

National Latino Children's Institute.
 National Medical Association.
 National Minority AIDS Council.
 Quality Education for Minorities.
 Summit Health Institute for Research
 and Education, Inc.
 The Hispanic Serving Health
 Professions Schools.
 The National Alliance for Hispanic
 Health.

Dated: May 27, 2005.

Garth N. Graham,

*Deputy Assistant Secretary for Minority
 Health.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Data Collection for the Fourth
 National Incidence Study of Child
 Abuse and Neglect.

OMB No.: New Collection.

Description: The Department of
 Health and Human Services (HHS)
 intends to collect data for the next
 National Incidence Study of Child
 Abuse and Neglect (NIS). This will be
 the fourth cycle of this periodic study.
 NIS-1, mandated under Public Law
 (Pub. L.) 93-247 (1974), was conducted
 in 1979 and 1980, and reported in 1981.
 NIS-2, mandated under (Pub. L.) 98-457
 (1984), was conducted in 1986 and
 1987, and reported in 1988. NIS-3 was
 mandated under both the Child Abuse
 Prevention, Adoption, and Family
 Services Act of 1988 (Pub. L.) 100-294
 and the Child Abuse, Domestic
 Violence, Adoption, and Family
 Services Act of 1992 (Pub. L.) 102-295,
 was conducted between 1993 and 1995,
 and reported in 1996. NIS-4 mandated
 by the Keeping Children and Families
 Safe Act of 2003 (Pub. L.) 108-36, will
 gather data in 2005 and 2006, and be
 reported in 2008.

NIS is unique in that it goes beyond
 the abused and neglected children who
 come to the attention of the Child
 Protection Services (CPS) system. In
 contrast to the National Child Abuse
 and Neglect Data Systems (NCANDS),
 which rely solely on reported cases, the
 NIS design assumes that reported
 children represented only a portion of

the children who actually are
 maltreated. NIS estimates the scope of
 the maltreated child population by
 combining information about reported
 cases with data on maltreated children
 identified by professionals (called
 "sentinels") who encounter them during
 the normal course of their work in a
 wide range of agencies in representative
 communities. Sentinels are asked to
 remain on the lookout for children
 whom they believe are maltreated
 during the study reference period and to
 provide information about these
 children.

Children identified by sentinels and
 those whose alleged maltreatment is
 investigated by CPS during the same
 period are evaluated against
 standardized definitions, and only
 children who meet the study standards
 are used to develop the study estimates.
 The study estimates are couched in
 terms of numbers of maltreated
 children, with data unduplicated so that
 a given child is counted only once.
 Confidentiality of all participants is
 carefully protected through study
 procedures and with a Certificate of
 Confidentiality from the National
 Institutes of Health (NIH).

A nationally representative sample of
 122 counties has been selected and all
 125 local CPS agencies serving the
 selected counties have been identified.
 Plans have been developed to obtain
 data on cases investigated during the
 period, September 4, 2005 through
 January 3, 2006. Sentinels in the
 selected counties are being identified
 through samples of agencies in 11
 categories: County juvenile probation
 departments, sheriff (and/or state
 police) departments, public health
 departments, public housing
 departments, municipal police
 departments, hospitals, schools, day
 care centers, social service and mental
 health agencies, and shelters for
 bettered women or runaway/homeless
 youth. Over 1,700 sentinel agencies are
 being selected. Plans are being
 developed to identify staff in these
 agencies that have direct contact with
 children to serve as sentinels during the
 study by submitting data on maltreated
 children they encounter during the
 study reference period.

In addition to the main NIS-4 study
 to measure the incidence of maltreated
 children, two related surveys of
 participating CPS agencies will be
 conducted to enhanced the
 interpretability of the findings: (1) *The*

CPS Screening Records Survey will
 collect information on the CPS agencies'
 screening practices to understand the
 kinds of reports they would not accept
 for investigation but would instead
 screen out or refer for an alternative
 agency response. (The main NIS-4 will
 collect data from CPS agencies only on
 investigated children.) This survey will
 be conducted through telephone
 interviews with intake supervisors in
 the participating CPS agencies serving
 the NIS-4 counties; and (2) *The Survey
 CPS Structure and Policies* will collect
 information on the CPS agency context
 during NIS-4 to provide a basis for
 relating jurisdictional differences in the
 NIS incidence findings to the
 operational structure and practices of
 the local CPS agencies. This will be
 implemented through a mail survey to
 participating NIS-4 CPS agencies. The
 survey will be organized into four
 topical modules (covering
 administration, screening, investigation,
 and alternate response policies and
 practices) and the agencies will be asked
 to have agency staff with the
 appropriate expertise complete each
 module.

Respondents: Nationally
 Representative CPS Agencies and
 Nationally Representative Sentinel
 Agency Staff.

- The CPS Maltreatment Form will collect details from CPS agencies concerning the children and maltreatment events in a sample of cases and will be used in characterizing maltreated children and generating national estimates of their numbers in different categories of abuse and neglect.
- The CPS Summary Data Form will be completed on all non-sampled cases investigated by CPS during the reference period and will be used for unduplicating multiple records on the same child both within the CPS data and between the CPS and sentinel data. The CPS Summary Data Form data will be collected electronically whenever possible.
- The Sentinel Data Form will obtain details from sentinels concerning each maltreated child they encounter during the reference period.
- The *CPS Screening Records Survey* will be administered to CPS agencies as described above.
- The *Survey on CPS Structures and Policies* will be administered to CPS agencies as described above.

NIS-4 ANNUAL BURDEN HOUR ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
CPS Maltreatment Data Form	125	^a 80	^b .55	5,500
CPS Summary Forms, hard copy ^c	31	^d 1,056	^e .08	2,619
CPS Summary Forms, electronic ^c	94	1	20	^f 1,880
Sentinel Data Form	12,000	^g .8	^h .35	3,360
CPS Screening Records Survey	125	1	ⁱ 1	125
Survey on CPS Structures and Policies	125	1	^j 2.89	361

^a Estimated by dividing 10,000 (estimated number of sampled cases) by 125 (number of CPS agencies). The actual sample sizes within the CPS agencies may diverge from this average of 80.

^b Based on CPS workers' average estimate of 33 minutes per form.

^c Assumes that one-fourth of the 125 agencies will only be able to submit hard-copy forms while three-fourths will be capable of submitting the data electronically. (Note: electronic submission will be used with every agency that has the capability to do so.)

^d Based on NCANDS caseload data, we estimate that we will receive a total of 132,000 CPS Summary Forms, or an average of about 1,056 from each of the 125 agencies.

^e Based on CPS workers' average estimate of 5 minutes per form.

^f Based on an estimated 20 hours per agency for working out the specifications, programming, review, and documentation to produce the files with the summary form information.

^g Using the NIS-3 average of .8 form per recruited sentinel.

^h Based on sentinels' average estimate of 21 minutes per form.

ⁱ Based on simulated interviews conducted by contractor staff.

^j Based on the contractor's estimate of 2.25 hours for the administration, screening, and investigation modules (completed by 100 percent of agencies) and 1 hour for the alternative response module (completed by 64 percent of agencies, based on findings from the Local Agency Survey in the National Study of CPS Systems and Reforms Efforts).

Estimated Total Annual Burden Hours: 13,845.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: grjohnson@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Attn: Desk Officer for ACF. E-mail address: Katherine_T._Astrich@omb.eop.gov.

Dated: June 7, 2005.

Robert Sargis,

Reports Clearance Officer.

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Administration for Children and Families

Administration on Children, Youth and Families, Children's Bureau; Grants and Cooperative Agreements; Availability etc: Abandoned Infants Comprehensive Service Demonstration Projects

Funding Opportunity Title: Abandoned Infants Comprehensive Service Demonstration Projects.

Announcement Type: Initial.

Funding Opportunity Number: HHS-2005-ACF-ACYF-CB-0088.

CFDA Number: 93.551.

Due Date for Applications:

Application is due August 12, 2005.

Executive Summary: The purposes of this funding announcement are as follows: (1) To develop and implement programs of comprehensive community-based support services for the target population as described in Public Law 100-505, as amended; (2) to evaluate the implementation and outcomes of these comprehensive support services; and (3) to develop these programs as identifiable sites that other States/ locales seeking to implement comprehensive support services for this population can look to for guidance, insight, and possible replication.

I. Funding Opportunity Description

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support services for the target population as described in Public Law 100-505, as amended; (2) to evaluate the implementation and outcomes of these comprehensive support services; and (3) to develop these programs as identifiable sites that other States/ locales seeking to implement comprehensive support services for this population can look to for guidance, insight, and possible replication.

Definitions

Abandoned and Abandonment—The terms 'abandoned' and 'abandonment,' used with respect to infants and young children, mean that the infants and young children are medically cleared for discharge from acute-care hospital settings, but remain hospitalized because of a lack of appropriate out-of-hospital placement alternatives.

Acquired Immune Deficiency Syndrome—The term 'acquired immune deficiency syndrome' includes infection with the etiologic agent for such syndrome, any condition indicating that an individual is infected with such etiologic agent, and any condition arising from such etiologic agent.

Dangerous Drug—The term 'dangerous drug' means a controlled substance, as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802).

Natural Family—The term "natural family" shall be broadly interpreted to include natural parents, grandparents, family members, guardians, children residing in the household, and individuals residing in the household on a continuing basis who are in a care-