

to 5 PM. The dates remain the same. The meeting is closed to the public.

Dated: July 23, 2001.

**LaVerne Y. Stringfield,**  
*Director, Office of Federal Advisory  
 Committee Policy.*

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**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 list 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 (301) 443-7978.

Participant Feedback Forms for Two CMHS Mental Health Education Training Initiatives—New—This project will collect feedback from mental health professionals who receive training from any of SAMHSA's Center for Mental Health Services-supported Minority Community Based Organizations or Behavioral Health Professional Association contractors. The forms to be used to collect the feedback are refined versions of feedback forms required for use by the Mental Health Care Provider Education in HIV/AIDS Program II and approved by OMB under control number 0930-0195.

The range of mental health issues covered is broad and, depending on the needs of the audiences, the training sites may use any of the following types of curricula: general, ethics, neuropsychiatric, neuropsychiatric designed for non-psychiatrists, and an adherence curriculum. Education sites also vary the complexity and intensity of the training sessions, resulting in sessions of variable length. Service providers attending sessions shorter than 6 hours will provide feedback by completing a single form at the end of

the training session. Those attending sessions 6 hours or longer will be asked to complete forms both before and after the training session in order to assess both satisfaction and perceived knowledge gain. Education sites funded under these initiatives will vary considerably in their prior experience in conducting trainings, with some organizations having significant prior experience while others will be developing their training programs. The burden estimates below incorporate and reflect reasonable assumptions regarding the volume, type and length of training sessions conducted by the various organizations likely to be funded under these two initiatives.

The Minority HIV/AIDS Mental Health Services Initiative is expected to be comprised of 12 minority community-based organizations providing mental health HIV/AIDS education trainings to traditional and non-traditional mental health service providers. Estimates of the numbers of mental health professionals trained and types of training sessions conducted are based on the assumption that half (6) of the funded education sites will be existing education programs and the other half will be new education sites. The six new education sites are expected to train about 300 individuals annually using the general curriculum (and corresponding form—The Participant Feedback Form) with their training sessions being less than 6 hours long. These sites will conduct, on average about 15 training sessions per year with approximately 20 people attending each session.

The remaining six sites are expected to be education sites with existing education training programs and are expected to conduct a total of 25 training sessions each per year with about 20 individuals attending each training session. These six sites should therefore train a total 500 individuals each per year. The majority of these sessions will be less than 6 hours long (about 76% or 19 sessions of the 25 sessions). In contrast to the new education sites, however, these sites are likely to use all of the following curricula: general, ethics, neuropsychiatric, neuropsychiatric

designed for non-psychiatrists, and the adherence curriculum. Of the 19 training sessions that are shorter than 6 hours, 10 are expected to use the general curriculum, 3 will use the adherence curriculum, and 2 sessions each for the ethics, neuropsychiatric, neuropsychiatric for non-psychiatrists. Four of the 6 sessions that are longer than 6 hours are expected to use the general curriculum and corresponding pre/post participant forms, and 2 will use the neuropsychiatric curriculum with the accompanying corresponding pre/post neuropsychiatric participant forms. Burden estimates are presented in Table 1 below.

The Behavioral Health Professional Health Association Training Initiative is a continuation effort. This initiative will consist of three Associations providing training to mental health professionals both within and outside of their disciplines. These Associations are required to train a minimum of 1,000 mental health professionals per year using the general, ethics, neuropsychiatric, neuropsychiatric for non-psychiatrists, and adherence curricula. They all have prior experience training mental health professionals and will conduct sessions that are of variable length (i.e., shorter and longer than 6 hours long). Each Association will conduct about 57 trainings per year, the majority of which (about 90% or about 51 training sessions) will be less than 6 hours long. Of the shorter trainings, each Association will conduct about 20 using the general curriculum, 6 using the ethics curriculum, 12 using the neuropsychiatric curriculum, 9 using the adherence curriculum and 4 using the neuropsychiatric curriculum for non-psychiatrists. The appropriate post-training feedback form will be administered to trainees after each session. Each Association will also conduct about 6 longer trainings per year; 4 using the neuropsychiatric curriculum and 2 using the general curriculum. The corresponding pre/post feedback form will be administered at each training session. Table 2 below uses these assumptions to calculate the burden estimate.

TABLE 1.—MINORITY HIV/AIDS MENTAL HEALTH SERVICES INITIATIVE

Form	Responses/ respondent	Estimated number of respondents	Estimated hours/re- sponse	Total
<b>Minority HIV/AIDS Mental Health Services Initiative—12 Sites All Sessions—One form per session completed by Program staff/trainer</b>				
Session Report Form .....	1	240	0.08	19

TABLE 1.—MINORITY HIV/AIDS MENTAL HEALTH SERVICES INITIATIVE—Continued

Form	Responses/ respondent	Estimated number of respondents	Estimated hours/re- sponse	Total hours
<b>Sessions less than 6 hours</b>				
Participant Feedback Form .....	1	3,000	0.167	501
Neuropsychiatric Participant Feedback Form .....	1	240	0.167	40
Ethics Participant Feedback Form .....	1	240	0.167	40
Adherence Participant Feedback Form .....	1	360	0.167	60
Neuropsychiatric Participant Feedback Form Non-Physicians .....	1	240	0.167	40
<b>Sessions 6 hours or longer</b>				
Pre-Training Participant Inventory .....	1	480	0.167	80
Post-Training Participant Inventory .....	1	*480	0.25	120
Neuropsychiatric Pre-Training Participant Inventory .....	1	240	0.167	40
Neuropsychiatric Post-Training Participant Inventory .....	1	*240	0.25	60
Total .....		5,040		1,000

TABLE 2.—BEHAVIORAL HEALTH PROFESSIONAL ASSOCIATION TRAINING INITIATIVE

Form	Responses/ respondent	Estimated number of respondents	Estimated hours/response	Total hours
<b>Behavioral Health Professional Association Training Initiative—3 Sites</b>				
<b>All Sessions—One form per session completed by Program staff/trainer</b>				
Session Report Form .....	1	171	0.08	14
<b>Sessions less than 6 hours</b>				
Participant Feedback Form .....	1	1,200	0.167	200
Neuropsychiatric Participant Feedback Form .....	1	720	0.167	120
Ethics Participant Feedback Form .....	1	360	0.167	60
Adherence Participant Feedback Form .....	1	540	0.167	90
Neuropsychiatric Participant Feedback Form Non-Physicians .....	1	240	0.167	40
<b>Sessions 6 hours or longer</b>				
Pre-Training Participant Inventory .....	1	120	0.167	20
Post-Training Participant Inventory .....	1	*120	0.25	30
Neuropsychiatric Pre-Training Participant Inventory .....	1	240	0.167	40
Neuropsychiatric Post-Training Participant Inventory .....	1	*240	0.25	60
Total .....		3,591		674

TABLE 3.—COMBINED ANNUAL BURDEN ESTIMATE

Form	Responses/ per respond- ent	Estimated number of respondents	Estimated hours/response	Total hours
<b>Behavioral Health Professional Association Training Initiative—3 Sites</b>				
<b>All Sessions—One form per session completed by Program staff/trainer</b>				
Session Report Form .....	1	411	0.08	33
<b>Sessions less than 6 hours</b>				
Participant Feedback Form .....	1	4,200	0.167	701
Neuropsychiatric Participant Feedback Form .....	1	960	0.167	160
Ethics Participant Feedback Form .....	1	600	0.167	100
Adherence Participant Feedback Form .....	1	900	0.167	150
Neuropsychiatric Participant Feedback Form Non-Physicians .....	1	480	0.167	80
<b>Sessions 6 hours or longer</b>				
Pre-Training Participant Inventory .....	1	600	0.167	100
Post-Training Participant Inventory .....	1	*600	0.25	150
Neuropsychiatric Pre-Training Participant Inventory .....	1	480	0.167	80

TABEL 3.—COMBINED ANNUAL BURDEN ESTIMATE—Continued

Form	Responses per respondent	Estimated number of respondents	Estimated hours/response	Total hours
Neuropsychiatric Post-Training Participant Inventory .....	1	*480	0.25	120
Total .....	.....	8,631	.....	1,674

\*Since the same individuals complete the pre-and post-training forms, these numbers are not included in calculating the total number of respondents.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Lauren Wittenberg, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: July 26, 2001.

**Richard Kopanda,**

*Executive Officer, SAMHSA.*

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BILLING CODE 4162-20-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies**

**AGENCY:** Substance Abuse and Mental Health Services Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Department of Health and Human Services notifies Federal agencies of the laboratories currently certified to meet standards of Subpart C of Mandatory Guidelines for Federal Workplace Drug Testing Programs (59 FR 29916, 29925, June 9, 1994). A similar notice listing all currently certified laboratories will be published during the first week of each month, and updated to include laboratories which subsequently apply for and complete the certification process. If any listed laboratory's certification is totally suspended or revoked, the laboratory will be omitted from updated lists until such time as it is restored to full certification under the Guidelines.

If any laboratory has withdrawn from the National Laboratory Certification Program during the past month, it will be listed at the end, and will be omitted from the monthly listing thereafter.

This Notice is also available on the internet at the following websites: <http://workplace.samhsa.gov>; <http://www.drugfreeworkplace.gov>; and <http://www.health.org/workplace>.

[www.drugfreeworkplace.gov](http://www.drugfreeworkplace.gov); and <http://www.health.org/workplace>.

**FOR FURTHER INFORMATION CONTACT:** Mrs. Giselle Hersh or Dr. Walter Vogl, Division of Workplace Programs, 5600 Fishers Lane, Rockwall 2 Building, Room 815, Rockville, Maryland 20857; Tel.: (301) 443-6014, Fax: (301) 443-3031.

**SUPPLEMENTARY INFORMATION:**

Mandatory Guidelines for Federal Workplace Drug Testing were developed in accordance with Executive Order 12564 and section 503 of Pub. L. 100-71. Subpart C of the Guidelines, "Certification of Laboratories Engaged in Urine Drug Testing for Federal Agencies," sets strict standards which laboratories must meet in order to conduct urine drug testing for Federal agencies. To become certified an applicant laboratory must undergo three rounds of performance testing plus an on-site inspection.

To maintain that certification a laboratory must participate in a quarterly performance testing program plus periodic, on-site inspections.

Laboratories which claim to be in the applicant stage of certification are not to be considered as meeting the minimum requirements expressed in the HHS Guidelines. A laboratory must have its letter of certification from SAMHSA, HHS (formerly: HHS/NIDA) which attests that it has met minimum standards.

In accordance with Subpart C of the Guidelines, the following laboratories meet the minimum standards set forth in the Guidelines:

- ACL Laboratories, 8901 W. Lincoln Ave., West Allis, WI 53227, 414-328-7840/800-877-7016, (Formerly: Bayshore Clinical Laboratory)
- Advanced Toxicology Network, 3560 Air Center Cove, Suite 101, Memphis, TN 38118, 901-794-5770/888-290-1150
- Aegis Analytical Laboratories, Inc., 345 Hill Ave., Nashville, TN 37210, 615-255-2400
- Alabama Reference Laboratories, Inc., 543 South Hull St., Montgomery, AL 36103, 800-541-4931 / 334-263-5745

Alliance Laboratory Services, 3200 Burnet Ave., Cincinnati, OH 45229, 513-585-9000, (Formerly: Jewish Hospital of Cincinnati, Inc.)

American Medical Laboratories, Inc., 14225 Newbrook Dr., Chantilly, VA 20151, 703-802-6900

Associated Pathologists Laboratories, Inc., 4230 South Burnham Ave., Suite 250, Las Vegas, NV 89119-5412, 702-733-7866/800-433-2750

Baptist Medical Center—Toxicology Laboratory 9601 I-630, Exit 7, Little Rock, AR 72205-7299, 501-202-2783 (Formerly: Forensic Toxicology Laboratory Baptist Medical Center)

Clinical Laboratory Partners, LLC 129 East Cedar St., Newington, CT 06111, 860-696-8115, (Formerly: Hartford Hospital Toxicology Laboratory)

Clinical Reference Lab, 8433 Quivira Rd., Lenexa, KS 66215-2802, 800-445-6917

Cox Health Systems, Department of Toxicology, 1423 North Jefferson Ave., Springfield, MO 65802, 800-876-3652/417-269-3093, (Formerly: Cox Medical Centers)

Dept. of the Navy, Navy Drug Screening Laboratory, Great Lakes, IL, Building 38-H, P. O. Box 88-6819, Great Lakes, IL 60088-6819, 847-688-2045/847-688-4171

Diagnostic Services Inc., dba DSI 12700 Westlinks Drive, Fort Myers, FL 33913, 941-561-8200/800-735-5416

Doctors Laboratory, Inc., P.O. Box 2658, 2906 Julia Dr., Valdosta, GA 31602, 912-244-4468

DrugProof, Division of Dynacare/ Laboratory of Pathology, LLC 1229, Madison St., Suite 500, Nordstrom Medical Tower, Seattle, WA 98104, 206-386-2672 / 800-898-0180. (Formerly: Laboratory of Pathology of Seattle, Inc., DrugProof, Division of Laboratory of Pathology of Seattle, Inc.)

DrugScan, Inc., P.O. Box 2969, 1119 Mearns Rd., Warminster, PA 18974, 215-674-9310

Dynacare Kasper Medical Laboratories,\* 14940-123 Ave., Edmonton, Alberta, Canada T5V 1B4, 780-451-3702/800-661-9876