

**ADDRESSES:** 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](http://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. You can also obtain copies of the proposed collection of information by emailing [OPREinfocollection@acf.hhs.gov](mailto:OPREinfocollection@acf.hhs.gov). Identify all requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* The Racial and Ethnic Disparities in Human Services Analysis Execution project is proposing to collect information for a qualitative study to explore how families of different ethnic and racial backgrounds have experienced changes that one state made to TANF policies and services in response to the COVID–19 pandemic.

We will explore policies such as job-search and other participation requirements, virtual resources and services, and the provision of tablet computers to TANF participants.

We will collect information at the state level and from three purposively selected sites in one state, selected to represent the racial and ethnic diversity within the state. The state-level data collection will include (1) TANF program administrators and (2) representatives from the program partnering with the state in the provision of tablet computers to TANF program participants. Information collection at each of the three sites will include semi-structured interviews or focus groups with: (1) TANF program administrators, frontline staff, and participants; and (2) community partner organizations that serve TANF-eligible families and individuals served by those organizations. Site visits will be conducted in-person or virtually,

depending on the state of the COVID–19 pandemic at the time of the site visits.

This study is part of a larger project to help ACF identify racial and ethnic disparities in related to the delivery of human services.

This study is intended to present an internally-valid description of how different racial and ethnic groups experience TANF policies, practices, and service delivery in one state at selected sites, not to promote statistical generalization to other sites or service populations.

*Respondents:* (1) State and regional TANF agency administrators, (2) TANF frontline staff at the site-level, (3) staff at community agencies that serve TANF-eligible families, (4) staff from the computer tablet program and from program partner organizations, (5) TANF participants, (6) tablet program participants, and (7) individuals who are eligible for TANF but not enrolled.

**ANNUAL 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) | Annual burden (in hours) |
|--|---|--|--|-------------------------|--------------------------|
| Instrument A: State and Regional TANF Administrators Guide (Interviews) .....        | 8   | 1  | 1                                      | 8                       | 4                        |
| Instrument B: Local Frontline Staff Guide (Interviews) .....                         | 10  | 1  | 1                                      | 10                      | 5                        |
| Instrument B: Local Frontline Staff Guide (Focus Groups) .....                       | 10  | 1  | 1.5                                    | 15                      | 8                        |
| Instrument C: Community-Based Organizations Guide (Interviews) .....                 | 6   | 1  | 1                                      | 6                       | 3                        |
| Instrument D: Tablet Providers and Program Partners Guide (Interviews) .....         | 6   | 1  | 1                                      | 6                       | 3                        |
| Instrument E: TANF Participants Guide (Interviews) .....                             | 40  | 1  | 1                                      | 40                      | 20                       |
| Instrument E: TANF Participants Guide (Focus Groups) ....                            | 20  | 1  | 1.5                                    | 30                      | 15                       |
| Instrument F: Tablet Program Participants Guide (Focus Groups) .....                 | 10  | 1  | 1.5                                    | 15                      | 8                        |
| Instrument G: Individuals Eligible but Not Receiving TANF Guide (Interviews) .....   | 15  | 1  | 1                                      | 15                      | 8                        |
| Instrument G: Individuals Eligible but Not Receiving TANF Guide (Focus Groups) ..... | 15  | 1  | 1.5                                    | 23                      | 12                       |

*Estimated Total Annual Burden Hours:* 86.

*Authority:* Section 413 of the Social Security Act, as amended by the FY 2017 Consolidated Appropriations Act, 2017 (Pub. L. 115–31).

**Mary B. Jones,**

*ACF/OPRE Certifying Officer.*

[FR Doc. 2022–20571 Filed 9–21–22; 8:45 am]

**BILLING CODE 4184–09–P**

**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 (New Collection)**

**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, Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), 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 the Paperwork Reduction Act (PRA) 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:* The proposed information collection effort will gather data from end users of a toolkit of resources sponsored by the Children’s Bureau 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 three 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? Proposed data sources for this effort include five surveys: (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. All data will be collected over the course of 6–9 months in 2023.

*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. All data will be collected over the course of 6–9 months in 2023.

**ANNUAL BURDEN ESTIMATES**

| Instrument  | Total number of respondents | Total number of responses per respondent | Average burden hours per response | Total/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                         |

*Estimated Total Annual Burden Hours:* 47.

*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:* Child Abuse Prevention and Treatment Act Reauthorization Act, 42 U.S.C. 5105, (2010).

**Mary B. Jones,**  
*ACF/OPRE Certifying Officer.*

[FR Doc. 2022–20546 Filed 9–21–22; 8:45 am]

**BILLING CODE 4184–29–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA–2022–N–0008]

**Advisory Committee; Arthritis Advisory Committee; Renewal**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice; renewal of Federal advisory committee.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the renewal of the Arthritis Advisory Committee by the Commissioner of Food and Drugs (the Commissioner). The Commissioner has determined that it is in the public interest to renew the Arthritis Advisory Committee for an additional 2 years beyond the charter expiration date. The new charter will be in effect until the April 5, 2024, expiration date.

**DATES:** Authority for the Arthritis Advisory Committee will have expired on April 5, 2022, unless the Commissioner had formally determined that renewal is in the public interest.

**FOR FURTHER INFORMATION CONTACT:**

Jessica Seo, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 31, Rm. 2417, Silver Spring, MD 20993–0002, 301–796–7699, [AAC@fda.hhs.gov](mailto:AAC@fda.hhs.gov).

**SUPPLEMENTARY INFORMATION:** Pursuant to 41 CFR 102–3.65 and approval by the Department and Health and Human Services and by the General Services Administration, FDA is announcing the renewal of the Arthritis Advisory Committee (the Committee). The Committee is a discretionary Federal advisory committee established to provide advice to the Commissioner. The Committee advises the Commissioner or designee in discharging responsibilities as they relate to helping to ensure safe and effective drugs for human use and, as required, any other product for which the FDA has regulatory responsibility.

The Committee reviews and evaluates data concerning the safety and effectiveness of marketed and investigational human drug products for use in the treatment of arthritis, rheumatism, and related diseases, and