

human service programs and agencies in the areas of child welfare and independent living services for youth and young adults with foster care experience. Potential data collection efforts include conducting interviews, focus groups, and surveys with program directors (e.g., from programs serving youth with foster care experience and from their partner agencies) and current, past, or potential participants in programs serving youth with foster care experience (e.g., including potential participants who are included in comparison groups), as well as extracting administrative or other program data.

Under this generic clearance, information is meant to inform ACF activities and may be incorporated into documents or presentations that are

made public such as through conference presentations, websites, or social media. The following are some examples of ways in which we may share information resulting from these data collections: technical assistance (TA) plans, webinars, presentations, infographics, issue briefs/reports, project specific reports, or other documents relevant to the field, such as federal leadership and staff, grantees, local implementing agencies, researchers, and/or training/TA providers. We may also request information for the sole purpose of publication in cases where we are working to create a single source for users (clients, programs, researchers) to find information about resources such as services in their area, TA materials, different types of programs or systems

available, or research using ACF data. In sharing findings, we will describe the study methods and limitations regarding generalizability and as a basis for policy.

Following standard OMB requirements, OPRE will submit an individual request for each specific data collection activity under this generic clearance. Each request will include the individual instrument(s), a justification specific to the individual information collection, and any supplementary documents.

*Respondents:* Staff and administrators of programs serving youth and young adults with foster care experience; current, former, or potential participants in programs serving youth; and young adults with foster care experience.

**BURDEN ESTIMATES**

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)
Administrator Interviews .....	40	4	1.00	160
Staff Discussions and Focus Groups .....	80	4	1.50	480
Youth Discussions and Focus Groups .....	160	4	1.50	960
Youth Surveys .....	1,800	3	0.50	2,700
Administrative Data Extraction .....	10	4	4.00	160
Document Delivery .....	10	4	1.00	40

*Estimated Total Burden Hours:* 4,500.

*Authority:* Title IV–E of the Social Security Act, IV–E 477(g)(1–2), as amended by the Foster Care Independence Act of 1999.

**Mary B. Jones,**

*ACF/OPRE Certifying Officer.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Evaluation of Resources To Support the Identification and Care of Children With Prenatal Substance or Alcohol Exposure in the Child Welfare System (Office of Management and Budget #0970–0608)**

**AGENCY:** Children’s Bureau, Administration for Children and Families, Department of Health and Human Services.

**ACTION:** Request for public comments.

**SUMMARY:** The Children’s Bureau (CB), Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is proposing to collect data for an evaluation of a set of resources that are being developed to support the identification and care of children with prenatal substance or alcohol exposure in the child welfare system.

**DATES:** *Comments due within 60 days of publication.* In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above.

**ADDRESSES:** You can obtain copies of the proposed collection of information and submit comments by emailing [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). Identify all requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**  
*Description:* Materials to begin this information collection effort were initially approved in April 2023. The study is gathering data from end users of a toolkit of resources sponsored by the CB in collaboration with the Centers

for Disease Control and Prevention under an interagency agreement. The toolkit is intended to support child welfare agency staff in the identification and support of children living with prenatal exposure to alcohol and other substances. The data collected will be used in a formative evaluation of the toolkit, which will be guided by 3 research questions: (1) To what degree do agency staff find toolkit resource to be relevant and applicable to their work?; (2) To what degree do toolkit resources change agency staff attitudes and increase staff knowledge?; (3) What implementation approaches and organizational supports facilitate toolkit use by child welfare agencies? Data sources for this effort include 5 surveys that have been approved for use: (1) a survey to measure users’ reactions to the toolkit; (2) a survey of users’ attitudes toward prenatal alcohol exposure (PAE)-related issues; (3) a survey of users’ knowledge about PAE-related issues; and (4 and 5) two versions of a survey of transfer potential and perceived competence, which measures users’ sense of competence in PAE-related knowledge and skills and the extent to

which users believe they will transfer knowledge/skills to their work. One version of this instrument contains the full survey and will be administered after users have been exposed to the full toolkit and its resources. The second version contains a smaller selection of key items from the survey, tailored to collect information from users after their exposure to each of five key modules of the toolkit. Newly proposed data collection will include (6) one focus group to assess user perspectives on changes to practice as a result of

implementation and fit of the toolkit with the agency’s diversity, equity, and inclusion efforts. All data will be collected in 2024 over the course of a 6 to 9-month period.

*Respondents:* Child welfare professionals, including state and/or county-level directors of child welfare agencies; supervisors; program staff (e.g., investigation/intake, case management, foster care/adoption/permanency, etc.); staff working in specialist roles that align with toolkit resources (e.g., data/quality

improvement specialists); local or state agency managers involved in determining agency strategic plans and practice guidance (e.g., substance-exposed newborn program manager); training system lead staff.

**Annual Burden Estimates**

There are no updates to burden estimates for previously approved instruments. This request adds the burden for the one new focus group protocol on implementation.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Annual burden hours
Survey of reactions to the toolkit .....	32	1	.05	2
Survey of attitudes .....	32	2	.17	11
Survey of PAE-related knowledge .....	32	3	.27	26
Survey of transfer potential and perceived competency .....	32	1	.09	3
Module-specific transfer potential and perceived competency items .....	32	5	.03	5
Focus group protocol on implementation .....	28	1	1.5	42

*Estimated Total Annual Burden Hours:* 89.

*Comments:* The Department specifically requests comments on (a) whether the proposed collection of information is 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

*Authority:* This information collection is related to and funded by CB, is authorized by the Child Abuse Prevention and Treatment Act Reauthorization Act, 42 U.S.C. 5105, (2010), and is being conducted by CB. This information collection complies with the statutory requirement to carry out research designed to provide information needed to improve the well-being of victims of child abuse or neglect. Specifically, this information collection complies with the requirement for evaluation of practices and programs to improve activities such as identification, screening, medical diagnosis, forensic diagnosis, health evaluations, and services, including activities that promote collaboration between (1) the child protective service

system; and (2)(i) the medical community, including providers of mental health and developmental disability services; and (ii) providers of early childhood intervention services and special education for children who have been victims of child abuse or neglect.

**Mary B. Jones,**  
*ACF/OPRE Certifying Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Testing Identified Elements for Success in Fatherhood Programs (New Collection)**

**AGENCY:** Office of Planning, Research, and Evaluation, Administration for Children and Families, United States Department of Health and Human Services.

**ACTION:** Request for public comments.

**SUMMARY:** The Administration for Children and Families (ACF) Office of Planning, Research, and Evaluation (OPRE) launched the Testing Identified Elements for Success in Fatherhood Programs (Fatherhood TIES) project in 2022. Using a mix of research methods, this study will identify and test the “core components” of fatherhood

programs in any effort to identify which core components are most effective at improving the lives of fathers who participate in fatherhood programs and their children. The study will ultimately include an implementation and an impact study.

**DATES:** *Comments due within 60 days of publication.* In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above.

**ADDRESSES:** You can obtain copies of the proposed collection of information and submit comments by emailing *OPREinfocollection@acf.hhs.gov*. Identify all requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**  
*Description:* The proposed information collection request is to obtain consent to participate in the study, collect additional baseline information from program participants, and initial implementation study data. A future request will cover the remaining data collection materials associated with the impact and implementation studies. Core components are the essential functions, principles, and elements that are judged as being necessary to produce positive outcomes. Fatherhood programs usually offer workshops and case management services for fathers to provide, for example, parenting strategies to strengthen their relationships with their children, help finding a steady job,