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, 725 17th Street, NW., Washington, DC 20503, Attn: Desk Officer for ACF.

Dated: February 6, 2002.

Bob Sargis,

Reports Clearance Officer.

[FR Doc. 02–3350 Filed 2–11–02; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: April 2002 Current Population Survey Supplement on Child Support.

OMB No.: 0992–0003.

Description: Collection of these data will assist legislators and policymakers in determining how effective their policymaking efforts have been over time in applying the various child support legislation to the overall child support enforcement picture. This information will help policymakers determine to what extent individuals on welfare would be removed from the welfare rolls as a result of more stringent child support enforcement efforts.

Respondents: Individuals and households.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Child Support Survey	47,000	1	0.0246	1136
Estimated Total Annual Burden Hours				1136

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer.

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, 725 17th Street, NW., Washington, DC 20503, Attn: Desk Officer for ACF.

Dated: February 5, 2002.

Bob Sargis,

Reports Clearance Officer.

[FR Doc. 02–3351 Filed 2–11–02; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Effective and Innovative Practices in Child Abuse and Neglect Prevention.

OMB No.: New collection.

Description: With increasing understanding and recognition of the individual and family risk factors that increase the likelihood of child maltreatment, particularly since the 1990s, the role and importance of prevention has been vigorously promoted. The development, funding, and implementation of programs and initiatives with a specific focus on the prevention of child maltreatment, as a consequence, has blossomed.

Child abuse and neglect prevention today includes a broad spectrum of programs and services, including parent education, home visitation, respite care, support groups, mentoring, child personal safety education, family resource centers, media campaigns, and policy advocacy campaigns. Programs may target the general population with the goal of facilitating prevention through awareness, and/or may target specific populations at risk for child abuse/neglect with the goal of ameliorating the factors placing them at risk. However, the precise nature of these efforts—and their effectiveness—is not yet well understood, and information has not been systematically documented. As programs have proliferated in both type and number, the need for information on program effectiveness becomes more acute.

Data collection for this project will rely on a nomination process that will identify programs and initiatives operating around the country in two major categories, including (1) Effective programs, which demonstrate or report positive prevention outcomes using experimental or quasi-experimental research methods and (2) Innovative programs, which have overcome a critical challenge or obstacle using a particularly creative method or approach. By identifying and showcasing effective and innovative practices, this project will disseminate critical information to local jurisdictions that are making decisions about allocating and/or targeting resources for program development and implementation.

Respondents: The universe of potential nominations consists of the child abuse and neglect professional community in its entirety, which includes practitioners, service providers, policy makers in state and local agencies, researchers, advocates, and other affiliated parties. A nomination instrument has been designed, with input from a diverse group of experts, that specifies rules and provides detailed guidance on procedures for submission.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Track 1 Nominations: Effective Programs	10–30	1	6	60–180
Track II Nominations: Innovative Programs	150–200	1	4	600–800
Estimated Total Annual Burden Hours				660–980

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer.

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, 725 17th Street, NW., Washington, DC 20503, Attn: Desk Officer for ACF.

Dated: February 6, 2002.

Bob Sargis,

Reports Clearance Officer.

[FR Doc. 02–3353 Filed 2–11–02; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 01B–0431]

International Conference on Harmonisation; Draft Recommendations for the Revision of the Permitted Daily Exposures for Two Solvents, N-Methylpyrrolidone and Tetrahydrofuran, According to the Maintenance Procedures for the Guidance Q3C Impurities: Residual Solvents; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of draft recommendations for the revision of the permitted daily exposures (PDE) for two solvents, n-methylpyrrolidone (NMP) and tetrahydrofuran (THF), according to the maintenance procedures for guidance for industry entitled ''Q3C Impurities: Residual Solvents.'' The draft recommendations were prepared under the auspices of the International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH). This document also describes procedures for proposing future revisions to the PDE.

DATES: Submit written or electronic comments on the draft recommendations by March 14, 2002.

ADDRESSES: Submit written comments on the draft recommendations to the Dockets Management Branch (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic comments to http://www.fda.gov/dockets/ecomments. Submit written requests for single copies of these draft recommendations to the Division of Drug Information (HFD–240), Center for Drug Evaluation and Research, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, or the Office of Communication, Training and Manufacturers Assistance (HFM–40), Center for Biologics Evaluation and Research, 1401 Rockville Pike, Rockville, MD 20852–1448, FAX 888–CBERFAX. Send two self-addressed adhesive labels to assist the office in processing your requests. See the **SUPPLEMENTARY INFORMATION** section for electronic access to documents and maintenance procedures.

FOR FURTHER INFORMATION CONTACT:

Regarding the guidance: Robert Osterberg, Center for Drug Evaluation and Research (HFD–520), Food and Drug Administration, 5600 Fishers Lane,Rockville, MD 20857, 301–827–2120.

Regarding the ICH: Janet J. Showalter, Office of International Programs (HFG–1),Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–0865.

SUPPLEMENTARY INFORMATION:

I. Background

In recent years, many important initiatives have been undertaken by regulatory authorities and industry associations to promote international harmonization of regulatory requirements. FDA has participated in many meetings designed to enhance harmonization and is committed to seeking scientifically based harmonized technical procedures for pharmaceutical development. One of the goals of harmonization is to identify and then reduce differences in technical requirements for drug development among regulatory agencies.

ICH was organized to provide an opportunity for tripartite harmonization initiatives to be developed with input from both regulatory and industry representatives. FDA also seeks input from consumer representatives and others. ICH is concerned with harmonization of technical requirements for the registration of pharmaceutical products among three regions: The European Union, Japan, and the United States. The six ICH sponsors are the European Commission; the European Federation of Pharmaceutical Industries Associations; the Japanese Ministry of Health, Labour, and Welfare; the Japanese Pharmaceutical Manufacturers Association; the Centers for Drug Evaluation and Research and Biologics Evaluation and Research, FDA; and the Pharmaceutical Research and Manufacturers of America. The ICH Secretariat, which coordinates the preparation of documentation, is provided by the International Federation of Pharmaceutical Manufacturers Associations (IFPMA).

The ICH Steering Committee includes representatives from each of the ICH sponsors and the IFPMA, as well as observers from the World Health Organization, the Canadian Health Protection Branch, and the European Free Trade Area.

In accordance with FDA's good guidance practices (GGPs) regulation (65 FR 56468, September 19, 2000), this document is being called a guidance, rather than a guideline.