• Diagnosing WTC-related health conditions for which there have been diagnostic uncertainty; and
• Treating WTC-related health conditions for which there have been treatment uncertainty.

Request for Information

The WTC Health Program conducts research among members receiving monitoring or treatment in the Program and in sampled populations outside the New York City disaster area in Manhattan as far north as 14th Street and in Brooklyn. WTC survivors include individuals who lived, worked, went to school, or attended child or adult day care in the NYC Disaster Area on September 11, 2001, or in the following days, weeks, or months and those otherwise meeting the eligibility criteria in 42 CFR 88.8. NIOSH is soliciting public comments from any interested party regarding research priorities for WTC Health Program FY2022 research projects on WTC survivors (adults and children) and similar survivor populations south of 14th street in Manhattan and in Brooklyn. Specifically, NIOSH seeks input on the following questions:

(1) What are the most important research gaps that need to be addressed within the scope of the research solicitation? (For NIOSH-funded research projects related to the September 11, 2001 terrorist attacks and areas of interest based on the Program’s Research Agenda, please visit the WTC Health Program Research Gateway.)

(2) What are the most important areas of diagnostic and treatment uncertainty that could most benefit from intervention research (information that bridges the gap between science and practice, care, or treatment by addressing the barriers, challenges, and needs to advance implementation of new or improved treatment, care, or practices)?

(3) What are the primary research needs of WTC survivors (adults and/or children) and similar survivor populations south of 14th street in Manhattan and in Brooklyn?

John J. Howard,
Administrator, World Trade Center Health Program and Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services.

[FR Doc. 2021–15611 Filed 7–21–21; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Early Head Start–Child Care Partnerships Sustainability Study (OMB #0970–0471)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) seeks approval to collect information for the Early Head Start–Child Care Partnerships Sustainability Study.

DATES: Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the Federal Register. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

ANNUAL BURDEN ESTIMATES

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Number of respondents (total over request period)</th>
<th>Number of responses per respondent (total over request period)</th>
<th>Average burden per response (in hours)</th>
<th>Total burden (in hours)</th>
<th>Annual burden (in hours)</th>
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<tr>
<td>EHS Program Director Survey</td>
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<td>.58</td>
<td>194</td>
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<tr>
<td>Provider Survey (Sustained Partnership Provider Survey and Dissolved Partnership Provider Survey)</td>
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<td>Dissolved Partnership Provider Semi-structured Interview Protocol</td>
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<tr>
<td>Sustained Partnership Provider Semi-structured Interview Protocol</td>
<td>................................................</td>
<td>24</td>
<td>1</td>
<td>.83</td>
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</tbody>
</table>

Estimated Total Annual Burden Hours: 162.

Authority: Sec 645A and 649 of the Improving Head Start for School Readiness Act of 2007 and the
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; ACF–901—American Rescue Plan (ARP) Stabilization Grants Provider-Level Data (New Collection)

AGENCY: Office of Child Care, Administration for Children and Families, Health and Human Services (HHS).

ACTION: Request for public comment.

SUMMARY: The Office of Child Care, Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing to collect data for a new collection, ACF–901—American Rescue Plan (ARP) Stabilization Grants Provider-Level Data. The data collection will provide numbers and characteristics of child care providers receiving ARP Act stabilization grant awards.

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: The proposed collection of information will be posted at www.acf.hhs.gov/occ. Comments may be submitted by emailing infocollection@acf.hhs.gov. Alternatively, a copy can also be obtained by emailing infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The ARP Act of 2021 (Sec. 2202, Pub. L. 117–2) included approximately $24 billion in funding for child care stabilization grants. State and territory lead agencies must spend at least 90 percent of the stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector during and after the COVID–19 public health emergency. Data collection will include child care provider-level information about the numbers and characteristics of child care providers receiving stabilization grant awards.

Respondents: State and Territory Lead Agencies.

ANNUAL BURDEN ESTIMATES

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Total number of respondents</th>
<th>Annual number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Annual burden hours</th>
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</table>

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.


Mary B. Jones, ACF/OPRE Certifying Officer.

[FR Doc. 2021–15606 Filed 7–21–21; 8:45 am]
BILLING CODE 4184–22–P