

compelling story, a headline, and up to three key bullet points. The intent of this template is to guide the development of bullets and headlines describing successes, impacts, and other funding-related activities.

The goals of these leads are shaped by four topics:

1. Showcasing the nature of the preparedness and response challenge: Something observed at ground level that clearly illustrates why preparedness and response work is necessary.

2. Illustrating the public health contribution: Examples that prove public health preparedness and

response not only makes a difference, but also describe the unique approach public health brings to emergency response.

3. Supporting the evidence-base: Examples that compliment qualitative research on evidence based interventions.

4. Demonstrating return on investment: Leads describing awareness of how funds are used and demonstrating fiscal responsibility and transparency. OPHPR representatives intend to collect story leads from a variety of sources including CDC Field Staff, state health officers, local health

department directors, preparedness planners, non-public health preparedness and response partners, the public and volunteer group members. The developers plan to leverage existing communications channels if the leads are used or developed into more lengthy stories. Just as stories are used currently, leads from this template will be potentially used in congressional inquiries, leadership presentations, annual reports, and CDC OPHPR Web sites.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	No. of respondents	No. of responses per respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
CDC Field Staff, state health officers, local health department directors, preparedness planners, non-public health preparedness and response partners, the public and volunteer group members.	"So What? Telling a Compelling Story".	100	1	30/60	50
CDC Field Staff, state health officers, local health department directors, preparedness planners, non-public health preparedness and response partners, the public and volunteer group members.	So What? Telling a Compelling Story follow-up questions.	30	1	1.5	45
Total					95

Ron A. Otten,

Director, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

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BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Permanency Innovations Initiative Evaluation: Phase 2.

OMB No.: 0970-0408.

Description: The Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS) intends to collect data for an evaluation of the Permanency Innovations Initiative (PII). This 5-year

initiative, funded by the Children's Bureau (CB) within ACF, is intended to build the evidence base for innovative interventions that enhance well-being and improve permanency outcomes for particular groups of children and youth who are at risk for long-term foster care and who experience the most serious barriers to timely permanency. The CB funded six grantees to identify local barriers to permanent placement and implement innovative strategies that mitigate or eliminate those barriers and reduce the likelihood that children will remain in foster care for 3 years or longer. In addition, evaluation plans were developed to support rigorous site-specific and cross-site studies to document the implementation and effectiveness of the grantees' projects and the initiative overall.

Data collection for the PII evaluation includes a number of components being launched at different points in time. Phase 1 included data collection for a cross-site implementation evaluation

and site-specific evaluations of two PII grantees (Washoe County, Nevada, and the State of Kansas). Phase 1 data collection was approved in August 2012 (OMB #0970-0408). Phase 2 includes data collection for site-specific evaluations of two PII grantees: Illinois Department of Children and Family Services (DCFS); and the Los Angeles Gay and Lesbian Center's Recognize Intervene Support Empower (RISE) project. A third phase of the study will include data collection for a cross-site cost study, additional data collection components for the RISE project, and data collection for California Department of Social Services' California Partnership for Permanency (CAPP) project. Data for the evaluations will be collected through surveys of children, youth, foster parents, guardians, biological parents, and caseworkers and other agency staff.

Respondents: Children/youth and their parents or foster caregivers, caseworkers and other agency staff.

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
DCFS Biological Parent Study Contact Form	1	173	.1	17

ANNUAL BURDEN ESTIMATES—Continued

Instrument	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
DCFS Biological Parent Interview	173	2	.25	86
DCFS Youth and Foster Parent Study Contact Form	1	228	.1	23
DCFS Foster Parent Interview	228	2	.75	342
DCFS Youth Interview	228	2	.75	342
DCFS burden				810
RISE Staff Pre-Test	157	1	.25	39
RISE Staff Post-Test	157	1	.25	39
RISE burden				78

Estimated Total Annual Burden Hours: 888

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: OPRE Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: OPREinfocollection@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, Email: OIRA_SUBMISSION@OMB.EOP.GOV, Attn: Desk Officer for the Administration for Children and Families.

Steven M. Hanmer,

OPRE Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Title: Parents and Children Together (PACT) Evaluation.

OMB No.: 0970-0403.

Description: The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing data collection activity as

part of the Parents and Children Together (PACT) Evaluation. The objective of the PACT evaluation is to document and provide initial assessment of selected Responsible Fatherhood and Healthy Marriage grant programs that were authorized under the 2010 Claims Resolution Act. This information will be critical to informing decisions related to future investments in programming as well as the design and operation of such services.

PACT is utilizing three major, interrelated evaluation strategies: Impact evaluation; implementation evaluation; and qualitative evaluation. To collect data for these strategies, four instruments have been approved to-date, and 14 new instruments are under review as of the publish date of this notice.

Instruments approved to-date:

(1) Selecting Study Grantees (discussions with program and partner organization staff)—APPROVED April 20, 2012.

(2) Introductory Script (for RF program staff to discuss with program applicants)—APPROVED October 31, 2012.

(3) Baseline Survey (for RF study participants)—APPROVED October 31, 2012.

(4) RF study Management Information System (MIS)—APPROVED October 31, 2012.

Instruments under review at publish date of this notice:

(5) Introductory Script (for HM program staff to discuss with program applicants).

(6) Baseline Survey (for HM study participants).

(7) HM study Management Information System (MIS) (8) Semi-structured interview topic guide (for program staff).

(9) On-line survey (for program staff).

(10) Telephone interview guide (for program staff at referral organizations).

(11) On-line Working Alliance Inventory (for program staff and participants).

(12) Focus group discussion guide (for program participants).

(13) Telephone interview guide (for program dropouts).

(14) In-person, in-depth interview guide (for program participants).

(15) Telephone check-in guide (for program participants).

(16) Semi-structured interview topic guide (for program staff).

(17) Focus group discussion guide (for program participants).

(18) Questionnaire (for program participants in focus groups).

This 60-Day **Federal Register** Notice covers two new instruments:

(19) Follow-up Survey (for RF study participants).

(20) Follow-up Survey (for HM study participants).

Respondents: Program applicants, program participants, program staff, and staff at referral agencies.

Annual Burden Estimates

Some burden has already been approved for this study, and the instruments are still in use.

ANNUAL BURDEN—ALREADY APPROVED

Evaluation component	Total annual burden hours
Site Selection	50
Impact Study	4235
Total	4285

Some burden is currently under review, as of the date of this publication.

ANNUAL BURDEN—CURRENTLY UNDER REVIEW

Evaluation component	Total annual burden hours
Impact Study	8731
Implementation/Qualitative Study	1000
Total	8831