) Self-Assessment is a Web-based survey completed by the CABHI grant projects to understand the extent to which they are implementing key dimensions of PSH and capture the variability of the PSH model among the projects. Information is collected on the following dimensions: Choice of housing, separation of housing and services; decent, safe, and affordable housing; housing integration; tenancy rights; access to housing; flexible, voluntary services; service philosophy; and team-based behavioral health. Thirty-six respondents (9 State subrecipients, 12 Local Governments, and 15 Communities) are expected to complete the PSH Self-Assessment one time, and may include grant project directors, State sub-recipient coordinators, or other staff knowledgeable about the project's PSH model. The PSH Self-Assessment will be administered in Year 2 of the evaluation. No changes have been made to the PSH Self-Assessment instrument.

ANNUALIZED	RURDEN	HOURS
ANNUALIZED	BURDEN	

Instrument/activity	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours
PD Phone Interview/Web Survey	39	1	39	2.1	82
Opening Session/Project Director Interview Case Manager, Treatment, Housing Staff/Provider	<sup>a</sup> 300	1	300	2.5	750
Interview	<sup>b</sup> 540	1	540	2	1,080
Stakeholder Interview	°270	1	270	1.5	405
Evaluator Interview	<sup>d</sup> 60	1	60	1	60
Client Focus Group	e 450	1	450	1.5	675
Cost Interview	<sup>f</sup> 60	1	60	2	120
Evidence-Based Practice Self-Assessment Part 1	36	3	108	0.58	63
Evidence-Based Practice Self-Assessment Part 2	36	3	108	0.25	27
Permanent Supportive Housing Self-Assessment	36	1	36	0.67	24
Total	<sup>9</sup> 1,650		1,971		3,286

- a 10 respondents × 30 site visits = 300 respondents.
- b 18 respondents × 30 site visits = 540 respondents.
- c9 respondents × 30 site visits = 270 respondents.
- d2 respondents × 30 site visits = 60 respondents.
- e 15 respondents × 30 site visits = 450 respondents.

  f2 respondents × 30 site visits = 60 respondents.
- <sup>9</sup> This is an unduplicated count of total respondents.

Send comments to Summer King, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57-B, Rockville, MD 20857 OR email a copy to summer.king@samhsa.hhs.gov. Written comments should be received by January 23, 2017.

#### Summer King,

Statistician.

[FR Doc. 2016-28211 Filed 11-22-16; 8:45 am]

BILLING CODE 4162-20-P

### DEPARTMENT OF HOMELAND **SECURITY**

### **Federal Emergency Management** Agency

[Docket ID: FEMA-2016-0006; OMB No. 1660-0006]

**Agency Information Collection Activities: Submission for OMB** Review; Comment Request; National Flood Insurance Program Policy Forms

**AGENCY:** Federal Emergency Management Agency, DHS.

**ACTION:** Notice.

**SUMMARY:** The Federal Emergency Management Agency (FEMA) will submit the information collection abstracted below to the Office of Management and Budget for review and clearance in accordance with the requirements of the Paperwork Reduction Act of 1995. The submission will describe the nature of the information collection, the categories of respondents, the estimated burden (i.e., the time, effort and resources used by

respondents to respond) and cost, and the actual data collection instruments FEMA will use.

**DATES:** Comments must be submitted on or before December 23, 2016.

**ADDRESSES:** Submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to the Desk Officer for the Department of Homeland Security, Federal Emergency Management Agency, and sent via electronic mail to oira.submission@ omb.eop.gov.

### FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the information collection should be made to Director, Records Management Division, 500 C Street SW., Washington, DC 20472-3100, or email address FEMA-Information-Collections-Management@fema.dhs.gov.

SUPPLEMENTARY INFORMATION: This proposed information collection previously published in the Federal Register on March 27, 2016 at 81 FR 14459 with a 60 day public comment period. No comments were received. The purpose of this notice is to notify the public that FEMA will submit the information collection abstracted below to the Office of Management and Budget for review and clearance.

### **Collection of Information**

Title: National Flood Insurance Program Policy Forms.

 $ar{\textit{Type}}$  of Information Collection: Revision of a currently approved information collection.

OMB Number: 1660-0006.

Form Titles and Numbers: FEMA Form 086-0-1, Flood Insurance Application; FEMA From 086-0-2, Flood Insurance Cancellation/ Nullification Request Form; FEMA Form 086-0-3, Flood Insurance General Change Endorsement; FEMA Form 086-0-4, V-Zone Risk Factor Rating Form and Instructions; FEMA Form 086-0-5, Flood Insurance Preferred Risk Policy and Newly Mapped Application.

Abstract: In order to provide for the availability of policies for flood insurance, policies are marketed through the facilities of licensed insurance agents or brokers in the various States. Applications from agents or brokers are forwarded to a servicing company designated as fiscal agent by the Federal Insurance Administration. Upon receipt and examination of the application and required premium, the servicing company issues the appropriate Federal flood insurance policy.

Affected Public: Individuals or households: State, local or Tribal Government; Business or other for profit; Not-for-profit institutions; and

Estimated Number of Respondents:

Estimated Total Annual Burden Hours: 91,016 hours.

Estimated Cost: The cost to respondents is \$6,500 for engineer or architect services.