State	City	Address	Store No.	Buyer
	Waynesville	110 C W Parker Lane, Waynesville, Missouri 65583	24	Bomgaars.
	Beatrice	2415 North 6th Street, Beatrice, Nebraska 68310	95	Buchheit.
Nebraska	Gothenburg	716 4th Street, Gothenburg, Nebraska 69138	101	Bomgaars.
	Grand Island	515 South Webb Road, Grand Island, Nebraska 68803	115	Bomgaars.
	Hastings	1315 West J Street, Hastings, Nebraska 68901	42	Bomgaars.
	Kearney	910 Third Avenue, Kearney, Nebraska 68845	25	Bomgaars.
	Lexington	1701 Plumcreek Parkway, Lexington, Nebraska 68850	100	Bomgaars.
	Lincoln	5640 Cornhusker Highway, Lincoln, Nebraska 68507	63	Bomgaars.
	McCook	1602 North Highway 83, McCook, Nebraska 69001	70	Bomgaars.
	Nebraska City	2412 South 11th Street, Nebraska City, Nebraska 68410.	67	Bomgaars.
	North Platte	2501 East 4th Street, North Platte, Nebraska 69101	102	Buchheit.
	York	518 S Lincoln Avenue, York, Nebraska 68467	27	Bomgaars.
Ohio	Mount Orab	206 Sterling Run Blvd., Mount Orab, Ohio 45154	173	Bomgaars.
Oklahoma	Ada	724 Arlington Center, Ada, Oklahoma 74820	22	Bomgaars.
	Ardmore	1925 N Rockford Road, Ardmore, Oklahoma 73401	86	Bomgaars.
	Duncan	4800 N Highway 81, Duncan, Oklahoma 73533	85	Bomgaars.
	Durant	2424 West Main Street, Durant, Oklahoma 74701	83	Bomgaars.
	Muskogee	6 East Shawnee Road, Muskogee, Oklahoma 74403	56	Bomgaars.
	Nowata	329 South Ash Street, Nowata, Oklahoma 74048	156	Bomgaars.
	Okmulgee	2000 South Wood Drive, Okmulgee, Oklahoma 74447	23	Bomgaars.
	Pryor	715 North Mill Street, Pryor, Oklahoma 74361	54	Bomgaars.
Texas	Decatur	1200 W U.S. Business Hwy. 380, Decatur, Texas 76234.	178	Bomgaars.
	Sherman	2725 Hwy. 75 North, Sherman, Texas 75090	175	Bomgaars.
	Waco	2701 S Jack Kultgen Expressway, Waco, Texas 76706	177	Bomgaars.
	Weatherford	102 College Park Drive, Weatherford, Texas 76086	176	Bomgaars.

The purpose of this analysis is to facilitate public comment on the Consent Agreement. It is not intended to constitute an official interpretation of the Consent Agreement or to modify its terms in any way.

By direction of the Commission.

April J. Tabor,

Secretary.

[FR Doc. 2022–23245 Filed 10–25–22; 8:45 am]

BILLING CODE 6750–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) re-approve the proposed information collection project ''The Systematic Review Data Repository (SRDR) Platform''. This proposed information collection was previously published in the **Federal Register** on August 12, 2022 and allowed 60 days for public comment. AHRQ did not receive substantive comments during public review period. The purpose of this notice is to allow an additional 30 days for public comment.

DATES: Comments on this notice must be received by November 25, 2022.

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 30-day Review—Open for Public Comments'' or by using the search function.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427–1477, or by email at *doris.lefkowitz@AHRQ.hhs.gov*.

SUPPLEMENTARY INFORMATION:

Proposed Project

''The Systematic Review Data Repository (SRDR) Platform''

Since 1997, the AHRQ Evidence-based Practice Center (EPC) Program has been reviewing relevant scientific information on a wide spectrum of clinical and health services topics to produce various types of evidence reports. A majority of these evidence reports are systematic reviews (SRs), which are used as evidence bases for clinical practice guidelines, research agendas, healthcare coverage, and other health related policies. Performing SRs is costly in time, labor, and money. Moreover, there is an increasing expectation of quicker turnaround in producing SRs to accommodate the fast moving pace of innovations and new scientific discoveries in healthcare. Some SRs overlap or are duplicated; independent teams of SR producers often extract data from the same studies, resulting in replication of work. Current methodology makes it difficult to harness and reuse previous work when updating SRs.

In an effort to reduce the economic burden of conducting SRs, the EPC program undertook development of a collaborative, Web-based repository of systematic review data called the Systematic Review Data Repository (SRDR). The OMB Control Number for this data collection is 0935–0244, which was last approved by OMB on October 16, 2019.

This resource serves as both an archive and data extraction tool, shared among organizations and individuals producing SRs worldwide, enabling the creation of a central database of SR data. This database is collaboratively vetted, freely accessible, and integrates seamlessly with reviewers' existing workflows, with the ultimate goal of facilitating the efficient generation and update of evidence reviews, and thus speeding and improving evidence-based policy-making with regards to health care.

Note that the SRDR system was upgraded during the last period of OMB clearance and is now designated as SRDR+. We will use the term ''SRDR platform'' to collectively denote the

various upgraded iterations of the platform.

The SRDR project aims to achieve the following goals:

(1) Create online easy-to-use Web-based tools for conducting systematic reviews to facilitate extraction of data from primary studies;

(2) Develop an open-access searchable archive of key questions addressed in systematic reviews;

(3) Maintain a public repository of primary study data including provision of technical support for repository users; and

(4) Develop a process for making summary data from systematic reviews digitally shareable to end-users.

This study is being conducted by AHRQ through its contractor, Brown University, pursuant to AHRQ's statutory authority to conduct and support research on healthcare and on systems for the delivery of such care, including activities with respect to the quality, effectiveness, efficiency, appropriateness and value of healthcare services, including database development. 42 U.S.C. 299a(a)(1) and (8).

Method of Collection

To achieve the goals of this project the following data collections are being implemented:

(1) Collect registration information on SRs from SR producers who will populate the SRDR platform.

The SRDR platform now uses a two-tiered categorization of users, and collection of registration data will depend on the type of user. ''Contributors'' are SR producers who use the SRDR platform as a tool to support production of the SR and share scientific data from their SRs. Registration data will be collected from these users. ''General public'' users only view scientific data publicly available in the SRDR platform. No data will be collected from these users. The ''Commentator'' category of users that were referenced in the last OMB clearance period has been eliminated in the updated system since no users have signed up to be commentators. All Contributors undergo a simple self-registration process by providing a password and an email address. Provision of username and institution information by registrants is now optional in the updated system. Collection of registration data from Contributors is required due to the technical nature of using the SRDR platform both as a database and a tool for assisting in the production of a SR, including providing comments in the various sections of a particular project on the SRDR platform. In addition, provision of an email address and institution information allows the administrators of the SRDR platform to confirm that requests are being made by actual people and not potentially malicious software code such as bots and other cybersecurity threats.

User registration will be used for administrative purposes only including communication between SRDR platform administrators and registrant users. This type of information will not be made publicly available.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondents' time to participate/use the SRDR platform. In 2020, 1,029 users registered as Contributors. Registration will take approximately 1.5 minutes or 0.025 hours per user. We thus calculate the total burden hours required for registration for all users annually is 25.73 hours.

EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
Registration of users as Contributors	1,029	1	0.025	25.73
Total	1,029			25.73

Exhibit 2 shows the estimated cost burden associated with the respondents' time to participate/use the SRDR platform. The total cost burden to respondents is estimated at an average of $1,126.97 annually.

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate *	Total cost burden
Registration of users as Commentators or Contributors	1,029	25.73	[a] $43.80	$1,126.97
Total	1,029	25.73		1,126.97

* National Compensation Survey: Occupational wages in the United States May 2021, ''U.S. Department of Labor, Bureau of Labor Statistics.'' Available at: *https://www.bls.gov/oes/current/oes290000.htm.*

[a] Based on the mean wages for Healthcare Practitioners and Technical Occupations, 29–0000.

Request for Comments

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3520, comments on AHRQ's information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ's health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the

proposed information collection. All comments will become a matter of public record.

Dated: October 21, 2022.

Marquita Cullom,

Associate Director.

[FR Doc. 2022–23334 Filed 10–25–22; 8:45 am]

BILLING CODE 4160–90–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Expedited Review and Public Comment: Monitoring and Compliance for Office of Refugee Resettlement Care Provider Facilities (OMB #: 0970–0564)

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is requesting expedited review of an information collection request from the Office of Management and Budget (OMB). This information collection will allow the ORR Unaccompanied Children (UC) Program to enhance monitoring efforts at care provider facilities that are not licensed by the state. A separate notice will be published inviting public comments on the proposed collection.

SUPPLEMENTARY INFORMATION:

Description: ACF is requesting emergency review and approval of this information collection by OMB, as authorized under 44 U.S.C. 3507 (subsection j). The proposed forms are necessary to allow the ORR UC Program to enhance monitoring efforts at care provider facilities that are not licensed by the state. The information collected is essential to the mission of the agency and an unanticipated event occurred that could reasonably result in public harm if normal Paperwork Reduction Act (PRA) clearance procedures are followed. A recent proclamation in Texas (Proclamation by the Governor of the State of Texas, May 31, 2021) and recent emergency rule in Florida (Emergency Rule 65CER21–3, December 10, 2021) has resulted in a large number of ORR facilities no longer being licensed by the states. To help mitigate the issue, ORR plans to perform quarterly health and safety monitoring visits to Texas and Florida programs. The quarterly monitoring visits are in addition to and do not take the place of ORR's existing monitoring activities as described in UC Policy Guide Section 5.5. In order to implement quarterly health and safety site visits for unlicensed programs, ORR is seeking emergency approval to begin use of instruments related to this effort as soon as possible. ORR plans to make minor edits to 15 existing forms in this information collection to create the following alternate versions:

- Unlicensed Facility Site Visit Guide (Form M–7A–UF)
- Unlicensed Facility Personnel File Checklist (Form M–10A–UF)
- Unlicensed Facility Program Director Questionnaire (Form M–11A–UF)
- Unlicensed Facility Clinician Questionnaire (Form M–11C–UF)
- Unlicensed Facility Case Manager Questionnaire (Form M–11E–UF)
- Unlicensed Facility Education Staff Questionnaire (Form M–11G–UF)
- Unlicensed Facility Medical Coordinator Questionnaire (Form M–11I–UF)
- Unlicensed Facility Youth Care Worker Questionnaire (Form M–11J–UF)
- Unlicensed Facility Prevention of Sexual Abuse Compliance Manager Staff Questionnaire (Form M–11K–UF)
- Unlicensed Facility Interpreter Questionnaire (Form M–11P–UK)
- Unlicensed Facility UC Questionnaire—Ages 6–12 Years Old (Forms M–12A–UF and M–12As–UF)
- Unlicensed Facility UC Questionnaire—Ages 13 and Older (Forms M–12B–UF and M–12Bs–UF)
- Unlicensed Facility UC Questionnaire—Ages 5 and Under (Form M–12E–UF and M–12Es–UF)
- Unlicensed Facility Legal Service Provider Questionnaire (Form M–13C–UF)
- Unlicensed Facility Case Coordinator Questionnaire (Form M–13E–UF)

Additionally, ORR plans to add the below form (currently approved under OMB #0970–0558) to this information collection as well as the alternate version listed above to facilitate the quarterly monitoring on unlicensed programs.

- Interpreter Questionnaire (Form M–11P)

Finally, ORR plans to use the following forms with more than nine respondents. These were previously approved by OMB but were removed from the information collection due to the number of respondents.

- Unlicensed Facility Monitoring Notes (Form M–6A–UF)
- Unlicensed Facility UC Case File Checklist (Form M–7A–UF)
- Unlicensed Facility Onsite Monitoring Checklist (M–9A–UF)

At this time, ACF is requesting that OMB grant a 180-day approval for this request under procedures for expedited processing. A request for review under normal procedures will be submitted within 180 days of the approval for this request. ACF will invite public comment through this process. The first comment period, which invites comments over a 60-day period, begins concurrently with the publication of this notice (see notice titled *Proposed Information Collection Activity; Monitoring and Compliance for Office of Refugee Resettlement Care Provider Facilities (Office of Management and Budget #: 0970–0564)* in this issue of the **Federal Register**).

Respondents: ORR grantee and contractor staff; and UC.

Annual Burden Estimates:

The following burden estimates are specific to the forms described above and the subject of this request for emergency approval. For information about all currently approved forms under this OMB number, see: *https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202108-0970-016.*

ESTIMATED BURDEN HOURS FOR RESPONDENTS

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual total burden hours
Unlicensed Facility Site Visit Guide (Form M–7A–UF)	56	4.0	1.00	224.00
Unlicensed Facility UC Case File Checklist (Form M–8A–UF)	56	20.0	1.00	1,120.00
Interpreter Questionnaire (Form M–11P)	115	2.0	0.50	115.00