IV. List of Recognized Standards

FDA maintains the agency's current list of FDA recognized consensus standards in a searchable database that may be accessed directly at FDA's Internet site at http:// www.accessdata.fda.gov/scripts/cdrh/ cfdocs/cfStandards/search.cfm. FDA will incorporate the modifications and minor revisions described in this document into the database and, upon publication in the Federal Register, this recognition of consensus standards will be effective. FDA will announce additional modifications and minor revisions to the list of recognized consensus standards, as needed, in the Federal Register once a year, or more often, if necessary.

V. Recommendation of Standards for Recognition by FDA

Any person may recommend consensus standards as candidates for recognition under the new provision of section 514 of the act by submitting such recommendations, with reasons for the recommendation, to the contact person (See FOR FURTHER INFORMATION **CONTACT**). To be properly considered such recommendations should contain, at a minimum, the following information: (1) Title of the standard; (2) any reference number and date; (3) name and address of the national or international standards development organization; (4) a proposed list of devices for which a declaration of conformity to this standard should routinely apply; and (5) a brief identification of the testing or performance or other characteristics of the device(s) that would be addressed by a declaration of conformity.

VI. Electronic Access

You may obtain a copy of "Guidance on the Recognition and Use of Consensus Standards" by using the Internet. CDRH maintains a site on the Internet for easy access to information including text, graphics, and files that you may download to a personal computer with access to the Internet. Updated on a regular basis, the CDRH home page includes the guidance as well as the current list of recognized standards and other standards related documents. After publication in the Federal Register, this document announcing "Modification to the List of Recognized Standards, Recognition List Number: 021" will be available on the CDRH home page. You may access the CDRH home page at http://www.fda.gov/ cdrh.

You may access "Guidance on the Recognition and Use of Consensus

Standards," and the searchable database for "FDA Recognized Consensus Standards" through the hyperlink at http://www.fda.gov/cdrh/stdsprog.html.

This **Federal Register** document on modifications in FDA's recognition of consensus standards is available at http://www.fda.gov/cdrh/fedregin.html.

VII. Submission of Comments and Effective Date

Interested persons may submit to the contact person (see FOR FURTHER **INFORMATION CONTACT)** written or electronic comments regarding this document. Two copies of any mailed comments are to be submitted, except that individuals may submit one paper copy. Comments are to be identified with the docket number found in brackets in the heading of this document. FDA will consider any comments received in determining whether to amend the current listing of modifications to the list of recognized standards, Recognition List Number: 021. These modifications to the list or recognized standards are effective upon publication of this document in the Federal Register.

Dated: March 10, 2009.

Daniel G. Schultz,

Director, Center for Devices and Radiological Health

[FR Doc. E9–5858 Filed 3–17–09; 8:45 am] BILLING CODE 4160–01–S

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) 276–1243.

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: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase VI—NEW.

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center of Mental Health Services is responsible for the national evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program (Children's Mental Health Initiative—CMHI) that will collect data on child mental health outcomes, family life, and service system development and performance. Data will be collected on 26 service systems, and approximately 5,541 children and families.

Data collection for this evaluation will be conducted over a five-year period. Child and family outcomes of interest will be collected at intake and during subsequent follow-up sessions at sixmonth intervals. The length of time that individual families will participate in the study ranges from 12 to 24 months depending upon when they enter the evaluation. The outcome measures include the following: Child symptomatology and functioning, family functioning, satisfaction, and caregiver strain. The core of service system data will be collected every 18-24 months throughout the 5-year evaluation period, with a sustainability survey conducted in years 3 and 5. Service utilization and cost data will be tracked and submitted to the national evaluation every six months using two tools: The Flex Fund Tool and the Services and Costs Data Tool to estimate average cost of treatment per child, distribution of costs, and allocation of costs across service categories. Service delivery and system variables of interest include the following: Maturity of system of care development in funded system of care communities, adherence to the system of care program model, and client service experience. We will also conduct a comprehensive evaluation of the CMHI's data driven technical assistance; this component of the evaluation will employ a mixedmethods approach, combining qualitative and quantitative data to provide a comprehensive assessment of the continuous quality improvement (CQI) process in funded system of care

communities. Specifically, data will be gathered through three complementary activities: A baseline survey of key constituents in all funded communities; a subsequent monitoring survey administered every two years to the same constituents; and biennial case studies of four selected communities.

In addition, the evaluation will include three special studies: (1) The sector specific assessment and quasi-experimental comparison study will examine in more detail the outcomes and service experience of children from multiple child-serving sectors and, through child-level matching, compare these outcomes with those not receiving system of care services; (2) The Alumni

Network Study will examine the effectiveness of the system of care Alumni Network Web site by evaluating end-user satisfaction and usability of the Web site and will also assess the collaboration between communities via a Web-based Networking and Collaboration Survey that will measure the nature and extent of the interaction between communities; (3) The Study of State Strategies for Sustainability will examine the State's role in sustaining communities after Federal funding ceases and describe effective strategies for sustaining funded systems of care. A short version of the sustainability survey developed for this evaluation will be used to gather this information.

Internet-based technology such as Web-based surveys and data entry and management tools will be used in this evaluation. The measures of the national evaluation address the national outcome measures for mental health programs as currently established by SAMHSA.

The average annual respondent burden is estimated below. The estimate reflects the average number of respondents in each respondent category, the average number of responses per respondent per year, the average length of time it will take to complete each response, and the total average annual burden for each category of respondent, and for all categories of respondents combined.

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-Year average annual bur- den hours		
System-of-care Assessment								
Interview Guides A–I, L–R	Key site informants	546	3	1.0	1,638	328		
Child and Family Outcome Study								
Caregiver Information Question- naire (CIQ-IC).	Caregiver	5,541	1	0.4	2,032	406		
Caregiver Information Question- naire Follow-up (CIQ-FC).	Caregiver	5,541	4	0.3	6,280	1,256		
Caregiver Strain Questionnaire (CGSQ).	Caregiver	5,541	5	0.2	4,627	925		
Child Behavior Checklist (CBCL)/ Child Behavior Checklist 1½–5/6–18.	Caregiver	5,541	5	0.3	9,226	1,845		
Education Questionnaire—Revised (EQ-R).	Caregiver	5,541	5	0.3	9,226	1,845		
Living Situations Questionnaire (LSQ).	Caregiver	5,541	5	0.1	2,300	460		
Behavioral and Emotional Rat- ing Scale–Second Edition, Parent Rating Scale (BERS– 2C).	Caregiver	4,931	5	0.2	4,117	823		
Columbia Impairment Scale (CIS).	Caregiver	4,931	5	0.1	2,046	409		
Parenting Stress Index (PSI)	Caregiver	1,528	5	0.1	637	127		
Deveraux Early Childhood Assessment (DECA).	Caregiver	1,528	5	0.1	637	127		
Preschool Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (PBERS).	Caregiver	1,528	5	0.1	764	153		
Delinquency Survey—Revised (DS–R).	Youth	3,452	5	0.1	2,301	460		
Behavioral and Emotional Rat- ing Scale—Second Edition, Youth Rating Scale (BERS– 2Y).	Youth	3,452	5	0.2	2,882	576		
Gain-Quick Substance Related Issues.	Youth	3,452	5	0.1	1,433	287		
Substance Use Survey—Revised (SUS–R).	Youth	3,452	5	0.1	1,726	345		
Revised Children's Manifest Anxiety Scales (RCMAS).	Youth	3,452	5	0.1	863	173		
Reynolds Adolescent Depression Scale—Second Edition (RADS-2).	Youth	3,452	5	0.1	863	173		
Youth information Question- naire—Baseline (YIQ-I).	Youth	3,452	1	0.3	863	173		

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-Year average annual bur- den hours		
Youth information Question- naire—Follow-up (YIQ-F).	Youth	3,452	4	0.3	3,452	690		
Service Experience Study								
Multi-Sector Service Contacts—	Caregiver	5,541	1	0.3	1,385	277		
Revised—Intake (MSSC–R-I). Multi-Sector Service Contacts— Revised—Follow-up (MSSC–	Caregiver	5,541	4	0.3	5,541	1,108		
R–F). Cultural Competence and Service Provision Questionnaire— Revised (CCSP–R).	Caregiver	5,541	4	0.1	2,955	591		
Youth Services Survey—Family	Caregiver	5,541	4	0.1	2,593	519		
(YSS-F). Youth Services Survey (YSS)	Youth	3,452	4	0.1	1,146	229		
	Juven	ile Justice Study	1					
Delinquency Survey—Revised—JJ Addendum (DS–	Youth	405	5	0.0	68	14		
R–JJ). Court Representative Question-	Court representatives	212	5	0.2	177	35		
naire. Electronic Data Transfer of Juvenile Justice Records.	Key site personnel	212	5	0.0	35	7		
	Ed	ucation Study						
Teacher Questionnaire	TeacherSchool administrators	212 212	5 5	0.3 0.2	265 177	53 35		
naire. Electronic Data Transfer of Education Records.	Key site personnel	212	5	0.0	35	7		
	Child	Welfare Study						
Child Welfare Sector Study Questionnaire—Intake (CWSQ-I).	Care coordinators	487	1	0.5	244	49		
Child Welfare Sector Study Questionnaire—Follow-up (CWSQ-F).	Care coordinators	487	4	0.5	974	195		
	Sust	ainability Study						
Sustainability Survey: Brief Form.	Project Director	79	2	0.2	26	5		
Sustainability SurveySustainability Survey	Providers	180 60	2 2	0.8 0.8	270 90	54 18		
	CQI Effec	tiveness Evalua	tion					
CQI Baseline Survey, Web-	Key site personnel	208	1	0.5	104	21		
based. CQI Monitoring Survey, Webbased.	Key site personnel	208	2	0.5	208	42		
Local Focus Group Guide National Focus Group Guide	Key site personnel National TA providers	30 20	2 2	1.0 1.0	60 40	12 8		
	Alumni	Networking Stud	dy					
Networking and Collaboration	Key site personnel	236	4	0.5	472	94		
Survey. Alumni Network Satisfaction Survey.	Key site personnel, nat'l TA providers, Branch staff.	458	3	0.3	344	69		
Services and Costs Study								
Flex Funds Data Dictionary/ Tool.	Local programming staff compiling/entering administrative data on children/youth.	1,306	3	0.0	129	26		

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-Year average annual bur- den hours
Services and Costs Data Dictionary/Data Entry Application.	Local evaluator, staff at partner agencies, and programming staff compiling/entering service and cost records on children/youth.	5,541	100	0.1	27,705	5,541

Respondent	Number of respondents	Number of responses/ respondent	Average burden/ response	Total average annual burden
Caregiver	5,541 3,452 546	0.9 0.9 10.5	2.2 1.0 1.1	10,891 3,119 6,580
Total	9,539			20,591

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 7–1044, One Choke Cherry Road, Rockville, MD 20857 and e-mail her a copy at *summer.king@samhsa.hhs.gov*. Written comments should be received within 60 days of this notice.

March 11, 2009.

Elaine Parry,

Director, Office of Program Services.
[FR Doc. E9–5803 Filed 3–17–09; 8:45 am]
BILLING CODE 4162–20–P

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

[FWS-R9-WSR-2009-N0056] [91400-5110-POLI-7B and 91400-9410-POLI-7B]

Proposed Information Collection; OMB Control Number 1018–0109; Wildlife and Sport Fish Grants and Cooperative Agreements

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Notice; request for comments.

SUMMARY: We (Fish and Wildlife Service) will ask the Office of Management and Budget (OMB) to approve the information collection (IC) described below. As required by the Paperwork Reduction Act of 1995 and as part of our continuing efforts to reduce paperwork and respondent burden, we invite the general public and other Federal agencies to take this opportunity to comment on this IC. This IC is scheduled to expire on June 30, 2009. We may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

DATES: Your comments must be received by May 18, 2009.

ADDRESSES: Send your comments on the IC to Hope Grey, Information Collection Clearance Officer, Fish and Wildlife Service, MS 222–ARLSQ, 4401 North Fairfax Drive, Arlington, VA 22203 (mail); hope grey@fws.gov (e-mail).

FOR FURTHER INFORMATION CONTACT: To request additional information about this IC, contact Hope Grey by mail or email (see ADDRESSES) or by telephone at (703) 358–2482.

SUPPLEMENTARY INFORMATION:

I. Abstract

We administer 18 wildlife and sport fish financial assistance programs. We provide most of this financial assistance as grants, but cooperative agreements are possible if the Federal Government is substantially involved in carrying out the project. You can find a description of most programs in the Catalog of Domestic Federal Assistance (CDFA). For those programs without a CDFA number, see the authority.

Program	CDFA No.	Authority	Implementing Regulations
Clean Vessel Act	15.616 15.614 15.615 None	16 U.S.C. 1531 et seq	50 CFR 85 50 CFR 84 50 CFR 81 None
Fisheries Restoration and Irrigation Mitigation Hunter Education and Safety Landowner Incentive Multistate Conservation Grants National Outreach and Communication Research Grants (Generic)	None	16 U.S.C. 669h-1 Pub. L. 110-5 16 U.S.C. 669h-2; 16 U.S.C. 777m 16 U.S.C. 777g(d)	None 50 CFR 80 None None None
Service Training and Technical Assistance (Generic Training) Sport Fish Restoration	15.649 15.605 15.622 15.634 15.638 15.639	16 U.S.C. 661 and 16 U.S.C. 742f 16 U.S.C. 777–777n (except 777e–1) 16 U.S.C. 777g and g–1	None 50 CFR 80 50 CFR 86 None None None