



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. 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.

[FR Doc. 2023-15730 Filed: 7/24/2023 8:45 am; Publication Date: 7/25/2023]