Development Award for Clinicians, Scientist Development Awards, and Research Scientist Awards; 93.278, Drug Abuse National Research Service Awards for Research Training; 93.279, Drug Abuse Research Programs, National Institutes of Health, HHS)

Dated: January 24, 2000.

#### LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

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# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **Public Health Service**

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

### Extension of Public Comment Period on Draft National Institutes of Health Guidelines for Research Involving Human Pluripotent Stem Cells (December 1999)

The National Institutes of Health is extending the public comment period on the Draft National Institutes of Health Guidelines for Research Involving Human Pluripotent Stem Cells (December 1999) for three weeks. Written comments should be received by NIH on or before February 22, 2000. Comments should be addressed to: Stem Cell Guidelines, NIH Office of Science Policy, 1 Center Drive, Building 1, Room 218, Bethesda, MD 20892. Comments may also be sent by facsimile transmission to Stem Cell Guidelines at (301) 402-0280, or by e-mail to: stemcell@mail.nih.gov.

January 28, 2000.

#### Ruth Kirschstein,

 $Acting \, Director, \, NIH.$ 

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## 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 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 (301) 443–7978.

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: 2000 Survey of Mental Health Organizations, General Hospital Mental Health Services, and Managed Care Organizations (SMHO)

The survey, to be conducted by SAMHSA's Center for Mental Health Services (CMHS), will be conducted in two phases. Phase I will be a brief two-

three page inventory consisting of four forms: (1) A specialty mental health organization and general hospital with separate mental health services form; (2) A general hospital with integrated mental health services screener form; (3) A community residential organization screener form; and (4) A managed behavioral healthcare organization form. This short inventory will be sent to all known organizations to define the universe of valid mental health organizations to be sampled in Phase II. The inventory will collect basic information regarding the name and address of the organizations, their type and ownership, and the kinds of services provided.

Phase II will sample approximately 2,000 mental health organizations and utilize a more detailed survey instrument. Although the Sample Survey form will be more comprehensive, it will be very similar to surveys and inventories fielded in 1998, 1994, 1992 and earlier. The organizational data to be collected by the Sample Survey form include university affiliation, client/patient census by basic demographics, revenues, expenditures, and staffing.

The resulting database will be used to provide national estimates and will be the basis fo the National Directory of Mental Health Services. In addition, data derived from the survey will be published by CMHS in Data Highlights, in Mental Health, United States, and in professional journals such as Psychiatric Services and the American Journal of Psychiatry. Mental Health, United States is used by the general public, state governments, the U.S. Congress, university researchers, and other health care professionals.

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Questionnaire	Number of respondents	Responses/ respondent	Average hours/ response	Total burden
Phase I (Inventory)	12,634	1	0.25	3,158
Specialty Mental Health Organizations  General Hospitals with Separate Mental Health Services  General Hospitals with Integrated Mental Health Services  Community Residential Organizations  Managed Care Organizations	(4,126) (1,736) (3,617) (1,415) (1,740)	(1) (1) (1) (1) (1)	(0.25) (0.25) (0.25) (0.25) (0.25)	(1,031) (434) (904) (354) (435)
Phase II (Sample Survey)	2,000	1	3.00	6,000
Specialty Mental Health Organizations	(1,404) (596)	(1) (1)	(3.00) (3.00)	(4,212) (1,788)
Total	14,634			9,158