

Effective Palliative/End of Life Care Interventions.

Date: October 22, 2015.

Time: 8:00 a.m. to 3:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Bethesda Marriott Suites, 6711 Democracy Boulevard, Bethesda, MD 20817.

Contact Person: Mario Rinaudo, MD
Scientific Review Officer Office of Review,
National Institute of Nursing Research,
National Institutes of Health, 6701
Democracy Blvd. (DEM 1), Suite 710,
Bethesda, MD 20892, 301-594-5973
mrinaudo@mail.nih.gov.

Name of Committee: National Institute of
Nursing Research Special Emphasis Panel;
Research Project Grant.

Date: October 28, 2015.

Time: 11:00 a.m. to 1:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health One
Democracy Plaza Room 703, 6701 Democracy
Boulevard Bethesda, MD 20892, (Telephone
Conference Call).

Contact Person: Tamizchelvi Thyagarajan,
Ph.D. Scientific Review Officer, National
Institute of Nursing Research, National
Institutes of Health, Bethesda, MD 20892
(301) 594-0343 tamizchelvi.thyagarajan@
nih.gov.

(Catalogue of Federal Domestic Assistance
Program Nos. 93.361, Nursing Research,
National Institutes of Health, HHS)

Dated: September 16, 2015.

Michelle Trout,

Program Analyst, Office of Federal Advisory
Committee Policy.

[FR Doc. 2015-23639 Filed 9-21-15; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel, Effect of Age on Heart, Lung, Blood, and Sleep Disorders.

Date: October 16, 2015.

Time: 8:00 a.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: The William F. Bolger Center, 9600 Newbridge Drive, Potomac, MD 20854.

Contact Person: Giuseppe Pintucci, Ph.D.
Scientific Review Officer, Office of Scientific
Review/DERA, National Heart, Lung, and
Blood Institute, 6701 Rockledge Drive, Room
7192, Bethesda, MD 20892, 301-435-0287,
Pintuccig@nhlbi.nih.gov.

(Catalogue of Federal Domestic Assistance
Program Nos. 93.233, National Center for
Sleep Disorders Research; 93.837, Heart and
Vascular Diseases Research; 93.838, Lung
Diseases Research; 93.839, Blood Diseases
and Resources Research, National Institutes
of Health, HHS)

Dated: September 16, 2015.

Michelle Trout,

Program Analyst, Office of Federal Advisory
Committee Policy.

[FR Doc. 2015-23640 Filed 9-21-15; 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) 276-1243.

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: Transformation Accountability Reporting System—(OMB No. 0930-0285)—Revision

The Transformation Accountability (TRAC) Reporting System is a real-time, performance management system that captures information on the substance abuse treatment and mental health services delivered in the United States. A wide range of client and program information is captured through TRAC for approximately 700 grantees. This request includes an extension of the currently approved data collection effort.

This information collection will allow SAMHSA to continue to meet the Government Performance and Results Act (GPRA) of 1993 reporting requirements that quantify the effects and accomplishments of its programs, which are consistent with OMB guidance. In order to carry out section 1105(a)(29) of GPRA, SAMHSA is required to prepare a performance plan for its major programs of activity. This plan must:

- Establish performance goals to define the level of performance to be achieved by a program activity;
- Express such goals in an objective, quantifiable, and measurable form;
- Briefly describe the operational processes, skills and technology, and the human, capital, information, or other resources required to meet the performance goals;
- Establish performance indicators to be used in measuring or assessing the relevant outputs, service levels, and outcomes of each program activity;
- Provide a basis for comparing actual program results with the established performance goals; and
- Describe the means to be used to verify and validate measured values.

In addition, this data collection supports the GPRA Modernization Act of 2010 which requires overall organization management to improve agency performance and achieve the mission and goals of the agency through the use of strategic and performance planning, measurement, analysis, regular assessment of progress, and use of performance information to improve the results achieved. Specifically, this data collection will allow CMHS to have the capacity to report on a consistent set of performance measures across its various grant programs that conduct each of these activities. SAMHSA's legislative mandate is to increase access to high quality substance abuse and mental health prevention and treatment services and to improve outcomes. Its mission is to improve the quality and availability of treatment and prevention

services for substance abuse and mental illness. To support this mission, the Agency's overarching goals are:

- **Accountability**—Establish systems to ensure program performance measurement and accountability
- **Capacity**—Build, maintain, and enhance mental health and substance abuse infrastructure and capacity

- **Effectiveness**—Enable all communities and providers to deliver effective services

Each of these key goals complements SAMHSA's legislative mandate. All of SAMHSA's programs and activities are geared toward the achievement of these goals and performance monitoring is a collaborative and cooperative aspect of

this process. SAMHSA will strive to coordinate the development of these goals with other ongoing performance measurement development activities.

The total annual burden estimate is shown below:

ESTIMATES OF ANNUALIZED HOUR BURDEN
[CMHS client outcome measures for discretionary programs]

Type of response	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Client-level baseline interview	35,845	1	35,854	0.45	16,130
Client-level 6-month reassessment interview ¹	23,658	1	23,658	0.45	10,646
Client-level discharge interview ²	10,753	1	10,753	0.45	4,838
PBHCI- Section H Form Only Baseline	14,000	1	14,000	.08	1,120
PBHCI- Section H Form Only Follow-Up ³	9,240	1	9,240	.08	739
PBHCI—Section H Form Only Discharge ⁴	4,200	1	4,200	.08	336
HIV Continuum of Care Specific Form Baseline	200	1	200	0.33	66
HIV Continuum of Care Follow-Up ⁵	148	1	148	0.33	49
HIV Continuum of Care Discharge ⁶	104	1	104	0.33	34
Infrastructure development, prevention, and mental health promotion quarterly record abstraction ⁷	982	4.0	3928	2.0	7,856
Total	36,827	102,139	48,814

Note: Numbers may not add to the totals due to rounding and some individual participants completing more than one form.

¹ It is estimated that 66% of baseline clients will complete this interview.

² It is estimated that 30% of baseline clients will complete this interview.

³ It is estimated that 74% of baseline clients will complete this interview.

⁴ It is estimated that 52% of baseline clients will complete this interview.

⁵ It is estimated that 52% of baseline clients will complete this interview.

⁶ It is estimated that 30% of baseline clients will complete this interview.

⁷ Grantees are required to report this information as a condition of their grant. No attrition is estimated.

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 2–1057, One Choke Cherry Road, Rockville, MD 20857 or email a copy at summer.king@samhsa.hhs.gov. Written comments should be received by November 23, 2015

Summer King,
Statistician.

[FR Doc. 2015–24023 Filed 9–21–15; 8:45 am]

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DEPARTMENT OF HOMELAND SECURITY

U.S. Customs and Border Protection

Notice of Issuance of Final Determination Concerning Solar Modules

AGENCY: U.S. Customs and Border Protection, Department of Homeland Security.

ACTION: Notice of final determination.

SUMMARY: This document provides notice that U.S. Customs and Border Protection (“CBP”) has issued a final determination concerning the country of

origin of certain solar modules manufactured by Hanwha USA. Based upon the facts presented, CBP has concluded that the country of origin of the solar modules is Malaysia when Malaysian solar cells are used or Korea when Korean solar cells are used for purposes of U.S. Government procurement.

DATES: The final determination was issued on September 16, 2015. A copy of the final determination is attached. Any party-at-interest, as defined in 19 CFR 177.22(d), may seek judicial review of this final determination within October 22, 2015.

FOR FURTHER INFORMATION CONTACT: Ross Cunningham, Valuation and Special Programs Branch, Regulations and Rulings, Office of International Trade (202) 325–0034.

SUPPLEMENTARY INFORMATION: Notice is hereby given that on September 16, 2015 pursuant to subpart B of part 177, U.S. Customs and Border Protection Regulations (19 CFR part 177, subpart B), CBP issued a final determination concerning the country of origin of certain solar modules manufactured by Hanwha USA, which may be offered to

the U.S. Government under an undesignated government procurement contract. This final determination, HQ H261693, was issued under procedures set forth at 19 CFR part 177, subpart B, which implements Title III of the Trade Agreements Act of 1979, as amended (19 U.S.C. 2511–18). In the final determination, CBP concluded that the processing in Poland or Korea does not result in a substantial transformation. Therefore, the country of origin of the solar modules is Malaysia or Korea, where the solar cells are produced, for purposes of U.S. Government procurement.

Section 177.29, CBP Regulations (19 CFR 177.29), provides that a notice of final determination shall be published in the **Federal Register** within 60 days of the date the final determination is issued. Section 177.30, CBP Regulations (19 CFR 177.30), provides that any party-at-interest, as defined in 19 CFR 177.22(d), may seek judicial review of a final determination within 30 days of publication of such determination in the **Federal Register**.