DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Community-Based Family Resource and Support Grants (Name changed to Child Abuse Prevention Program—OIS notified 6/2007) (OMB No.: 0970–0155)

AGENCY: Children's Bureau, Administration for Children, Youth and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families (ACF) is requesting a 3-year extension of the Program Instruction (PI) for the Community-Based Family Resource and Support Grants or the Community-Based Child Abuse Prevention (CBCAP) program (OMB No.: 0970–0155, expiration 3/31/2021), which outlines information collection requirements pursuant to receiving a grant award.

There are no changes requested to the information collection process.

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 in this notice. **ADDRESSES:** Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@ acf.hhs.gov. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation (OPRE), 330 C Street, SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer, All requests. emailed or written, should be identified by the title of the information collection. SUPPLEMENTARY INFORMATION:

Description: The PI, prepared in

response to the enactment of the CBCAP program, as set forth in Title II of the Child Abuse Prevention and Treatment Reauthorization Act of 2010 (Pub. L.

111-320) or CAPTA, provides direction to the states and territories to accomplish the purposes of (1) supporting community-based efforts to develop, operate, expand, and where appropriate to network, initiatives aimed at the prevention of child abuse and neglect, and to support networks of coordinated resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect; and (2) fostering an understanding, appreciation, and knowledge of diverse populations in order to be effective in preventing and treating child abuse and neglect. This PI contains information collection requirements that are found in CAPTA and pursuant to receiving a grant award. The information submitted will be used by the agency to ensure compliance with the statute, complete the calculation of the grant award entitlement, and provide training and technical assistance to the grantee.

Respondents: State governments, quasi-public entities, and non-profit private agencies.

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Total annual burden hours
Application	52 52	1 1	40 24	2,080 1,248

Estimated Total Annual Burden Hours: 3,328.

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: The CAPTA Reauthorization Act of 2010; Title II of the CAPTA, Public Law 115–271 (42 U.S.C. 5116 *et seq.*).

John M. Sweet Jr.,

ACF/OPRE Certifying Officer. [FR Doc. 2020–22087 Filed 10–5–20; 8:45 am] BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Public Comment Request; Information Collection Request Title: Health Workforce Connector, OMB No. 0906–0031—Extension

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on

HRSA's ICR only after the 30 day comment period for this notice has closed.

DATES: Comments on this ICR must be received no later than November 5, 2020.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under Review—Open for Public Comments" or by using the search function.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at paperwork@hrsa.gov or call (301) 443–1984.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Health Workforce Connector, OMB No. 0906–0031—Extension.

Abstract: More than just a job search portal, the goal of the Health Workforce Connector (HWC) is to help connect skilled professionals to communities in need by allowing approved Site Points of Contact (POCs), including National Health Service Corps (NHSC) and Nurse Corps, to post available opportunities and update site profiles. The HWC provides a central platform to connect participants, including those in both the NHSC and Nurse Corps programs, and facilities that are approved for performance of their NHSC or Nurse Corps service obligation. The HWC has become a resource that engages any health care professional or student interested in providing primary care services in underserved communities and with facilities in need of health care providers. The Health Workforce Connector also allows users to create a profile, search for NHSC and Nurse Corps sites, find job and training opportunities, search for other clinicians who are similarly interested in working with underserved populations, and be searchable by Site POCs. Individuals can use the Health Workforce Connector's search capability with Google Maps.

The initial estimates of burden, as provided in the previous notice, were developed prior to the deployment of the HWC. Those estimates were accurate, as brand new users created accounts and published profiles. Because the HWC is now in a steady state, actual numbers from the last year

allow for projections of comparable numbers for the upcoming year. A more recent data query yielded an estimated burden that is significantly lower due to the total number of users who are estimated to create accounts and publish profiles.

A 60-day notice published in the **Federal Register** on August 12, 2020, vol. 85, No. 156; pp. 48708–09. There was one public comment.

Need and Proposed Use of the Information: Information will be collected from users in the following two ways:

(1) Account Creation: Creating an account is optional, but to create an account the user will be required to enter their first name, last name, and email address. Those are the only mandatory fields in the profile account creation process and will be used to send an automated email allowing the user to validate their login credentials. This information will also be used to validate any users who already exist within the Bureau of Health Workforce Management Information Systems Solution (BMISS) database and allow an initial import of existing data at the request of the user.

(2) Profile Completion: Users may fill out a profile, but this function will be completely optional and will include fields such as location, discipline, specialty, and languages spoken. The information collected, if 'published' by the user, will allow internal BMISS Site POCs the ability to search for anyone

who may be a potential candidate for health care job opportunities at the site. Users also have the ability to make their profiles searchable by other end users through a security and privacy setting and can make their profiles private at any time. All information collected will be stored within existing secure BMISS databases and will be used internally for report generation on an as-needed basis.

Likely Respondents: Potential users will include individuals searching for a health care job opportunity or an NHSC or Nurse Corps health care facility, and health care facilities searching for potential candidates to fill open health care job opportunities at their sites.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

Total Estimated Annualized burden hours:

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Account Creation	5,008 4,164	1 1	5,008 4,164	.08 1.00	400.64 4,164.00
Total	15,008		5,008		4,564.64

¹The 4,164 respondents who complete their profiles are a subset of the 5,008 respondents who create accounts.

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HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Maria G. Button,

Director, Executive Secretariat.
[FR Doc. 2020–22067 Filed 10–5–20; 8:45 am]
BILLING CODE 4165–15–P

HRSA-Initiated Supplemental Funding to U13 Grant Program Award Recipient

DEPARTMENT OF HEALTH AND

Health Resources and Services

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice of a supplemental award.

SUMMARY: HRSA is providing approximately \$4,900,000 in supplemental funding to the University of Kansas, Medical Center Research

Institute, Inc. (U13HS33878), the sole award recipient under the Reimbursement of Travel and Subsistence Expenses toward Living Organ Donation Program, to provide increased financial support to living organ donors during the period of September 1, 2020, to August 31, 2021.

FOR FURTHER INFORMATION CONTACT:

Please send all written comments to Frank Holloman, Director, Division of Transplantation, Healthcare Systems Bureau, HRSA, 5600 Fishers Lane, Room 08W53A, Rockville, Maryland 20857; telephone (301) 443–7577; or email: donation@hrsa.gov.

SUPPLEMENTARY INFORMATION: