

II. References

The following reference has been placed on public display in the Division of Dockets Management (see **ADDRESSES**), and may be seen between 9 a.m. and 4 p.m., Monday through Friday.

1. Payne, B.K., C.M. Cheng, O. Govorun, et al., "An Inkblot for Attitudes: Affect Misattribution as Implicit Measurement," *Journal of Personality and Social Psychology*, vol. 89 (3), pp. 277–293, 2005.

Dated: August 16, 2007.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. E7–16603 Filed 8–21–07; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Deafness and Other Communication Disorders; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), 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: National Institute on Deafness and Other Communication Disorders Special Emphasis Panel, T35 Short Term Institutionals Research Training.

Date: September 20, 2007.

Time: 11 a.m. to 12 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6120 Executive Blvd., Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Stanley C. Oaks, PhD, Scientific Review Administrator, Division of Extramural Activities, NIDCD, NIH, Executive Plaza South, Room 400C, 6120 Executive Blvd—MSC 7180, Bethesda, MD 20892–7180, 301–496–8683, so14s@nih.gov.

Name of Committee: National Institute on Deafness and Other Communication Disorders Special Emphasis Panel, Diseases of the Vestibular System.

Date: September 24, 2007.

Time: 11 a.m. to 2 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6120 Executive Blvd., Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Christine A. Livingston, PhD, Scientific Review Administrator, Division of Extramural Activities, National Institutes of Health/NIDCD, 6120 Executive Blvd.—MSC 7180, Bethesda, MD 20892, (301) 496–8683, livingsc@mail.nih.gov. (Catalogue of Federal Domestic Assistance Program Nos. 93.173, Biological Research Related to Deafness and Communicative Disorders, National Institutes of Health, HHS)

Dated: August 14, 2007.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 07–4101 Filed 8–21–07; 8:45 am]

BILLING CODE 4140–01–M

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: Independent Evaluation of the Community Mental Health Services Block Grant Program—NEW

The Substance Abuse and Mental Health Services Administration (SAMHSA), the Center for Mental Health Services (CMHS) administers the Community Mental Health Services Block Grant (CMHS BG). The Community Mental Health Services Block Grant was funded by Congress to develop community-based systems of care for adults with serious mental illness (SMI) and children with severe emotional disorders (SED), and has been the largest Federal program dedicated to improving community mental health services. States have latitude in determining how to spend their funds to support services for adults with SMI and children with SED. The only requirements outlined in the authorizing legislation for State receipt of CMHS BG funds are provisions to increase children's services, create a State mental health planning council, and to develop a State mental health plan to be submitted to the Secretary of Health and Human Services (HHS). The

State mental health planning council is to comprise various State constituents including providers, administrators, and mental health services consumers. Each State plan must:

- Provide for the establishment and implementation of an organized community-based system of care for individuals with mental illness.
- Estimate the incidence and prevalence of adults with SMI and children with SED within the State.
- Provide for a system of integrated services appropriate for the multiple needs of children.
- Provide for outreach to and services for rural and homeless populations.
- Describe the financial and other resources necessary to implement the plan and describe how the CMHS BG funds are to be spent.

In addition, Congress included a maintenance-of-effort (MOE) requirement that a State's expenditures for community mental health services be no less than the average spent in the two preceding fiscal years.

The CMHS BG received an adequate rating on the OMB PART in 2003. Clearly in the follow up period to that assessment, one of the critical areas that must be addressed is the expectation that an independent and objective evaluation of the program is to be carried out initially and at regular intervals. In addition, the program evaluation has been designed to be of high quality, sufficient scope and unbiased (with appropriate documentation for each of these elements). In fact it is in addressing an evaluation of the program that critical elements of accountability and program performance are also identified and initially assessed. The rigor of the evaluation is seen in how it addresses the effectiveness of the program's impact with regard to its mission and long term goals. By legislative design the CMHS BG Program has previously focused on legislative compliance. Now it addresses the impact of the program nationally, over time, with a view to coming to terms with identified program deficiencies and the corresponding impact of proposed changes.

In this evaluation, a multi-method evaluation approach is being used to examine Federal and State performance with regard to the CMHS BG and its identified goals. This approach emphasizes a qualitative and quantitative examination of both the CMHS BG *process* (e.g., activities and outputs in the logic model) and system-level *outcomes* whereby Federal and State stakeholder perspectives on the CMHS BG, as captured through semi-structured interviews and surveys, are