linkages, and local policy or economic factors. The design and implementation elements will contextualize the outcomes study's findings and serve as important sources of insight regarding the startup, operation, and sustainability strategies for child support-led employment services. Key information collection activities for the implementation study will include:

- MIS data for participants who consent to be in the study to understand participant characteristics and how they responded to NextGen services
- Semi-structured interviews with child support staff and staff from partner organizations
- Semi-structured interviews with program participants to learn about their experiences in the NextGen program

2. *Outcomes study.* The goal of the outcomes study is to measure and assess relevant outcomes, including changes in employment and earnings, and child support payment amounts and consistency. Child support administrative data will be used to obtain outcomes information about NextGen participants' child support orders, payments, child support debt, and enforcement history during the 12 months before and after enrollment. Data from the National Directory of New Hires will be collected to report outcomes on employment and earnings for all participants. Other activities include collecting and analyzing baseline data about NextGen participants from the MIS who consent to be in the evaluation.

This 30-Day Notice covers the following data collection activities:

- MIS to track program enrollment, baseline information, and program participation
- Staff and community partner interview topic guide
- Participant interview topic guide

Respondents: Respondents for this information collection include grantee and tribal waiver staff and partners, and study participants. Specific respondents per instrument are outlined in the burden table below.

Annual Burden Estimates

Data collection is expected to take place over a 3-year period and annual burden has been calculated to reflect this timeline. ACF will submit an extension request to OMB when necessary, prior to the initial expiration date.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
MIS to track program participation	5,400	1	1.5	8,100	2,700
Staff and community partner interview topic guide	100	1	1.00	100	33
Participant interview topic guide	100	1	1.00	100	33
Estimated Total Annual Burden Hours					2,766

Authority: 42 U.S.C. 651 *et seq.* and 42 U.S.C. 1315.

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–14279 Filed 7–15–26; 8:45 am]

BILLING CODE 4184–41–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0426]

Submission for Office of Management and Budget Review; Child and Family Services Plan, Annual Progress and Services Report, and Annual Budget Expenses Request and Estimated Expenditures (Child and Family Services–101)

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) is requesting a 3-year extension of the collection of information under the Child and Family Services Plan (CFSP), the Annual Progress and Services Report (APSR), and the Annual Budget Expenses Request and Estimated Expenditures (Child and Family Services (CFS)–101) collection (Office of Management and Budget #: 0970–0426, expiration July 31, 2026). There are minor changes to the CFS–101 form and changes to the way the information is collected in narrative form to reduce burden and decrease duplicative reporting. The annual collection of Monthly Caseworker Visit Data has been discontinued in the CFSP/APSR and data from Care Analysis and Reporting System will be used instead.

DATES: Comments due August 17, 2026.

ADDRESSES: The public may view and comment on this information collection request at: *https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202607-0970-007.* You can also obtain copies of the proposed collection of information by emailing *infocollection@acf.hhs.gov.* Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: Currently, under title IV–B, subparts 1 and 2 of the Social Security Act (the Act), states, territories, and tribes are required to submit a CFSP (45 CFR 1357.15(a)(1)). The CFSP outlines activities the state, tribe, or territory will carry out in administering programs and services to promote the safety, permanency, and well-being of children and families, including, as applicable, those activities conducted under the John H. Chafee Foster Care Program for Successful Transition to Adulthood (section 477 of the Act) and the state grant authorized by the Child Abuse Prevention and Treatment Act. By June 30 of each year, states, territories, and tribes are also required to submit an APSR and a financial report called the CFS–101. The APSR is a yearly report that discusses progress made by a state, territory, or tribe in accomplishing the goals and objectives cited in its CFSP (45 CFR 1357.16(a)). The APSR contains updated information about service needs and organizational capacities throughout the 5-year plan period and includes information on the use of other grant programs where annual reporting is required. The CFS–101 has 3 parts. Part I is an annual budget request for the upcoming fiscal year (FY). Part II includes a summary of planned expenditures by program area for the upcoming FY, the estimated number of individuals or families to be served, and the geographical service area. Part III includes actual expenditures by program area, numbers of families and individuals served by

program area, and the geographic areas served for the last complete FY.

The Supporting America's Children and Families Act, Public Law 118–258, was signed into law on January 4, 2025. This law reauthorizes and amends title IV–B programs. The new title IV–B reporting requirements will be added to the CFSP/APSR instructions. New requirements under title IV–B, subpart 3 requires that CB reduce administrative burden on the title IV–B program to eliminate duplication and streamline reporting requirements to reduce the number of hours required for compliance by at least 15 percent in coordination with activities required under the Paperwork Reduction Act. CB has already begun these activities to gather input to streamline reporting and reduce burden.

Respondents: Currently, states, territories, and tribes must complete the CFSP, APSR, and CFS–101. There are approximately 180 tribal entities that currently receive IV–B funding. There are 53 states (including the Commonwealth of Puerto Rico, the District of Columbia, and the Virgin Islands) that must complete the CFSP, APSR, and CFS–101.

Annual Burden Estimates: Burden estimates have been adjusted to reflect the updates to the APSR and the CFSP and the elimination of the caseworker visit data. The average burden per response for the APSR has been reduced from 82 hours to 50 hours and for the CFSP it has been reduced from 123 hours to 90 hours. Overall, this is a 48 percent reduction in burden associated with this information collection.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
APSR	233	3	50	34,950	11,650
CFSP	47	1	90	4,230	1,410
CFS–101, Part I, Part II, and III	233	3	5	3,495	1,165
Estimated Total Annual Burden Hours					14,225

Authority: Title IV–B, subparts 1, 2, and 3 of the Social Security Act (the Act), and title IV–E, section 477 of the Act; sections 106 and 108 of CAPTA (42 U.S.C. 5106a. and 5106d.); and Supporting America's Children and Families Act, Pub. L. 118–258, signed into law on January 4, 2025.

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–14304 Filed 7–15–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2026–N–7606]

Process for FDA Data Requests To Inform Certain Over-the-Counter Monograph Drug Activities; Procedure

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA or Agency) is announcing the process for FDA to issue Data Requests for the submission of data from the public to help inform certain future over-the counter (OTC) monograph drug activities, including development of FDA-initiated proposed orders to modify conditions described in an OTC monograph. FDA is issuing this notice to inform the public and interested parties of the process that FDA is implementing to issue these Data Requests.

DATES: The announcement of the process is published in the **Federal Register** on July 16, 2026.

FOR FURTHER INFORMATION CONTACT: Michael Boblitz, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Silver Spring, MD 20993–002, 301–837–7651.

SUPPLEMENTARY INFORMATION:

I. Background

Section 505G of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 355h) sets forth the framework for the regulation of OTC monograph drugs.[1] OTC monograph drugs may be marketed without a new drug application approved under section 505 of the FD&C Act (21 U.S.C. 355) if they meet the requirements of section 505G of the FD&C Act, as well as other applicable requirements. An OTC monograph set forth in a final order under section 505G for a therapeutic category of drugs describes the conditions, such as active ingredients, uses (indications), doses, routes of administration, labeling, and testing, under which OTC monograph drugs within such therapeutic category are generally recognized as safe and effective (GRASE) for their intended use. The conditions described in an OTC monograph may be amended, revoked, or otherwise modified in accordance with a final order issued under section 505G(b) of the FD&C Act.[2] Either FDA or a requestor[3] can initiate the order process in section 505G(b). A requestor can initiate the order process by submitting an OTC monograph order request[4] with respect to certain drugs, classes of drugs, or combinations of drugs.[5] FDA may opt to announce Data Requests described in this notice to help inform certain future OTC monograph drug activities, including development of FDA-initiated proposed orders.

II. Procedures for Data Requests

When FDA seeks data and information from the public to help inform certain OTC monograph drug activities, such as development of a potential FDA-initiated proposed order to add a GRASE condition to an OTC monograph, FDA intends to announce a Data Request on the OTC Monographs@FDA portal at *https://www.accessdata.fda.gov/scripts/cder/omuf/.* The Data Request will include instructions on the submission of the data and information to FDA, including

[1] Per section 744L(5) of the FD&C Act, an ''OTC monograph drug'' is defined as a nonprescription drug without an approved new drug application which is governed by the provisions of section 505G.

[2] Under section 505G(b)(1) of the FD&C Act, ''The Secretary may, on the initiative of the Secretary or at the request of one or more requestors, issue an administrative order determining whether there are conditions under which a specific drug, a class of drugs, or a combination of drugs, is determined to be . . . (i) not subject to section 503(b)(1) [*i.e.,* nonprescription]; and (ii) generally recognized as safe and effective under section 201(p)(1)''.

[3] Under section 505G(q)(3) of the FD&C Act (21 U.S.C. 355h(q)), the term *requestor* refers to any person or group of persons marketing, manufacturing, processing, or developing an OTC monograph drug.

[4] An OTC monograph order request means a request for an order submitted under section 505G(b)(5) of the FD&C Act (see section 744L(7) of the FD&C Act).

[5] See section 505G(b)(5) of the FD&C Act.