disabilities and their families. The study will not allow for statistical generalization beyond EHS/HS and their service populations.

The study will report on inclusive practices, staffing, professional development, and collaboration with local education agencies, early intervention programs, health providers, and other community stakeholders who serve young children with disabilities and their families.

ACF aims to address the research questions through a national survey of EHS/HS program directors (Wave 1), a survey with DSCs identified by the directors (Wave 2), and a one-time qualitative interview with a subset of DSCs who respond to the web-based survey (Wave 3). There are no data regarding the population of the DSC workforce and subgroups, preventing the team from setting a frame for selecting a nationally representative sample. Given the lack of administrative data and contact information about DSCs, it is essential that a national survey of EHS/HS directors (Wave 1) be conducted to identify DSC respondents. A purposive sample of DSCs who completed the Wave 2 survey will be asked to participate in a semi-structured, qualitative interview.

Data collection activities will occur over 15 months, shortly after OMB approval. The three waves of data collection will occur concurrently—the Wave 1 survey will be fielded for approximately 8 months; the Wave 2 survey will be fielded for approximately 12 months; and the Wave 3 interviews will be conducted over 4 months.

Respondents: Head Start Directors, Head Start Disability Services Coordinators.

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>
</tr>
</thead>
<tbody>
<tr>
<td>Survey of EHS/HS Program Directors (Wave 1)</td>
<td>1,600</td>
<td>1</td>
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<td>672</td>
<td>336</td>
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<td>Survey of EHS/HS DSCs (Wave 2)</td>
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<tr>
<td>DSC Interview (Wave 3)</td>
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<td>1</td>
<td>0.75</td>
<td>27</td>
<td>13.5</td>
</tr>
</tbody>
</table>

Estimated Total Annual Burden Hours: 799.5.

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.


Mary B. Jones,
ACF/OPRE Certifying Officer.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families


AGENCY: Office of Child Care, Administration for Children and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Office of Child Care (OCC) is requesting a 1-year extension of the form ACF–218: Quality Progress Report (QPR) (OMB #0970–0517, expiration 9/30/2021). There are minor changes requested to the form related to COVID–19 pandemic supplemental funding increases.

DATES: Comments due within 60 days of publication. In compliance with the requirements of Section 3506(c)(2)(A) 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: Lead Agencies are required to spend a certain percent of their Child Care and Development Fund (CCDF) awards on activities to improve the quality of child care. Lead Agencies are also required to invest in at least 1 of 10 allowable quality activities included in the Child Care and Development Block Grant (CCDBG) Act of 2014. In order to ensure that states and territories are meeting these requirements, the CCDBG Act and the CCDF final rule require Lead Agencies to submit an annual report that describes how quality funds were expended. The CCDF final rule named this the QPR. The report must describe how quality funds were expended, including what types of activities were funded and measures used to evaluate progress in improving the quality of child care programs and services. The QPR increased transparency on quality spending and will continue to gather detailed information on how states and territories are spending their quality funds, as well as more specific data points to reflect the requirements in the CCDBG Act and the CCDF final rule. The annual data provided by the QPR will be used to describe how lead agencies are spending a significant investment per year to key stakeholders, including Congress, federal, state and territory administrators, providers, parents, and the public.
Specifically, this report will be used to:

- Ensure accountability and transparency for the use of CCDF quality funds, including a set-aside for quality infant and toddler care and the stabilization grants funded by the American Rescue Plan Act funding;
- Track progress toward meeting state- and territory-set indicators and benchmarks for improvement of child care quality based on goals and activities described in CCDF Plans;
- Understand efforts to progress towards all child care settings meeting the developmental needs of children; and
- Inform federal technical assistance efforts and decisions regarding strategic use of quality funds.

**Respondents:** State and territory CCDF lead agencies (56).

### 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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<tbody>
<tr>
<td>ACF–218: FFY 2021 QPR</td>
<td>56</td>
<td>1</td>
<td>75</td>
<td>4,200</td>
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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.

**Authority:** 42 U.S.C. 9858.

Mary B. Jones, ACF/OPRE Certifying Officer.

[FR Doc. 2021–15711 Filed 7–21–21; 8:45 am]

BILLING CODE 4184–43–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Administration for Children and Families**

**Proposed Information Collection Activity:** Child Support Portal Registration (OMB No.: 0970–0370)

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

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Child Support Enforcement (OCSE), Administration for Children and Families (ACF), is requesting the federal Office of Management and Budget (OMB) approve the “Child Support Portal Registration,” with revisions, for an additional three years. OCSE’s Child Support Portal (“Portal”) contains applications to assist state child support agencies with administering their programs. Authorized Portal users must register with OCSE to access Portal applications and provide OCSE with certain preferences. The current OMB approval expires on February 28, 2022.

**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:** Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation (OPRE), 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

**Description:** OCSE’s Division of Federal Systems maintains the Portal, which contains various applications that authorized users may view, update, and upload or download information for child support purposes. OCSE creates secure profiles for authorized users for employers, insurers, and financial institutions based on information provided in the Employer Services and Insurance Match Debt Inquiry Portal Registration forms. OCSE added the electronic National Medical Support Notice (e-NMSN), the electronic Incoming Withholding Order (e-IWO), and Multistate Financial Institution Data Match FAST Levy (MSFDLM FAST LEVY) Profile forms, which provide OCSE with information to set up the respective program user’s process and capture preferences. State child support agencies manage and authenticate authorization for individual users via the state proxy server; therefore, a Portal Registration form is not required. State users must, however, provide OCSE with their respective Portal preferences.

**Respondents:** Employers, Financial Institutions, Insurers, and State Child Support Agencies.

### ANNUAL BURDEN ESTIMATES

<table>
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<tr>
<th>Information collection instrument</th>
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<td>e-NMSN: Employer Profile</td>
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<td>1</td>
<td>0.22</td>
<td>1.10</td>
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<tr>
<td>e-NMSN: State Profile</td>
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