EXHIBIT 1—TOTAL ESTIMATED ANNUALIZED RESPONDENT BURDEN BY INSTRUMENT AND FACILITY RECRUITMENT—										
Continued										

Activity	Total number of respondents	Number of responses per respondent	Total number of responses	Average hours per response	Average burden hours	Average hourly wage **	Total cost
Jail Clinical Interview	63	1	63	1.40	88	19.83	1749
Sub-total Interviewing Estimates					44,437		881,192
Facility Recruitment Information package review for facility administrators Initial call with facility staff Telephone call with facility staff to explain roster file process	58 58 58	1 1	58 58 58	0.75 1 2	43.5 58 116	25.09 25.09 25.09	1,091 1,455 2,910
Facility staff provides roster Facility staff coordinates time and location for clinical interview administration	58 58	4	232	2	464 464	25.09 25.09	11,642 11,642
Sub-total Facility Recruitment Estimates					1,145.5		28,740
Total					45,582.5		909,932

^{*}Contact attempts include the time spent reviewing all follow-up letters and study materials, including the respondent website, interactions with field and telephone interviewers, the consent process including asking questions regarding rights as a participant and receiving responses, and all other exchanges during the recruitment and interviewing processes.

Send comments to Carlos Graham, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57–A, Rockville, Maryland 20857, *OR* email a copy to *Carlos.Graham@* samhsa.hhs.gov. Written comments should be received by March 21, 2022.

Carlos Graham,

Reports Clearance Officer.

 $[FR\ Doc.\ 2022-00861\ Filed\ 1-18-22;\ 8:45\ am]$

BILLING CODE 4162-20-P

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 summary 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 (240) 276–0361.

Project: Government Performance and Results Act (GPRA) Client/Participant Outcomes Measure—(OMB No. 0930– 0208)—Revision

SAMHSA is requesting approval to modify its existing CSAT Client-level GPRA instrument by removing 48 questions and adding 42 questions for a

net decrease of six questions. In revising the CSAT-GPRA tool, we sought to improve functionality while also eliciting programmatic information that demonstrates impact at the client level. In this way, data from the revised GPRA tool can be used to assess resource allocation and to delineate who we serve, how we serve them, and how the program impacts clients from entry to discharge. Beyond this, much of the tool has been restructured to make its administration flow with greater ease, while also eliciting information that speaks to a client's experience with substance misuse, the concurrent use of substances and mental health. This is most apparent in Section B (Substance Use and Planned Services), where questions have been updated and restructured to elicit important aspects of a client's use of substances, namely the frequency of use and combinations of misused substances. This speaks to an emerging and urgent need to appropriately manage polysubstance misuse,1 and the questions allow for evidence of change as the tool is readministered at different intervals. These questions do not rely on ICD-10 codes, so as to create a dialogue between the client and the individual administering the tool. Restructuring the tool has also included:

- Placing many questions from the general GPRA Tool, that have previously been viewed as being specific to patient populations or grants, in the menu items found in Section H. This section allows Program Officers the opportunity to introduce grant specific questions as needed;
- Removing or substantially altering existing questions viewed as being potentially traumatizing or incentive to clients;
- Removing questions that have not been used in program evaluation at the federal level; and
- Incorporating evidence-based questions from tools such as the Addiction Severity Index to better address program performance.

Currently, the information collected from this instrument is entered and stored in SAMHSA's Performance Accountability and Reporting System, which is a real-time, performance management system that captures information on the substance abuse treatment and mental health services delivered in the United States. Continued approval of this information collection will allow SAMHSA to continue to meet Government Performance and Results Modernization Act of 2010 reporting requirements that quantify the effects and accomplishments of its discretionary grant programs, which are consistent with OMB guidance.

SAMHSA will use the data for annual reporting required by GPRA and comparing baseline with discharge and follow-up data. GPRA requires that

^{**}To compute total estimated annual cost for Interviewing, the total burden hours were multiplied by the average hourly wage for each adult participant, according to a Bureau of Labor Statistics (BLS) chart called "Median usual weekly earnings of full-time wage and salary workers by educational attainment." (Median usual weekly earnings of full-time wage and salary workers by educational attainment (bls.gov)). We used the median salary for full-time employees over the age of 25 who are high school graduates with no college experience in the 2nd quarter of 2021 (\$19.83 per hour). * For the Facility Recruitment, the total average burden assumes an average hourly rate of \$25.09 for Community and Social Service Managers, given in the Bureau of Labor Statistic's Occupational Employment Statistics, May 2020.

¹ Substance Abuse and Mental Health Services Administration (SAMHSA): Treating Concurrent Substance Use Among Adults. SAMHSA Publication No. PEP21–06–02–002. Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2021.

SAMHSA's fiscal year report include actual results of performance monitoring for the three preceding fiscal years. The additional information

collected through this process will allow SAMHSA to: (1) Report results of these performance outcomes; (2) maintain consistency with SAMHSA-

specific performance domains, and (3) assess the accountability and performance of its discretionary and formula grant programs.

TABLE 1—ESTIMATES OF ANNUALIZED HOUR BURDEN

SAMHSA tool	Number of respondents	Responses per respondent	Total number of responses	Burden hours per response	Total burden hours	Hourly wage ¹	Total hour cost
Baseline Interview Includes SBIRT Brief TX, Referral to							
TX, and Program-specific questions	179,668	1	179,668	0.6	107,801	\$24.78	\$2,671,309
Follow-Up Interview with Program-specific questions 2	143,734	1	143,734	0.6	86,240	24.78	2,137,027
Discharge Interview with Program-specific questions ³	93,427	1	93,427	0.6	56,056	24.78	1,389,068
SBIRT Program—Screening Only	594,192	1	594,192	0.13	77,245	24.78	1,914,131
SBIRT Program—Brief Intervention Only Baseline	111,411	1	111,411	0.2	22,282	24.78	552,148
SBIRT Program—Brief Intervention Only Follow-Up ²	89,129	1	89,129	0.2	17,826	24.78	441,728
SBIRT Program—Brief Intervention Only Discharge ³	57,934	1	57,934	0.2	11,587	24.78	287,126
CSAT Total	1,269,495		1,269,495		379,037		9,392,537

¹The hourly wage estimate is \$21.23 based on the Occupational Employment and Wages, Mean Hourly Wage Rate for 21–1011 Substance Abuse and Behavioral Disorder Counselors = \$24.78/hr. as of May 11, 2021. (http://www.bls.gov/oes/current/oes211011.htm. Accessed on May 11, 2021.)
² It is estimated that 80% of baseline clients will complete this interview.
³ It is estimated that 52% of baseline clients will complete this interview.

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

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/ PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

Carlos Graham,

Reports Clearance Officer. [FR Doc. 2022-00857 Filed 1-18-22; 8:45 am] BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

U.S. Customs and Border Protection

[1651-0122]

Screening Requirements for Carriers

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

ACTION: 60-Day notice and request for comments; revision of an existing collection of information.

SUMMARY: The Department of Homeland Security, U.S. Customs and Border Protection will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (PRA). The information collection is published in the Federal Register to obtain comments from the public and affected agencies.

DATES: Comments are encouraged and must be submitted (no later than March 21, 2022) to be assured of consideration.

ADDRESSES: Written comments and/or suggestions regarding the item(s) contained in this notice must include the OMB Control Number 1651-0122 in the subject line and the agency name. Please use the following method to submit comments:

Email. Submit comments to: CBP_ PRA@cbp.dhs.gov.

Due to COVID-19-related restrictions, CBP has temporarily suspended its ability to receive public comments by mail.

FOR FURTHER INFORMATION CONTACT:

Requests for additional PRA information should be directed to Seth Renkema, Chief, Economic Impact Analysis Branch, U.S. Customs and Border Protection, Office of Trade, Regulations and Rulings, 90 K Street NE, 10th Floor, Washington, DC 20229-1177, Telephone number 202-325-0056 or via email CBP_PRA@cbp.dhs.gov. Please note that the contact information provided here is solely for questions regarding this notice. Individuals seeking information about other CBP programs should contact the CBP National Customer Service Center at 877-227-5511, (TTY) 1-800-877-8339, or CBP website at https://www.cbp

SUPPLEMENTARY INFORMATION: CBP invites the general public and other Federal agencies to comment on the proposed and/or continuing information collections pursuant to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.). This process is conducted in accordance with 5 CFR 1320.8. Written comments and suggestions from the

public and affected agencies should address one or more of the following four points: (1) 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) the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) suggestions to enhance the quality, utility, and clarity of the information to be collected; and (4) suggestions to minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses. The comments that are submitted will be summarized and included in the request for approval. All comments will become a matter of public record.

Overview of This Information Collection

Title: Screening Requirements for Carriers.

OMB Number: 1651-0122.

Form Number: N/A.

Current Actions: CBP proposes to extend the expiration date and revise this information collection to allow electronic submission. There is no change to the information collected. Type of Review: Revision.

Affected Public: Carriers. Abstract: Section 273(e) of the Immigration and Nationality Act (8 U.S.C. 1323(e)) (the Act) authorizes the Department of Homeland Security