Emergency (CARE) Act are collected twice each year. A unique identifier is used to protect the anonymity of the clients, and as a further safeguard, this unique identifier is encrypted before it is sent to HRSA.

HRSA initiated the CDP to demonstrate (1) the feasibility of collecting client level demographic and service data on HIV/AIDS infected/ affected clients across a network of service providers and (2) the usefulness of these data for planning and evaluation purposes at both the local and national levels. Through this system, HRSA sought to overcome the limitations of the Annual Administrative Report (AAR), the national reporting system for the Ryan White CARE Act. The AAR collects data aggregated at the grantee level and has

duplicated counts of clients. The number of clients reported in the AAR overestimates the true number of clients. In addition, AAR data are not tied to any clinical or service outcome information at the client level. The feasibility of collecting client data has been demonstrated. The usefulness of these data for planning and evaluation purposes at both the local and national level has become increasingly evident. A number of client level analyses that were not possible with the AAR have been undertaken.

In addition to meeting the goal of accountability to Congress, clients, advocacy groups, and the general public, the CDP supports critical efforts by HRSA, state and local grantees, and providers to assess the health outcomes and the service utilization patterns of

the individuals at these sites who are infected or affected by HIV/AIDS and receive care at a provider funded by the Ryan White CARE Act.

Outcome specific and treatment measures are collected in the data system. These data elements seek to document whether current standards of care as established by the Public Health Service are being adhered to at these Ryan White CARE Act facilities. The core set of data elements are largely unchanged from the AAR. Minor changes in the demographic data elements have been made as a result of meetings and input from the current grantees and their providers.

The estimated response burden is as follows:

Medical records source	Number of respondents	Responses per respondent	Total responses	Burden hour	Total burden hours
Providers with < 260 Clients	160 42	83 929	13,280 39,018	.5 .5	6,640 19,509
Total	202	52,298			26,149

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

Dated: April 24, 2000.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 00-10632 Filed 4-27-00; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 30 Day; Proposed Collection: Evaluation of the Indian Health Service/Bureau of Indian Affairs Training Practitioners Project

SUMMARY: In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed

information collection projects, the Indian Health Service (IHS) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection project was published in the January 14, 1999, Federal Register (65 FR 2417) and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted to OMB.

Proposed Collection

Title: 09–17–0000, "Evaluation of the Indian Health Service/Bureau of Indian Affairs Training Practitioners Project".

Type of Information Collection Request: New collection. Form Number: None. Need and Use of Information Collection: The purpose of the proposed data collection is to evaluate and assess the overall effectiveness of the Indian Health Service (IHS) and Bureau of Indian Affairs (BIA) inter-agency sponsored national training project titled, "IHS/BIA Training Practitioners in the Assessment and Treatment of

Adolescent Sexual Perpetrators," conducted from 1993-1996 in 18 American Indian/Alaska Native (AI/AN) communities. The training project was established to provide mental health practitioners in AI/AN communities specialized training for the provision of mental health assessment and treatment services to juvenile sex offenders. The data collected is needed to assess respondent satisfaction/dissatisfaction with the training project, the clinical success/failure of the training on the juvenile sex offenders, the impact of using traditional healing treatment services with juvenile sex offenders, and to obtain recommendations for future clinical program planning. Affected Public: Individuals and households, State, Local or Tribal Government. Type of Respondents: Health care providers, juveniles, parent/caretakers, and various community members. Please see Table 1 for a listing of data collection instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.

TABLE 1

Data collection instruments	Estimated No. of respondents	Responses per respondent	Annual number of responses	Average burden hour per response*	Total annual burden hours
Practitioner Trainee Questionnaire Practitioner Trainee Assessment Practitioner Trainee Interview Juvenile/Adult J/A Re-Offense Parent/Caretaker Community Key Informant Questionnaire Community Key Informant Interview Medical (Treatment and Health Review) Agency Record Review	159 16 8 61 61 122 24 24 24 61	1 4 1 1 1 1 1	159 64 8 61 61 122 24 24 61	0.50 (30 mins) 0.17 (10 mins) 1.00 (60 mins) 0.50 (30 mins) 0.17 (10 mins) 0.50 (30 mins) 1.50 (90 mins) 1.0 (60 mins) 0.75 (45 mins)	79.5 10.9 8.0 30.5 10.4 61.0 36.0 24.0 45.7 61.0
Total	597		_		367.0

^{*}For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

Request for Comments: Your written comments and/or suggestions are invited on one or more of the following points: (a) whether the information collection activity is necessary to carry out an agency function; (b) whether the IHS processes the information collected in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Send your written comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time, to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

To request more information on the proposed collection or to obtain a copy of the data collection instrument(s) and/or instruction(s), contact: Mr. Lance Hodahkwen, Sr., M.P.H., IHS Reports Clearance Officer, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852.1601, or call non-toll free (301) 443–5938 or send via facsimile to (301) 443–2316, or send your E-mail requests, comments, and return address to: lhodahkw@hqe.ihs.gov.

Comment Due Date: Comments regarding this information collection are

best assured of having their full effect if received on or before May 30, 2000.

Dated: April 11, 2000.

Michael H. Trujillo,

Assistant Surgeon General, Director.
[FR Doc. 00–10543 Filed 4–27–00; 8:45 am]
BILLING CODE 4160–16–M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4566-N-05]

Notice of Proposed Information Collection: Comment Request Rental Rehabilitation Program

AGENCY: Office of the Assistant Secretary for Community Planning and Development, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: Comments Due Date: June 27, 2000

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Reports Liaison Officer, Department of Housing and Urban Development, 451 7th Street, SW, Room 7232, Washington, DC 20410.

FOR FURTHER INFORMATION CONTACT:

Franklin Price, (202) 708–2094 Ext. 4572 (this is not a toll-free number) for copies of the proposed forms and other available documents.

SUPPLEMENTARY INFORMATION: The Department is submitting the proposed information collection to OMB for

review, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended).

This Notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) 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; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

This Notice also lists the following information:

Title of Proposal: Rental Rehabilitation Program Reports. OMB Control Number, if applicable: 2506–0080.

Description of the need for the information and proposed use:
Although the Rental Rehabilitation
Program was terminated October 1,
1991, Public Law 98–181 (97 Stat.
1153), Section 17, that originally authorized the Rental Rehabilitation
Program still imposes data collection and reporting requirements upon HUD and grantees. The information will be used by HUD to account for program grant funds and to satisfy statutory reporting requirements.

Agency form numbers, if applicable: HUD-440014m HUD-40014-B, HUD-44021, and HUD-40070.

Members of affected public: State and local governments.