communication; or developing a state youth coordinating council.

- State or local agencies might partner with employers to support low-income working families by matching the employer’s provision of paid release time to take job-related classes. Agencies could also partner with employers to offer lunchtime classes on such topics as choosing a child care provider, conflict resolution, or repairing bad credit.

Long-Term Care Services and Resources

- States interested in experimenting with “consumer-directed” approaches to home and community-based long-term care services could undertake a variety of innovative practices, for example: developing the specialized infrastructure needed for consumers to recruit and manage home care workers directly, without having to take on the business-related tasks of issuing paychecks and making required tax filings; providing consumer-directed service options within managed care structures; providing options for particular constituencies, such as elders with Alzheimer’s disease and their families; or growing small pilot programs to scale and adapting those originally funded with state revenues to conform to Medicaid requirements.

- States could develop campaigns to make residents aware of their risk for long-term care and their options for planning ahead, including purchasing private long-term care insurance. States could use their existing aging infrastructure to ensure that persons nearing retirement age are offered the resources and assistance necessary for successful planning, or they could use the grant resources to investigate the best and most cost-effective mechanisms for educating citizens so that future resources will be well targeted.

- Allegations of poor quality, abuse, and neglect in nursing homes are giving rise to an increasing number of private lawsuits and, as a result, liability insurance premiums for facilities in a number of states have gone sky high. States may choose to apply for state innovation grants to develop working partnerships with private liability insurers to identify “best practices” for nursing homes that, if adopted by facilities, can be linked to liability premium discounts.

- States, providers, consumers and others are increasingly struggling with a serious crisis in recruiting and retaining a qualified, committed workforce to provide long-term care services in institutional and home and community-based settings. States may opt to use state innovation funds to develop and implement programs to address the shortage. For example, states could experiment with providing new training programs, establishing alternative approaches to management and supervision, improving benefits for direct care workers, or creating career ladders.


William F. Rauch,
Principal Deputy Secretary for Planning and Evaluation.

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BILLING CODE 4120–01–P
regarding the quality and effectiveness of health care.

Section 911(a), part B, Title IX, Healthcare Research and Quality Act of 1999, requires in part that AHRQ, in collaboration with experts from the public and private sectors, identify methods or systems to assess health care research results, particularly “methods or systems to rate the strength of the scientific evidence underlying health care practice, recommendations in the research literature, and technology assessments.” The Agency is to make methods or systems for rating evidence, widely available. To inform its response to this mandate, AHRQ invites public comments on the RTI/UNC EPC study noted above.


Carolyn M. Clancy,
Acting Director.
[FR Doc. 02–13152 Filed 5–23–02; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention
[60Day–02–56]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 498–1210. Comments are invited 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) ways to enhance 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. Send comments to Anne O’Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

Evaluation of Customer Satisfaction of the Centers for Disease Control and Prevention (CDC) and Agency for Toxic Substances and Disease Registry (ATSDR) Internet Home Page and Links

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John Moore,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.
[FR Doc. 02–13040 Filed 5–23–02; 8:45 am]
BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Public Law 92–463) of October 6, 1972, that the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect, Centers for Disease Control and Prevention of the Department of Health and Human Services, has been renewed for a 2-year period extending through May 17 2004.

For further information, contact Dixie E. Snider, Jr., M.D., Acting Executive Secretary, National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect, 1600 Clifton Road, NE, m/s D–50, Atlanta, Georgia 30333. Telephone 404/639–7240, or fax 404/639–7341.

The Director, Management Analysis and Services Office, has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.


John Burckhardt,
Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.
[FR Doc. 02–13071 Filed 5–23–02; 8:45 am]
BILLING CODE 4163–18–P