

RESPONSE TO PUBLIC COMMENT TABLE—Continued

Name	Position	Comment	Draft response/notes for discussion
Mary McGurran ..	Adult Protection Supervisor Aging and Adult Services, Minnesota Department of Human Services.	Case Component Data; Enhance data selections to include a service approach effective in preventing maltreatment.. CLT26: Add code for Support System Engaged	No change. The suggested code “Support System Engaged” falls under the definition of current code value “Care Case Management” and should be mapped and reported to it.
Mary McGurran ..	Adult Protection Supervisor Aging and Adult Services, Minnesota Department of Human Services.	NAMRS Annual Report; Enhance data report to improve utility for APS program evaluation and equity. Add: race/ethnicity; gender identify; sexual orientation; disability type for clients referred and accepted for APS and for voluntary and involuntary services and interventions. Add state population rate for: reports; reports accepted; investigation/assessment; services; involuntary intervention; client location at APS start and close.	No change. ACL agrees in principle with this recommendation. However, it impacts the reporting and use of the current data and does not require a change in the proposed data elements. The suggested demographic categories are all currently part of the data collection except that referred and accepted data is collected in the Agency Component and is not client specific. After this data renewal, as noted in the postings, ACL will begin sharing state specific data so this recommendation is timely. ACL will consider how to incorporate state population rates in any future reports that include state-specific data.

Estimated Program Burden: ACL estimates the burden associated with this collection of information as follows: 59 APS programs will respond every year to the Agency Component, with 50 states providing Case Component data and 9 states providing Key Indicator data. The total annual burden is

estimated to be 5,416 hours. The estimates are based on the amount of time States have previously reported in completing the data collection instruments; continued increase in the number of states reporting on Case Component and Key Indicator Component data; one-time costs for the

changes in the data elements for this renewal; and assumption of modest incremental efficiencies by States in reporting data to NAMRS every year, including, most significantly, minimal need to recode to extract data after the initial year.

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden estimate
Agency One-Time	59	1	6.20	365.80
Key Indicator One-Time	9	1	30.00	270.00
Case Component One-Time	50	1	83	4,150.00
One-Time Subtotal			119.20	4,785.80
Agency Component	59	1	4	236.00
Key Indicators Component	9	1	20	180.00
Case Component	50	1	100	5,000.00
Recurring Sub-total			124	5,416.00

Dated: February 11, 2023.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities: Proposed Collection; Public Comment Request; of the ACL Generic Clearance for the Collection of Qualitative Research and Assessment: OMB 0985-NEW

AGENCY: Administration for Community Living, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of

information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This IC solicits comments on the information collection requirements relating to the ACL Generic Clearance for the Collection of Qualitative Research and Assessment, a generic mechanism to conduct qualitative research in support of program improvement, knowledge generation, and technical assistance for ACL programs and populations served by the agency.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by April 17, 2023.

ADDRESSES: Submit electronic comments on the collection of information to: ACL’s Office of Performance and Evaluation at evaluation@acl.hhs.gov. Submit written comments on the collection of information to Administration for Community Living, 330 C Street SW, Washington, DC 20201, Attention: Office of Performance and Evaluation.

FOR FURTHER INFORMATION CONTACT: Amanda Cash, Administration for Community Living, 202–795–7369 or Amanda.Cash@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) whether the proposed collection of information is necessary for the proper performance of ACL’s functions, including whether the information will have practical utility;

(2) the accuracy of ACL’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

Some individual information collection requests may contain demographic data, and ACL will ensure adherence to best practices for collection of all demographic information in accordance with OMB guidance.

The Administration for Community Living (ACL) at the Department of Health and Human Services (HHS) is requesting a generic clearance for purposes of conducting qualitative research to gain a better understanding of emerging issues related to ACL’s grantees, service providers, and programs; develop future intramural and extramural research projects; and to ensure HHS and ACL leadership, programs, and staff can obtain timely and relevant data and information. ACL defines qualitative feedback as information that provides useful insights on perceptions and opinions but are not statistical surveys that yield results that can be generalized beyond the population of study. ACL is requesting approval for at least four types of qualitative research: (a)

interviews, (b) focus groups, (c) questionnaires, and (d) other qualitative methods.

ACL’s mission is to maximize the independence, well-being, and health of older adults, people with disabilities across the lifespan, and their families and caregivers. ACL implements critical disability and aging programs, serves as the advisor to the HHS Secretary on disability and aging policy, works with other HHS agencies, Departments and the White House on disability and aging policies, and engages a range of disability and aging constituents to inform program development and implementation. Integral to this role, ACL will use this mechanism to conduct research, evaluation, and assessment to understand the needs, barriers, or facilitators for ACL programs. Future proposed data collection tools may be found on the ACL website for review at: <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden: ACL estimates the burden of this collection of information as follows:

A variety of instruments and platforms will be used to collect information from respondents. The annual burden hours (5,043) requested and the anticipated number of respondents (10,086) are based on the number of qualitative information collection requests (ICRs) that were approved by OMB currently at ACL. Out of the total ICRs at ACL, we estimated that that 30% of them have a qualitative research component. We used this information to develop the annual burden estimate below. Therefore, we estimate that over the requested period for this clearance (3 years) and approximately 30,258 respondents and 15,129 burden hours will be needed.

ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Form	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACL Program Recipient, Partner, or Key Informant.	Qualitative Research	10,086	1	.5	5,043

Dated: February 11, 2023.

Alison Barkoff,
Acting Administrator and Assistant Secretary for Aging.

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