

73.3580 adopted in the 2020 Public Notice Second Report and Order, did not necessitate changes to Schedules 314 or 315, nor did they affect the substance, burden hours, or costs of completing the forms. The rule changes did, however, reduce burdens and costs associated with filing the application.

Federal Communications Commission.

**Marlene Dortch,**

*Secretary, Office of the Secretary.*

[FR Doc. 2023–13778 Filed 6–27–23; 8:45 am]

**BILLING CODE 6712–01–P**

## FEDERAL RESERVE SYSTEM

### Change in Bank Control Notices; Acquisitions of Shares of a Savings and Loan Holding Company

The notificants listed below have applied under the Change in Bank Control Act (“Act”) (12 U.S.C. 1817(j)) and of the Board’s Regulation LL (12 CFR 238.31) to acquire shares of a savings and loan holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board’s Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than July 13, 2023.

*A. Federal Reserve Bank of Chicago* (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690–1414. Comments can also be sent electronically to

[Comments.applications@chi.frb.org](mailto:Comments.applications@chi.frb.org):

1. *PyraMax Bank, FSB Employee Stock Ownership Plan Trust, Greenfield, Wisconsin; the Principal Trust Company, as trustee, Wilmington, Delaware; to acquire voting shares of 1895 Bancorp of Wisconsin, Inc., and thereby indirectly acquire voting shares*

*of PyraMax Bank, F.S.B., both of Greenfield, Wisconsin.*

Board of Governors of the Federal Reserve System.

**Michele Taylor Fennell,**

*Deputy Associate Secretary of the Board.*

[FR Doc. 2023–13749 Filed 6–27–23; 8:45 am]

**BILLING CODE P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Meeting for Software Developers on the Common Formats for Patient Safety Data Collection

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), Department of Health and Human Services (HHS).

**ACTION:** Notice of public meeting.

**SUMMARY:** AHRQ coordinates the development of sets of standardized definitions and formats (Common Formats) that make it possible to collect, aggregate, and analyze uniformly structured information about health care quality and patient safety for local, regional, and national learning. The Common Formats include technical specifications to facilitate the collection of electronically comparable data by Patient Safety Organizations (PSOs) and other entities. Additional information about the Common Formats can be obtained through AHRQ’s PSO website at <https://psa.ahrq.gov/common-formats> and the PSO Privacy Protection Center’s website at [https://www.psoppc.org/psoppc\\_web/publicpages/commonFormatsOverview](https://www.psoppc.org/psoppc_web/publicpages/commonFormatsOverview). The purpose of this notice is to announce a meeting to discuss implementation of the Common Formats with software developers and other interested parties. This meeting is designed as an interactive forum where software developers can provide input on use of the formats. AHRQ especially requests participation by and input from those entities which have used AHRQ’s technical specifications and implemented, or plan to implement, the Common Formats electronically.

**DATES:** The meeting will be held from 2:00 to 3:00 p.m. Eastern on Thursday, July 20, 2023.

**ADDRESSES:** The meeting will be held virtually.

**FOR FURTHER INFORMATION CONTACT:** Dr. Hamid Jalal, Medical Officer, Center for Quality Improvement and Patient Safety, AHRQ, 5600 Fishers Lane, Rockville, MD 20857; Telephone (toll free): (866) 403–3697; Telephone (local):

(301) 427–1111; TTY (toll free): (866) 438–7231; TTY (local): (301) 427–1130; Email: [psa@ahrq.hhs.gov](mailto:psa@ahrq.hhs.gov).

#### SUPPLEMENTARY INFORMATION:

##### Background

The Patient Safety and Quality Improvement Act of 2005, 42 U.S.C. 299b–21 to 299b–26 (Patient Safety Act), and the related Patient Safety and Quality Improvement Final Rule, 42 CFR part 3 (Patient Safety Rule), published in the **Federal Register** on November 21, 2008, 73 FR 70731–70814, provide for the Federal listing of Patient Safety Organizations (PSOs), which collect, aggregate, and analyze confidential information (patient safety work product) regarding the quality and safety of health care delivery.

The Patient Safety Act requires PSOs, to the extent practical and appropriate, to collect patient safety work product from providers in a standardized manner that permits valid comparisons of similar cases among similar providers. (42 U.S.C. 299b–24(b)(1)(F)). The Patient Safety Act also authorizes the development of data standards, known as the Common Formats, to facilitate the aggregation and analysis of non-identifiable patient safety data collected by PSOs and reported to the network of patient safety databases (NPSD). (42 U.S.C. 299b–23(b)). The Patient Safety Act and Patient Safety Rule can be accessed at: <http://www.psa.ahrq.gov/legislation/>.

AHRQ has issued Common Formats for Event Reporting (CFER) for three settings of care—hospitals, nursing homes, and community pharmacies. AHRQ has also issued Common Formats for Event Reporting—Diagnostic Safety (CFER–DS) designed for use in all healthcare settings.

Federally listed PSOs can meet the requirement to collect patient safety work product in a standardized manner to the extent practical and appropriate by using AHRQ’s Common Formats. The Common Formats are also available in the public domain to encourage their widespread adoption. An entity does not need to be listed as a PSO or working with one to use the Common Formats. However, the Federal privilege and confidentiality protections only apply to information developed as patient safety work product by providers and PSOs working under the Patient Safety Act.

#### Agenda, Registration, and Other Information About the Meeting

The Agency for Healthcare Research and Quality (AHRQ) will be hosting this fully virtual meeting to discuss

implementation of the Common Formats with members of the public, including software developers and other interested parties. Agenda topics will include discussion of ICD–11’s incorporation of patient safety. Active participation and discussion by meeting participants is encouraged.

AHRQ requests that interested persons send an email to [SDMeetings@infinityconferences.com](mailto:SDMeetings@infinityconferences.com) for registration information. Before the meeting, an agenda and logistical information will be provided to registrants.

Dated: June 22, 2023.

**Marquita Cullom,**  
*Associate Director.*  
[FR Doc. 2023–13716 Filed 6–27–23; 8:45 am]

**BILLING CODE 4160–90–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Child Care and Development Fund Plan Preprint for States/Territories for FFY 2025–2027 (ACF–118) and Extension of Child Care and Development Fund Plan Preprint for States/Territories for FFY 2022–2024 (OMB #0970–0114)**

**AGENCY:** Office of Child Care; Administration for Children and

Families; U.S. Health and Human Services.

**ACTION:** Request for public comments.

**SUMMARY:** The Administration for Children and Families (ACF) is requesting an extension without changes of the form ACF–118: Child Care and Development Fund Plan Preprint for States/Territories for FFY 2022–2024 (OMB #0970–0114, expiration 02/29/2024), and an additional 3-year extension of the form ACF–118: Child Care and Development Fund Plan Preprint for States/Territories for FFY 2025–2027. There are changes requested to the form ACF–118: Child Care and Development Fund Plan Preprint for States/Territories for FFY 2025–2027 to improve formatting, collect additional information about program implementation, and streamline questions.

**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](mailto:infocollection@acf.hhs.gov). Identify all requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**  
*Description:* The Child Care and Development Fund (CCDF) Plan (the

Plan) for States and Territories is required from each CCDF Lead agency in accordance with Section 658E of the Child Care and Development Block Grant Act of 1990 (CCDBG Act), as amended, CCDBG Act of 2014 (Pub. L. 113–186), and 42 U.S.C. 9858. The Plan, submitted on the ACF–118, is required triennially and remains in effect for 3 years. The Plan provides ACF and the public with a description of and assurance about the states’ and territories’ child care programs. These Plans are the applications for CCDF funds.

At this time, the ACF Office of Child Care (OCC) is proposing an extension of the approval of the currently approved CCDF Plan Preprint for FFY 2022–2024 to allow states and territories to continue to submit amendments through September 30, 2024, as required. There are no changes proposed to the FFY 2022–2024 Plan Preprint. In addition, OCC is requesting comments on the proposed CCDF Plan Preprint for FFY 2025–2027. Updates were made to clarify questions, enhance the ability to align data with OCC monitoring data, reflect equity and other OCC priorities, ensure alignment with federal requirements, and facilitate grantee submission in the Child Care Automated Reporting System (CARS) data system.

*Respondents:* State and Territory Lead Agencies.

**ANNUAL BURDEN ESTIMATES**

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Child Care and Development Fund for States and Territories (ACF–118) .....	56	0.33	200	3,696	1,232

*Estimated Total Annual Burden Hours:* 1,232; however, since Plans are required triennially, and remain in effect for 3 years, the actual *Total Burden Hours* is 3,696.

*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:* Pub. L. 113–186 and 42 U.S.C. 9858.

**Mary B. Jones,**  
*ACF/OPRE Certifying Officer.*  
[FR Doc. 2023–13676 Filed 6–27–23; 8:45 am]

**BILLING CODE 4184–87–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Judicial, Court, and Attorney Measures of Performance: Feedback and Implementation (New Collection)**

**AGENCY:** Children’s Bureau, Administration for Children and Families, United States Department of Health and Human Services.

**ACTION:** Request for public comments.

**SUMMARY:** The Children’s Bureau, Administration for Children and