

request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: April 7, 2020.

Virginia L. Mackay-Smith,
Associate Director.

[FR Doc. 2020-07661 Filed 4-10-20; 8:45 am]

BILLING CODE 4160-90-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2020-0001; NIOSH-333]

Developing a Workplace Supported Recovery Program: A Strategy for Assisting Workers and Employers With the Nation's Opioid and Substance Use Disorder Epidemics; Request for Information; Extension of Comment Period

AGENCY: Centers for Disease Control and Prevention, HHS.

ACTION: Extension of comment period.

SUMMARY: On February 26, 2020, the National Institute for Occupational Safety and Health (NIOSH), within the Center for Disease Control and Prevention (CDC), opened a docket to obtain public input on a NIOSH plan to develop resources and conduct research on the topic of workplace supported recovery. Workplace supported recovery programs (WSRPs) assist workers and employers facing the nation's crisis related to the misuse of opioids and other drugs, and related substance disorders. Comments were to be received by April 27, 2020. NIOSH is extending the comment period to close on July 27, 2020, to allow stakeholders and other interested parties sufficient time to respond.

DATES: The comment period for the document published on February 26, 2020 (85 FR 11085), is extended. Comments must be received by July 27, 2020.

ADDRESSES: You may submit written comments, identified by docket numbers CDC-2020-0001 and NIOSH-333, by either of the following two methods:

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.
 - *Mail:* National Institute for Occupational Safety and Health, NIOSH Docket Office, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226-1998.
- Instructions:* All information received in response to this notice must include

the agency name and docket number [CDC-2020-0001; NIOSH-333]. All relevant comments received will be posted without change to <http://www.regulations.gov>, including any personal information provided.

FOR FURTHER INFORMATION CONTACT: L. Casey Chosewood, NIOSH, 1600 Clifton Road NE; Mailstop V24-4, Atlanta, GA 30329; phone: 404-498-2483 (not a toll-free number); email: tw@cdc.gov.

SUPPLEMENTARY INFORMATION: NIOSH published a request for information in the *Federal Register* on February 26, 2020 (85 FR 11085) regarding the planned development of resources and conduct of research on the topic of workplace supported recovery programs (WSRPs). This notice announces the extension of the comment period until July 27, 2020.

John J. Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2020-07683 Filed 4-10-20; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Intent To Award a Single-Source Supplement for the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center Cooperative Agreement

ACTION: Notice; intent to award a single-source supplement.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center (NLLRC). The purpose of this project is to expand on current grant activities occurring across communities. These activities include programs that promote independence, community living, and the adoption of healthy behaviors that promote wellness and prevent and/or reduce chronic conditions associated with limb loss and increase partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences. The administrative supplement for FY 2020 will be for \$500,000, bringing the total award for FY 2020 to \$3,884,003.

FOR MORE INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Elizabeth Leef, U.S. Department

of Health and Human Services, Administration for Community Living, Administration on Disabilities, Independent Living Administration at (202) 475-2486 and; email Elizabeth.leef@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: The additional funding will not be used to begin new projects. The funding will be used to enhance and expand existing programs that can serve an increased number of veterans and people living with limb loss and limb differences by providing increased technical assistance activities; promoting health and wellness programs; addressing healthcare access issues, including maternity care; promoting the adoption of healthy behaviors with the objective of preventing and/or reducing chronic conditions associated with limb loss; increasing partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences; enhancing and expanding the evaluation activities currently under way; and enhancing website capacities for improved information dissemination.

Program Name: National Limb Loss Resource Center

Recipient: The Amputee Coalition of America, Inc.

Period of Performance: The supplement award will be issued for the second year of the five-year project period of April 1, 2019, through March 29, 2024.

Total Supplement Award Amount: \$500,000 in FY 2020.

Award Type: Cooperative Agreement Supplement.

Statutory Authority: This program is authorized under Section 317 of the Public Health Service Act (42 U.S.C. 247(b-4)); Consolidated and Further Continuing Appropriations Act, 2015, Public Law 113-235 (Dec. 16, 2014).

Basis for Award: The Amputee Coalition of America, Inc. is currently funded to carry out the objectives of this program, entitled *The National Limb Loss Resource Center* for the period of April 1, 2019, through March 29, 2024. Almost 2 million Americans have experienced amputations or were born with limb difference and another 28 million people in our country are at risk for amputation. The supplement will enable the grantee to carry their work even further, serving more people living with limb loss and/or limb differences and providing even more comprehensive training and technical assistance in the development of long-term supportive services. The additional funding will not be used to begin new projects or activities. The NLLRC will

enhance and expand currently funded activities such as conducting national outreach for the development and dissemination of patient education materials, programs, and services; providing technical support and assistance to community based limb loss support groups; and raising awareness about the limb loss and limb differences communities.

Establishing an entirely new grant project at this time would be potentially disruptive to the current work already well under way. More importantly, the people living with limb loss and limb differences currently being served by this program could be negatively impacted by a service disruption, thus posing the risk of not being able to find the right resources that could negatively impact on health and wellbeing. If this supplement were not provided, the project would be less able to address the significant unmet needs of additional limb loss survivors. Similarly, the project would be unable to expand its current technical assistance and training efforts in NLLRC concepts and approaches, let alone reach beyond traditional providers of services to this population to train more “mainstream” providers of disability services.

Dated: April 6, 2020.

Mary Lazare,

Administrator and Assistant Secretary for Aging.

[FR Doc. 2020-07665 Filed 4-10-20; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Comment Request; Outcome Evaluation of the Long-Term Care Ombudsman Program (LTCOP); OMB#0985-XXXX

AGENCY: Administration for Community Living, HHS.

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 (the 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 notice solicits comments on the proposed new information collection requirements related to an outcome evaluation for ACL’s Long-term Ombudsman Program (LTCOP).

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by June 12, 2020.

ADDRESSES: Submit electronic comments on the collection of information to: Susan Jenkins, Ph.D. Submit written comments on the collection of information to Administration for Community Living, Washington, DC 20201, Attention: Susan Jenkins, Ph.D.

FOR FURTHER INFORMATION CONTACT: Susan Jenkins, Ph.D., Administration for Community Living, Washington, DC 20201, 202.795.7369; *Susan.Jenkins@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. A “Collection of information” is defined as 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.

The mission of the Administration for Community Living (ACL)¹ is to maximize the independence, well-being, and health of older adults, people with disabilities across the lifespan, and their families and caregivers. The Long-Term Care Ombudsman Program serves individuals living in long-term care facilities (nursing homes, residential care communities, such as assisted living and similar settings) and works to resolve resident problems related to poor care, violation of rights, and quality of life. Ombudsman programs also advocate at the local, state and national levels to promote policies and consumer protections to improve residents’ care and quality of life.

This data collection is part of an outcome evaluation of the Long-term Care Ombudsman Program (LTCOP) designed to determine the efficacy of LTCOP in carrying out core functions as described in the Older Americans Act, the long-term impacts of the LTCOP’s for various stakeholders, what system advocacy among Ombudsman programs looks like, and effective or promising Ombudsman program practices. The efficacy of LTCOP in carrying out core functions as described in the Older Americans Act. ACL is interested in learning:

1. Are the critical functions, including federally mandated responsibilities, of the LTCOP at the state, and local levels, carried out effectively and efficiently?
2. How effective is the LTCOP in ensuring Ombudsman services for the full range of residents of long-term care facilities, including individuals with the greatest economic and social needs?
3. How cost-effective LTCOP strategies are, for example, the cost effectiveness of services offered through consultations, referrals, complaint handling, and via education and outreach activities.
4. What impact do LTCOPs have on long-term care practices, programs, and policies?
5. What impact do LTCOPs have on residents’ health, safety, welfare, well-being, and rights?

Act (OAA) programs such as Title VII Long-Term Care Ombudsman Program (LTCOP), ACL/AoA seeks increased understanding of how these programs are operationalized at the State and local levels and their progress towards their goals and mission. This information will enable ACL/AoA to

¹ In April 2012, a new Operating Division was created within the US Department of Health and Human Services named the Administration for Community Living (ACL). This Operating Division contains the Administration on Aging (AoA). This document consistently refer to the federal agency as “ACL/AoA.”