

experiencing, or have experienced trafficking and connect them with needed resources.

OTIP proposes to collect information to measure grant project performance, provide technical assistance to grant recipients, assess program outcomes, inform program evaluation, respond to congressional inquiries and mandated reports, and inform policy and program development that is responsive to the needs of victims.

The information collection will capture information on organizations enrolled in each grant recipient’s multidisciplinary network of providers

servicing individuals who have experienced, or are at-risk of experiencing, a severe form of trafficking in persons, and clients served. Data elements are designed to capture information about organizational providers (e.g., number of individuals trained to identify and respond to trafficking, types and number of trainings offered, types of services provided, number of clients enrolled in services, organizational barriers to service delivery and implementation, and total funds spent by category of assistance) and client demographics (e.g., total number of

clients enrolled in services by providers within the recipient’s multidisciplinary network by client age, sex, gender identity, sexual orientation, race/ethnicity, and language spoken).

Respondents: Healthcare, behavioral health, and social service delivery professionals.

Annual Burden Estimates

Recipients will be awarded funding for a 5-year period. This request is for the first 3 years of data collection. We will request an extension to continue data collection beyond 3 years.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Provider Capacity Building Indicators	75	4	1	300	100
SOAR Demonstration Grant Participant Training Form	4500	1	0.75	3375	1125
Client Demographics Indicators	2000	4	1	8000	2667
Human Trafficking Response Protocol (HTPR) Indicators ..	75	4	2.5	750	250
Multidisciplinary Network Provider Indicators	75	4	0.5	150	50
Categories of Assistance Form	75	1	2.5	188	63

Estimated Total Annual Burden Hours: 4,255.

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: 22 U.S.C. 7104.

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2022–18331 Filed 8–24–22; 8:45 am]

BILLING CODE 4184–47–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Building Capacity To Evaluate Child Welfare Community Collaborations To Strengthen and Preserve Families (CWCC) Cross-Site Process Evaluation (Office of Management and Budget (OMB) #0970–0541)

AGENCY: Office of Planning, Research, and Evaluation (OPRE); Administration for Children and Families (ACF); U.S. Department of Health and Human Services (HHS).

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families at HHS is requesting an extension to continue data collection for an evaluation of the initiative, Community Collaborations to Strengthen and Preserve Families (also referred to as Child Welfare Community Collaborations [CWCC]). The cross-site process evaluation will provide insight to ACF about the various factors that promote or impede the implementation of child welfare community collaborations.

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 *OPREinfocollection@acf.hhs.gov*. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The evaluation involves seven data collection activities. Initial interviews with Project Directors and leaders from partner organizations and initial interviews with staff from lead and partner organizations have been completed. This request includes the remaining five activities:

- *Survey Invitee Template:* This template requests the Project Director of each CWCC grant to fill out a Survey Invitee Template to gather contact information for leaders and staff from lead and partner organizations who the evaluation team will invite to complete the Collaboration Survey (see below).

- *Collaboration Survey:* This electronic survey documents perceptions that leaders and staff from the CWCC lead and partner organizations have regarding their organizational/group processes, implementation activities, and progress towards goals. This survey is administered to staff at all grantee and partner organizations on an annual basis during each cohort’s grant period.

- *Site Visit Planning Template:* Each project director (or their designee) will complete a Site Visit Planning Template

to schedule site visit activities prior to each annual site visit.

- *Two Site Visit Discussion Guides:* To systematically document the approaches and strategies used by the first two cohorts of CWCC grantees (fiscal year (FY) 18 and FY 19

awardees), the evaluation team will conduct follow-up interviews with: (1) Project Directors from lead grantee organizations and leaders from partner organizations, and (2) Staff from the lead and partner organizations. These interviews will take place during site

visits. Each grantee will participate in four site visits in total. As noted above, the first two have already been completed.

Respondents: Leadership and staff from CWCC lead (grantee) organizations and from partner organizations.

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents (over request period)	Number of responses per respondent (total over request period)	Average burden hours per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Cohort 1 Data Collection for FY 18 grantees					
Site Visit Discussion Guide for Project Directors and Leaders from Partner Organizations—Follow-Up Interviews ...	12	1	1.5	18	9
Site Visit Discussion Guide for Staff from Lead and Partner Organizations—Follow-Up Interviews	36	1	1	36	18
Survey Invitee Template	4	1	1	4	2
Annual Collaboration Survey	268	1	.5	134	67
Site Visit Planning Template	4	1	2	8	4
Cohort 2 Data Collection for FY19 grantees					
Site Visit Discussion Guide for Project Directors and Leaders from Partner Organizations—Follow-Up Interviews ...	27	2	1.5	81	41
Site Visit Discussion Guide for Staff from Lead and Partner Organizations—Follow-Up Interviews	81	2	1	162	81
Survey Invitee Template	9	2	1	18	9
Annual Collaboration Survey	990	2	.5	990	495
Site Visit Planning Template	9	2	2	36	18

Estimated Total Annual Burden Hours: 744.

Comments: The Department specifically requests comments on (a) whether the proposed continued 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: Section 105(b)(5) of the Child Abuse Prevention and Treatment Act of 1978 (42 U.S.C. 5106(b)(5)), as amended by the CAPTA Reauthorization Act of 2010 (Pub. L. 111–320).

Mary B. Jones,
ACF/OPRE Certifying Officer.

[FR Doc. 2022–18327 Filed 8–24–22; 8:45 am]

BILLING CODE 4184–29–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2013–N–0370]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Export of Medical Devices; Foreign Letters of Approval

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Submit written comments (including recommendations) on the collection of information by September 26, 2022.

ADDRESSES: To ensure that comments on the information collection are received, OMB recommends that written comments be submitted to <https://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. The OMB control number for this information collection is 0910–0264. Also include the FDA docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Domini Bean, Office of Operations, Food and Drug Administration, Three White Flint North, 10A–12M, 11601 Landsdown St., North Bethesda, MD 20852, 301–796–5733, PRAStaff@fda.hhs.gov.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

Export of Medical Devices; Foreign Letters of Approval

OMB Control Number 0910–0264—Extension

Section 801(e)(2) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 381(e)(2)) provides for the exportation of an unapproved device under certain circumstances if the exportation is not contrary to the public health and safety and it has the approval of the foreign country to which it is