

Dated: July 13, 2021.

David W Freeman,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2021-15201 Filed 7-16-21; 8:45 am]

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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 (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) 276-0361.

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: Division of State Programs—Management Reporting Tool (DSP-MRT) (OMB No. 0930-0354)—Revision

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) aims to monitor several substance use prevention programs through the DSP-MRT, which reports data using the Strategic Prevention Framework (SPF). Programs monitored through the DSP-MRT include: SPF-Partnerships for Success (PFS), SPF-Prescription Drugs (Rx), Prescription Drug Overdose (PDO), and First Responder-Comprehensive Addiction and Recovery Act (FR-CARA). SAMHSA also proposed adding a new program: Sober Truth on Preventing Underage Drinking Act Grants (STOP Act). This request for data

collection includes a revision from a previously approved OMB instrument.

Monitoring data using the SPF model will allow SAMHSA's project officers to systematically collect data to monitor their grant program. In addition to assessing activities related to the SPF steps, the performance monitoring instruments covered in this statement collect data to assess the following grantee required specific performance measures:

- Number of training and technical assistance activities per funded community provided by the grantee to support communities
- Number of training and technical assistance activities (numbers served) provided by the grantee
- Number of subrecipient communities that improved on one or more targeted National Outcome Measures
- Number of grantees who integrate Prescription Drug Monitoring Program (PDMP) data into their program needs assessment
- Number of naloxone toolkits distributed

Changes to this package include the following:

- Inclusion of six performance targets
- Removal of outdated references
- Adjustments to the language in the Disparities Impact Section to refine response.

ANNUALIZED DATA COLLECTION BURDEN

Instrument	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours	Average hourly wage	Total respondent cost ^a
DSP-MRT	521	4	2,084	3	6,252	\$44.19	\$276,276
PFS Supplemental	253	1	253	1	253	44.19	11,180
PDO/FR CARA Supplemental	109	2	218	1	218	44.19	9,633
SPF Rx Supplemental	26	4	104	1	104	44.19	4,596
STOP Act Supplemental (new)	133	1	133	1	133	44.19	5,877
FY2021-FY2024 Total	521	6,960	307,562

Send comments to Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57A, Rockville, Maryland 20857, OR email a copy to carlos.graham@samhsa.hhs.gov. Written comments should be received by September 17, 2021.

Carlos Graham,

Social Science Analyst.

[FR Doc. 2021-15293 Filed 7-16-21; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

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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 the use of automated collection techniques or other forms of information technology.

Proposed Project: Survey of State Underage Drinking Prevention Policies, Programs, and Practices—(OMB No. 0930–0316)—Extension

The *Sober Truth on Preventing Underage Drinking Act* (the “STOP Act”) (Pub. L. 109–422, reauthorized in 2016 by Pub. L. 114–255) states that the “Secretary [of Health and Human Services] shall . . . annually issue a report on each state’s performance in enacting, enforcing, and creating laws, regulations, and programs to prevent or reduce underage drinking.” The Secretary has delegated responsibility for this report to SAMHSA. Therefore, SAMHSA has developed a *Survey of State Underage Drinking Prevention Policies, Programs, and Practices* (the “State Survey”) to provide input for the state-by-state report on prevention and enforcement activities related to the underage drinking component of the *Annual Report to Congress on the Prevention and Reduction of Underage Drinking* (“Report to Congress”).

The STOP Act also requires the Secretary to develop “a set of measures to be used in preparing the report on best practices” and to consider categories including but not limited to the following:

Category #1: Sixteen specific underage drinking laws/regulations enacted at the state level (e.g., laws prohibiting sales to minors; laws related to minors in possession of alcohol). Note that ten additional policies have been added to the *Report to Congress* pursuant to Congressional appropriations language or the Secretary’s authority granted by the STOP Act;

Category #2: Enforcement and educational programs to promote compliance with these laws/regulations;

Category #3: Programs targeted to youths, parents, and caregivers to deter underage drinking and the number of individuals served by these programs;

Category #4: The amount that each state invests, per youth capita, on the prevention of underage drinking broken into five categories: (a) Compliance check programs in retail outlets; (b) checkpoints and saturation patrols that include the goal of reducing and deterring underage drinking; (c) community-based, school-based, and higher-education-based programs to prevent underage drinking; (d) underage

drinking prevention programs that target youth within the juvenile justice and child welfare systems; and (e) any other state efforts or programs that target underage drinking.

Congress’ purpose in mandating the collection of data on state policies, programs, and practices through the *State Survey* is to provide policymakers and the public with otherwise unavailable but much needed information regarding state underage drinking prevention policies and programs. SAMHSA and other federal agencies that have underage drinking prevention as part of their mandate use the results of the *State Survey* to inform federal programmatic priorities, as do other stakeholders, including community organizations. The information gathered by the *State Survey* has established a resource for state agencies and the general public for assessing policies and programs in their own state and for becoming familiar with the policies, programs, practices, and funding priorities of other states.

Because of the broad scope of data required by the STOP Act, SAMHSA relies on existing data sources where possible to minimize the survey burden on the states. SAMHSA uses data on state underage drinking policies from the National Institute of Alcohol Abuse and Alcoholism’s Alcohol Policy Information System (APIS), an authoritative compendium of state alcohol-related laws. The APIS data is augmented by SAMHSA with original legal research on state laws and policies addressing underage drinking to include all of the STOP Act’s requested laws and regulations (Category #1 of the four categories included in the STOP Act, as described above, page 2).

The STOP Act mandates that the *State Survey* assess “best practices” and emphasize the importance of building collaborations with federally recognized tribal governments (“tribal governments”). It also emphasizes the importance at the federal level of promoting interagency collaboration and to that end establishes the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD). SAMHSA has determined that to fulfill the Congressional intent, it is critical that the *State Survey* gather information from the states regarding the best practices standards that they apply to their underage drinking programs, collaborations between states and tribal governments, and the development of state-level interagency collaborations similar to ICCPUD.

SAMHSA has determined that data on Categories #2, #3, and #4 mandated in the STOP Act (as listed on page 2)

(enforcement and educational programs; programs targeting youth, parents, and caregivers; and state expenditures) as well as states’ best practices standards, collaborations with tribal governments, use of social marketing or counter-advertising campaigns, and state-level interagency collaborations *are not available from secondary sources* and therefore must be collected from the states themselves. The *State Survey* is therefore necessary to fulfill the Congressional mandate found in the STOP Act. Furthermore, the uniform collection of these data from the states over the last ten years has created a valuable longitudinal dataset, and the *State Survey*’s renewal is vital to maintaining this resource.

The *State Survey* is a single document that is divided into four sections, as follows:

Section 1: Enforcement programs to promote compliance with underage drinking laws and regulations (as described in Category #2 above);

Section 2A: Programs and media campaigns targeted to youth, parents, and caregivers to deter underage drinking (as described in Category #3 above);

Sections 2B and 2C: State interagency collaboration to implement prevention programs and media campaigns, state best-practice standards, and collaborations with tribal governments (as described above);

Section 2D: The amount that each state invests on the prevention of underage drinking in the categories specified in the STOP Act (see description of Category #4 above) and descriptions of any dedicated fees, taxes, or fines used to raise these funds.

The number of questions in each section is as follows:

Section 1: 38 questions

Section 2A: 15 questions

Section 2B: 12 questions

Section 2C: 10 questions

Section 2D: 10 questions

Total: 85 questions

Note that the number of questions in Section 2A is an estimate. This section asks states to identify up to ten programs that are specific to underage drinking prevention. For each program identified, there are three follow-up questions. Based on the average number of programs per state reported in the *State Survey*’s ten-year history, it is anticipated that states will report an average of five programs for a total of 15 questions.

It is anticipated that most respondents will actually respond to only a subset of this total. The *State Survey* is designed with “skip logic,” which means that

many questions will only be directed to a subset of respondents who report the existence of particular programs or activities.

No changes in content are proposed for the current version of the *Survey*. Note that the title of the survey has been modified from “*Survey of State Underage Drinking Prevention Policies and Practices*” to “*Survey of State Underage Drinking Prevention Policies, Programs, and Practices*” to better reflect the subjects addressed by the *State Survey* questions.

To ensure that the *State Survey* obtains the necessary data while minimizing the burden on the states, SAMHSA has conducted a lengthy and comprehensive planning process. It

sought advice from key stakeholders (as mandated by the STOP Act) including hosting multiple stakeholders’ meetings, conducting two field tests with state officials likely to be responsible for completing the *State Survey*, and investigating and testing various *State Survey* formats, online delivery systems, and data collection methodologies.

Based on these investigations, SAMHSA collects the required data using an online survey data collection platform (SurveyMonkey). Links to the four sections of the survey are distributed to states via email. The *State Survey* is sent to each state governor’s office and the Office of the Mayor of the District of Columbia. Based on the experience from the last ten years of

administering the *State Survey*, it is anticipated that the state governors will designate staff from state agencies that have access to the requested data (typically state Alcohol Beverage Control [ABC] agencies and state Substance Abuse Program agencies). SAMHSA provides both telephone and electronic technical support to state agency staff and emphasizes that the states are expected to provide data from existing state databases and other data sources available to them. The burden estimate below takes into account these assumptions.

The estimated annual response burden to collect this information is as follows:

Instrument	Number of respondents	Responses/ respondent	Burden/ response (hrs)	Annual burden (hrs)
<i>State Survey</i>	51	1	17.7	902.7

Send comments to Carlos Graham, SAMHSA Reports Clearance Officer at carlos.graham@samhsa.hhs.gov. Written comments should be received by September 17, 2021.

Carlos Graham,

Social Science Analyst.

[FR Doc. 2021–15294 Filed 7–16–21; 8:45 am]

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DEPARTMENT OF HOMELAND SECURITY

[Docket No. CISA–2021–0011]

Notice of Cancellation of the President’s National Infrastructure Advisory Council Meeting

AGENCY: Cybersecurity and Infrastructure Security Agency (CISA), Department of Homeland Security (DHS).

ACTION: Notice of cancellation of a Federal Advisory Committee Act (FACA) meeting.

SUMMARY: CISA announces the cancellation of the public meeting of the President’s National Infrastructure Advisory Council (NIAC) scheduled for July 23, 2021.

DATES: This meeting was announced in the **Federal Register** on June 16, 2021 (86 FR 32053).

FOR FURTHER INFORMATION CONTACT: Rachel Liang, Rachel.Liang@cisa.dhs.gov; 202–936–8300.

SUPPLEMENTARY INFORMATION: CISA gives notice under the Federal Advisory Committee Act, 5 U.S.C. app. 2, that the

virtual meeting of the President’s National Infrastructure Advisory Council set to be held on July 23, 2021 has been cancelled.

Rachel Liang,

Designated Federal Officer, President’s National Infrastructure Advisory Council, Cybersecurity and Infrastructure Security Agency, Department of Homeland Security.

[FR Doc. 2021–15206 Filed 7–16–21; 8:45 am]

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INTER-AMERICAN FOUNDATION

60-Day Notice for Assessing Post-Disaster Needs Across IAF Grantees (PRA)

AGENCY: Inter-American Foundation.
ACTION: Notice.

SUMMARY: The Inter-American Foundation (IAF), as part of its continuing efforts to reduce paperwork and respondent burden, conducts a preclearance consultation program to provide the general public and federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995. This program helps ensure that requested data is provided in the desired format; reporting burden (time and financial resources) is minimized; collection instruments are clearly understood; and the impact of collection requirements on respondents is properly assessed.

DATES: Written comments must be submitted to the office listed in the

address section below within 60 days from the date of this publication in the **Federal Register**.

ADDRESSES: Send comments to Raquel Gomes, Inter-American Foundation, via email to rgomes@iaf.gov and Jenna Glickman, Inter-American Foundation, via email to jglickman@iaf.gov.

SUPPLEMENTARY INFORMATION: Natural disasters and shocks, such as hurricanes, earthquakes, and pandemics, tend to be especially harmful for low-income and marginalized populations. IAF grantees across Latin America and the Caribbean often serve as early responders in times of crises, helping their communities cope with the impacts of disasters and shocks. The IAF seeks to have the ability to survey grantees that may be impacted by disasters and shocks to quickly assess how the agency can better support them during such times.

The IAF is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and
- Can help the agency minimize the burden of the collection of information on those who are to