

understand that the knowing and willful request for, or acquisition of, a record pertaining to an individual under false pretenses is a criminal offense subject to a fine of up to \$5,000.

CONTESTING RECORD PROCEDURES:

To request correction of a record about you in this system of records, submit a written amendment request to the System Manager. The request must contain the same information required for an access request and include verification of your identity in the same manner required for an access request. In addition, the request must reasonably identify the record and specify the information contested, the corrective action sought, and the reasons for requesting the correction; it should include supporting information to show how the record is inaccurate, incomplete, untimely, or irrelevant.

NOTIFICATION PROCEDURES:

To find out if this system of records contains a record about you, submit a written notification request to the System Manager. The request must identify this system of records, contain the same information required for an access request, and include verification of your identity in the same manner required for an access request.

EXEMPTIONS PROMULGATED FOR THE SYSTEM:

None.

HISTORY:

None.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Office of Community Services Medical-Legal Partnerships Plus Data Collection (New Collection)

AGENCY: Office of Community Services, Administration for Children and

Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Community Services (OCS), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing a new information collection for an evaluation of a new demonstration program, the Medical-Legal Partnerships Plus (MLP+). The information collection will include grant recipient reports of service delivery and outcomes, as well as interviews with program staff and participants to understand program implementation and participant experiences.

DATES: *Comments due within 60 days of publication.* In compliance with the requirements 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. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: In fiscal year 2023, OCS began administering the MLP+ program, which was appropriated in HR 117-403, Departments of Labor, Health and Human Services, and Related Agencies Appropriations Bill, 2023 through the Social Services Research Demonstration program. OCS awarded \$1.6 million to eight MLPs to expand and strengthen the delivery of legal and social services that address health-harming needs for families and individuals with low incomes. The proposed information collection will support program performance monitoring, the provision of technical assistance to grant recipients, and an implementation evaluation. This information collection includes the following activities:

- Collecting program data describing implementation, outcomes, and

participant characteristics through a narrative quarterly Performance Progress Report (PPR) and a semi-annual report.

- Conducting interviews with program directors to better understand their program implementation efforts and responses to client needs.
- Conducting interviews with members of the legal team to better understand their program implementation efforts and responses to client needs.
- Conducting interviews with members of the social services team to better understand their program implementation efforts and responses to client needs.
- Conducting interviews with members of the clinical team to better understand their program implementation efforts and responses to client needs.
- Conducting individual patient interviews with beneficiary clients to understand their needs and experiences with the medical, legal, and social services offered through the medical-legal partnership.

Respondents: There will be three types of respondents to the proposed instruments. First, the direct beneficiaries, the clients working with the MLP teams, will participate in the patient interviews and provide information about their characteristics, needs, and outcomes for the grant recipients' semi-annual reporting. Second, the program directors, legal staff, clinical staff, and social services staff will respond to interview instruments tailored to their roles. Grant recipients and project partners will also be asked to supply information that grant recipients will compile for quarterly PPRs and semi-annual reports, which will include information aggregated across partner sites and individuals participating in the program.

ANNUAL BURDEN ESTIMATES

Information collection title	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Quarterly PPR Collections	8	8	2	128	64
Semi-Annual Report—Grant Recipients	8	4	40	1,280	640
Semi-Annual Report—Partner Organizations	15	4	2	120	60
Semi-Annual Report—Beneficiaries	13,800	1	.25	3,450	1,725
Interviews with Staff	64	1	1.5	96	48
Beneficiary Interviews	32	1	1.5	48	24
Estimated Annual Burden Total:				5,122	2,561

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: Sec. 1110, Social Security Act, 42 U.S.C. 1310.

Mary C. Jones,
ACF/OPRE Certifying Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Head Start Program Performance Standard (Office of Management and Budget #: 0970–0148)

AGENCY: Office of Head Start, Administration for Children and

Families, Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF) is requesting a 3-year extension of the information collection requirements under the Head Start Program Performance Standards (Office of Management and Budget (OMB) #0970–0148, expiration August 31, 2024). At this time, there are no changes to the approved recordkeeping requirements under this OMB number. However, a Notice of Proposed Rulemaking on Supporting the Head Start Workforce and Consistent Quality Programming was published and if any of the proposed changes are made final, this information collection will be updated to reflect those changes.

DATES: *Comments due within 60 days of publication.* In compliance with the requirements 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. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:
Description: Section 641A of the Head Start Act, 42 U.S.C. 9836A, directs the U.S. Department of Health and Human

Services (HHS) to develop “scientifically based and developmentally appropriate education performance standards related to school readiness” and “ensure that any such revisions in the standards do not result in the elimination of or any reduction in quality, scope, or types of health, educational, parental involvement, nutritional, social, or other services.” This information collection is entirely record keeping and does not contain any standardized instruments to provide flexibility for local programs. These records are intended to act as a tool for grantees and delegate agencies to be used in their day-to-day operations. For example, this includes the requirement that programs maintain a waiting list of eligible families. There are currently no changes to the record keeping requirements. However, if any proposed changes from the Notice of Proposed Rulemaking on Supporting the Head Start Workforce and Consistent Quality Programming (88 FR 80818), this information collection will be updated to reflect those changes.

Respondents: Head Start grant recipients. Depending on the standard, the calculated burden hours is based on the individual enrollee, family, grant, program, or staff. In a few cases, only a proportion of one of these may apply.

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Annual number of responses per respondent	Average annual burden hours per response	Annual burden hours
Impasse procedures	2,900	1	0.7	2,030
Documenting eligibility	260,000	1	0.166	43,160
Maintain a waiting list	2,900	1	2	5,800
Track attendance	2,900	1	5	14,500
Written plan to support program participation following temporary suspension	150	1	1	150
Child developmental screenings and assessment	800,000	1	1	800,000
Dual Language Learners Assessment	269,000	1	2	538,000
Obtain child health status, source of health care, and nutritional health needs	800,000	1	0.66	528,000
Documents lack of available funds for assessment and treatment	2,900	1	0.5	1,450
Maintaining records on the administration of medication	2,900	1	0.5	1,450
Joint agreements, procedures, or contracts with community organizations and memorandum of understanding with local entity	2,900	1	0.166	481
Criminal record checks	74,000	1	0.33	24,420
Ensure staff initial health examination and periodic re-examination	25,000	1	0.25	6,250
Volunteer screening for tuberculosis	2,900	1	0.166	481
Maintain automated accounting and recordkeeping system and collect and use data to monitor program performance and continuous improvement, and conduct a self-assessment and community assessment	2,900	1	79	229,100
Quality Improvement Plan	100	1	10	1,000
Submit proof of coverage	2,900	1	0.166	481
Parental Consent, Annual Notice, and Recordkeeping of PII Disclosure	723,000	1	0.33	238,590