

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration for Children and Families**

[CFDA Number: 93.676]

Announcement of the Award of Nine Single-Source Program Expansion Supplement Grants Under the Unaccompanied Children's (UC) Program**AGENCY:** Office of Refugee Resettlement (ORR), Administration for Children and

Families (ACF), U.S. Department of Health and Human Services (HHS).

ACTION: Notice of Award of nine single-source program expansion supplement grants under the UC Program.**SUMMARY:** ACF, ORR announces the award of nine single-source program expansion supplement grants for a total of \$21,164,141 under the UC's Program.

| Organization | Location | Amount |
|--|-----------------------|-------------|
| BCFS Health and Human Services | San Antonio, TX | \$2,736,000 |
| Heartland Human Care Services, Inc. | Chicago, IL | 1,463,856 |
| Youth for Tomorrow | Bristow, VA | 2,184,311 |
| Children's Village | Dobbs Ferry, NY | 1,922,400 |
| International Educational Services | Brownsville, TX | 6,551,312 |
| Mercy First | Syosset, NY | 877,255 |
| Children's Home of Kingston | Kingston, NY | 464,743 |
| Cayuga Center | New York, NY | 3,553,107 |
| Leake and Watts Services | Yonkers, NY | 1,411,157 |

ORR has been identifying additional capacity to provide shelter for potential increases in apprehensions of UC at the U.S. Southern Border. Planning for increased shelter capacity is a prudent step to ensure that ORR is able to meet its responsibility, by law, to provide shelter for UC referred to its care by the Department of Homeland Security (DHS).

The expansion supplement grants will support the need to increase shelter capacity to accommodate the increasing numbers of UCs being referred by DHS. All nine grantees have the infrastructure, licensing, experience, and appropriate level of trained staff to meet the service requirements and the urgent need for expansion of services. The grantees provide residential services to UC in the care and custody of ORR, as well as services to include counseling, case management, and additional support services to the family or to the UC and their sponsor when a UC is released from ORR's care and custody.

DATES: Supplemental award funds will support activities from October 1, 2015, through September 30, 2016.

FOR FURTHER INFORMATION CONTACT:

Jalyn Sualog, Director, Division of Children's Services, Office of Refugee Resettlement, 330 C Street SW., Washington, DC 20201. Email: DCSProgram@acf.hhs.gov.

SUPPLEMENTARY INFORMATION: ORR is continuously monitoring its capacity to shelter the UC referred to HHS, as well as the information received from

interagency partners, to inform any future decisions or actions.

ORR has specific requirements for the provision of services. Award recipients must have the infrastructure, licensing, experience, and appropriate level of trained staff to meet those requirements. The expansion of the existing program and its services through this supplemental award is a key strategy for ORR to be prepared to meet its responsibility to provide shelter for UC referred to its care by DHS and so that the U.S. Border Patrol can continue its vital national security mission to prevent illegal migration, trafficking, and protect the borders of the United States.

Statutory Authority: This program is authorized by—

(A) Section 462 of the Homeland Security Act of 2002, which in March 2003, transferred responsibility for the care and custody of Unaccompanied Alien Children from the Commissioner of the former Immigration and Naturalization Service (INS) to the Director of ORR of HHS.

(B) The Flores Settlement Agreement, Case No. CV85-4544RJK (C.D. Cal. 1996), as well as the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (Pub. L. 110-457), which authorizes post release services under certain conditions to eligible children. All programs must comply with the Flores Settlement Agreement, Case No. CV85-4544-RJK (C.D.

Cal. 1996), pertinent regulations, and ORR policies and procedures.

Christopher Beach,

Office of Administration, Office of Financial Services, Division of Grants Policy.

[FR Doc. 2016-26673 Filed 11-3-16; 8:45 am]

BILLING CODE 4184-45-P**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Administration for Children and Families****Submission for OMB Review; Comment Request**

Title: Tribal Child Support Enforcement Direct Funding Request: 45 CFR 309-Plan.

OMB No.: 0970-0218.

Description: The final rule within 45 CFR part 309 contains a regulatory reporting requirement that in order to receive funding for a Tribal IV-D program a Tribe or Tribal organization must submit a plan describing how the Tribe or Tribal organization meets or plans to meet the objectives of section 455(f) of the Social Security Act, including establishing paternity, establishing, modifying, and enforcing support orders, and locating noncustodial parents. The plan is required for all Tribes requesting funding; however, once a Tribe has met the requirements to operate a comprehensive program, a new plan is not required annually unless a Tribe makes changes to its title IV-D program.

Tribes and Tribal organizations must respond if they wish to operate a fully funded program. This paperwork

collection activity is set to expire in December, 2016.

Respondents: Tribes and Tribal Organizations.

ANNUAL BURDEN ESTIMATES

| Instrument | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|---|-----------------------|------------------------------------|-----------------------------------|--------------------|
| 45 CFR 309 Amended Plan | 63 | 1 | 120 | 7,560 |
| 45 CFR 309 New Plan | 2 | 1 | 480 | 960 |
| Total | | | 600 | 8,520 |
| Estimated Total Annual Burden Hours | | | 600 | 8,520 |

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201. Attention Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: OIRA_SUBMISSION@OMB.EOP.GOV. Attn: Desk Officer for the Administration for Children and Families

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2016-26615 Filed 11-3-16; 8:45 am]

BILLING CODE 4184-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Withdrawal of 60-Day Notice of Proposed Information Collection: Unaccompanied Children Case Summary Form

AGENCY: Administration for Children and Families, HHS.

ACTION: Withdrawal: Notice.

SUMMARY: On October 4, 2016 at 81 FR 68420, ACF published a 60 Day Notice of Proposed Information Collection entitled "Unaccompanied Children Case

Summary Form." ACF is withdrawing this notice from the **Federal Register**.

FOR FURTHER INFORMATION CONTACT: Robert Sargis, Reports Clearance Officer, Office of Planning Research and Evaluation.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2016-26686 Filed 11-3-16; 8:45 am]

BILLING CODE 4184-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Aging (NIA), National Institute of Mental Health (NIMH), and National Center for Advancing Translational Sciences (NCATS): Cooperative Research and Development Agreement (CRADA) and Licensing Opportunity for Ketamine for the Treatment of Depression and Other Anxiety-Related Disorders

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Institute of Aging (NIA), National Institute of Mental Health (NIMH), and National Center for Advancing Translational Sciences (NCATS) of the National Institutes of Health (NIH), University of Maryland at Baltimore (UMB) and their collaborators are seeking Cooperative Research and Development Agreement (CRADA) partners to collaborate in the preclinical and clinical development of ketamine metabolite (2R, 6R-HNK) for the treatment of depression and other anxiety-related disorders.

DATES: Interested candidate partners must submit a statement of interest and capability, no more than five pages long, to the NCATS point of contact before January 3, 2017 for consideration.

FOR FURTHER INFORMATION CONTACT: Information on licensing and co-

development research collaborations, and copies of the U.S. patent applications listed below may be obtained by contacting: Attn: Sury Vepa, Ph.D., J.D., Senior Licensing and Patenting Manager, National Center for Advancing Translational Sciences, NIH, 9800 Medical Center Drive, Rockville, MD 20850, Phone: 301-217-9197, Fax: 301-217-5736, or email NCATSPartnerships@mail.nih.gov. A signed Confidential Disclosure Agreement may be required to receive copies of the patent applications.

SUPPLEMENTARY INFORMATION: As per the Anxiety and Depression Association of America, Major depressive disorder affects 14.8 million people in America, including children, adults, and the elderly. A number of therapies currently exist to treat depression, although they suffer drawbacks such as requiring weeks to take action. One particular therapy includes the approved drug, ketamine, which has demonstrated robust and acute antidepressant activity. However, its efficacy is bridled with significant disadvantages including its addictive potential and its dissociative activities. This is the case even when administered at low doses, which limits the potential widespread use of ketamine as an antidepressant medication.

In order to improve the treatment of depression, it is important to explore the mechanism by which ketamine exerts its antidepressant effects. That is precisely what the NIH and UMB scientists and collaborators are investigating, and have found that the metabolism of ketamine is critical to its antidepressant effects, and that the (2R,6R)-2-amino-2-(2-chlorophenyl)-6-hydroxycyclohexanone ((2R,6R)-hydroxynorketamine (HNK)) metabolite, reversed depression-like behaviors in mice without triggering anesthetic, dissociative, or addictive side effects associated with ketamine. Specifically, the researchers found that the