Authority: Section 471(e)(4)(E) of the Act (42 U.S.C. 671), as amended by Public Law 115–123.

Mary C. Jones,

ACF/OPRE Certifying Officer. [FR Doc. 2024–31075 Filed 12–26–24; 8:45 am] BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Refugee Assistance Program Estimates: Cash and Medical Assistance–ORR–1 (Office of Management and Budget #: 0970–0030)

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, U.S. 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 revisions to an existing data collection, ORR-1 Cash and Medical Assistance (CMA) Program Estimates (Office of Management and Budget #: 0970-0030, expiration June 30, 2025). The proposed revisions include minor revisions to the existing ORR-1 form and the addition of a template recipients must use in preparing their annual budget justification estimates in accordance with the refugee resettlement program regulations.

DATES: *Comments due* February 25, 2025. 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: The ORR-1, CMA Program Estimates, is the application for grants under the CMA program. The application is required by ORR program regulations at 45 CFR 400.11(b). The regulation specifies that states must submit, as their application for this program, estimates of the projected costs they anticipate incurring in providing CMA for eligible recipients and the costs of administering the program. Under the CMA program, states are reimbursed for the costs of providing these services and benefits for 12 months after an eligible recipient arrives in this country. The eligible beneficiaries for these services and benefits are refugees, Amerasians, Cuban and Haitian Entrants, asylees, Afghans and Iraqi with Special Immigrant Visas, victims of a severe form of trafficking, and other populations. States that provide services for unaccompanied refugee minors also provide an estimate for the cost of these services for the year for which they are applying for grants.

The proposed revisions include minor changes to the existing ORR-1 form and the addition of a template recipients must use in preparing their annual budget justification estimates in accordance with the refugee resettlement program regulations. Currently recipients must submit the ORR-1, CMA Program Estimates, as the application for grants under the CMA program. A budget justification must be submitted along with the ORR-1 form. However, ORR does not provide a standardized budget justification template, so submissions vary widely in format, content, and quality, making it challenging to extract and standardize

ANNUAL BURDEN ESTIMATES

ORR reviewers and recipients. This revision to the information collection requires states to submit budget justifications in a standardized format via a Microsoft Excel workbook, with each tab of the justification in alignment with a specific line on the ORR–1. The ORR–1 form has minor revisions, including updating the titles of columns and lines to align with current terminology, and simplifying the form to require total cost estimates where unit costs were previously requested. These revisions are a result of the standardization of the budget

justification.

information, increasing burden on both

The revised instructions, which are now embedded within the standardized budget justification, provide guidance to recipients on how to fill out each section of the standardized budget justification. The recipients work through corresponding sections of the instructions and budget justification, and the standardized format makes clear what information is needed and at what level of detail. Upon completion of the budget justification, the values needed to populate the ORR-1 form are automatically calculated, and recipients are instructed to transfer specific data from the budget justification to the ORR-1 form in the system of record.

ORR conducted a pilot of the standardized budget justification. Feedback was positive, with participating states citing time savings in development of their budget justification and more streamlined and consistent review and analysis by ORR reviewers. The annual burden estimate has been revised to reflect this.

Respondents: State Agencies, the District of Columbia, and Replacement Designees under 45 CFR 400.301(c) administering or supervising the administration of programs under Title IV of the Act.

Information collection	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
ORR-1, CMA Program Estimates	57	1	0.5	28.5

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: 8 U.S.C. 412(a)(4).

Mary C. Jones,

ACF/OPRE Certifying Officer. [FR Doc. 2024–31044 Filed 12–26–24; 8:45 am] BILLING CODE 4184–45–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Unaccompanied Children Bureau Incident Reporting (Office of Management and Budget #: 0970– NEW)

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, U.S. 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 inviting public comments on the proposed information collection, including proposed changes. The request consists of several forms that will allow the Unaccompanied Children Bureau (UCB) to ensure that serious issues are elevated to ORR and that all incidents and the response to such incidents are documented and resolved in a way that protects the interests of children.

DATES: *Comments due* February 25, 2025. 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: ORR UCB is in the process of reorganizing its information collections to create more unique information collections that will contain fewer forms under each OMB control number. This will promote operational efficiency for UCB by decreasing the burden associated with renewing large collections and enabling UCB to create more purpose-specific information collections. In addition, this will facilitate OMB review by ensuring the scope of the collection is targeted and narrower than existing collections, resulting in clearer requests. As part of that reorganization effort, ORR plans to move the following forms into this new information collection:

- Child-Level Event (Form A-9A)
- Emergency Significant Incident Report (eSIR) (Form A–9B)
- Non-Emergency Significant Incident Report (non-eSIR)(Form A–9C)
- Historical Disclosure (Form A–9D)
- Behavioral Note (Form A–9E)
- Program-Level Event (PLE) Report (Form A–10)

In addition, ORR plans to revise the forms as follows to better align the forms with related reporting requirements and processes found in ORR agency guidance (*i.e.*, regulations, policies, and procedures), as well as improve the forms' organization, clarity, and functionality:

Child-Level Event (Form A-9A)

• Adjust the dropdown options for the "Location of Event" field to remove duplication and improve accuracy by:

- Removing "Group Home" and "Foster Home"
- Rewording "Community (field trip or outside the foster home)" to "Community"
- Rewording "U.S. Interior, not DHS or ORR custody" to "U.S. Interior (before entering DHS or ORR custody)"

• Adjust the dropdown options for "Specify Location" for accuracy by:

- Rewording options to clarify when they are referring to locations inside the care provider facility
- Adding an option for "Individual Foster Home"
- Adding the following options to select from if "Community" is selected in the "Location of Event" field
 - Hospital or other healthcare facility
 - School
 - Field Trip
 - Other
 - Add the following fields:
- Level of Care
- Specify Out-of-Network FacilitySpecify Out-of-Network Level of Care

• Reword the Date/Time Event Reported to Care Provider fields as follows since provider staff may have directly witnessed the event, as opposed to having it reported to them by a thirdparty:

- Date Care Provider Became Aware of Event
- Time Care Provider Became Aware of Event

Emergency Significant Incident Report (Form A-9B)

Reword the subcategory
"Molestation (penetration or touching unrelated to official job duties of a child's buttocks, breasts, or anal, oral, or genital area by a body part or object" to
"Molestation (intentional penetration or touching unrelated to official job duties of a child's genitalia, anus, groin, breast, inner thigh, buttocks, or mouth by a body part or object, including kissing, with intent to abuse, arouse, or gratify sexual desire)" for added clarity.
Remove the option of "UC and UC

• Remove the option of "UC and UC consensual" from the "Type of Allegation" dropdown field to align with the related regulation.

Non-Emergency Significant Incident Report (Form A–9C)

• For the "Staff Code of Conduct & Boundary Violation" category:

- Reworded the subcategory "Failing to report any knowledge, suspicion, or information about sexual abuse, sexual harassment, or inappropriate sexual behavior" to "Failing to report any knowledge, suspicion, or information about sexual abuse, sexual harassment, inappropriate sexual behavior, or any other form of abuse/neglect" to clarify that other forms of abuse/neglect are also reportable
- Added the following subcategories to better align with ORR agency guidance:
 - Failing to report a code of conduct violation
 - Engaging in sexual contact with anyone while on duty or while acting in the official capacity of their position
 - Threatening a child with incident reporting or behavioral notes to regulate their behavior or for any other reason
 - Threatening a child with legal, immigration, sponsor unification, or asylum case consequences to regulate their behavior or for any other reason

Historical Disclosure (Form A-9D)

• Reword the "Abuse Neglect in DHS Custody" category to "Violation of Civil Rights/Liberties in DHS Custody" and replace the current subcategories with the following options to better reflect the types of reportable incidents:

- Conditions of detention
- Disability accommodation
 Excessive force or inappropriate use of force
- Fourth Amendment (confiscation of documents/property)
- Intimidation, threat, or improper coercion