identifying the national accrediting body making the request, describing the nature of the request, and providing at least a 30-day public comment period. We have 210 days from the receipt of a complete application to publish notice of approval or denial of the application. The purpose of this proposed notice is to inform the public of TJC’s request for CMS-approval of its psychiatric hospital accreditation program. This notice also solicits public comment on whether TJC’s requirements meet or exceed the Medicare conditions of participation (CoPs) for psychiatric hospitals.

B. Evaluation of Deeming Authority Request

TJC submitted all the necessary materials to enable us to make a determination concerning its request for CMS-approval of its psychiatric hospital accreditation program. This application was determined to be complete on July 30, 2018. Under section 1865(a)(2) of the Act and our regulations at § 488.5 (Application and re-application procedures for national accrediting organizations), our review and evaluation of TJC will be conducted in accordance with, but not necessarily limited to, the following factors:

- The equivalency of TJC’s standards for psychiatric hospitals as compared with CMS’ psychiatric hospital CoPs.
- TJC’s survey process to determine the following:
  - The composition of the survey team, surveyor qualifications, and the ability of the organization to provide continuing surveyor training.
  - The comparability of TJC’s processes to those of State agencies, including survey frequency, and the ability to investigate and respond appropriately to complaints against accredited facilities.
- TJC’s processes and procedures for monitoring a psychiatric hospital found out of compliance with the TJC’s program requirements. These monitoring procedures are used only when TJC identifies noncompliance. If noncompliance is identified through validation reviews or complaint surveys, the state survey agency monitors corrections as specified at § 488.9(c).
- TJC’s capacity to report deficiencies to the surveyed facilities and respond to the facility’s plan of correction in a timely manner.
- TJC’s capacity to provide CMS with electronic data and reports necessary for effective validation and assessment of the organization’s survey process.

- The adequacy of TJC’s staff and other resources, and its financial viability.
- TJC’s capacity to adequately fund required surveys.
- TJC’s policies with respect to whether surveys are announced or unannounced, to assure that surveys are unannounced.
- TJC’s agreement to provide CMS with a copy of the most current accreditation survey together with any other information related to the survey as CMS may require (including corrective action plans).

III. Collection of Information Requirements

This document does not impose information collection requirements, that is, reporting, recordkeeping or third-party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

IV. Response to Comments

Because of the large number of public comments we normally receive on Federal Register documents, we are not able to acknowledge or respond to them individually. We will consider all comments we receive by the date and time specified in the DATES section of this preamble, and, when we proceed with a subsequent document, we will respond to the comments in the preamble to that document.

Upon completion of our evaluation, including evaluation of comments received as a result of this notice, we will publish a final notice in the Federal Register announcing the result of our evaluation.

V. Regulatory Impact Statement

This proposed notice does not impose any regulatory impact.

In accordance with the provisions of Executive Order 12866, this regulation was not reviewed by the Office of Management and Budget.

Dated: August 6, 2018.

Seema Verma.
Administrator, Centers for Medicare & Medicaid Services.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Evaluation of Domestic Victims of Human Trafficking Program.

OMB No.: 0970–0487.

Description: The Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS) is proposing data collection as part of the study, “Evaluation of the Domestic Victims of Human Trafficking (DVHT) Program”. This notice addresses the cross-site process evaluation to be conducted with the 13 FY 2016 DVHT grantees who were awarded 3-year cooperative agreements by the Office of Trafficking in Persons (OTIP). The intent of the DVHT Program is to build, expand, and sustain organizational and community capacity to deliver trauma-informed, strength-based, and victim-centered services for domestic victims of severe forms of human trafficking through coordinated case management, a system of referrals and the formation of community partnerships.

The objective of the evaluation is to describe the ways in which projects achieve the goals of the DVHT Program and examine types of models that serve victims of human trafficking. Evaluation questions are focused on understanding project and service delivery models, process, and implementation; including partnership and collaboration development; services offered to and received by victims, strategies to identify and engage survivors; ways projects define and monitor program successes and outcomes; and program challenges, achievements, and lessons learned. Information from the evaluation will assist federal, state, and community policymakers and funders in making decisions about future program models to serve domestic victims of human trafficking, as well as to refine evaluation strategies for future programs targeting trafficking victims.

The evaluation of the DVHT Program will document and describe grantees’ projects and implementation approaches, including their service models and community partners; services provided to clients (i.e., victims of severe forms of human trafficking); service delivery practices; strategies to meet survivors’ immediate and long-term housing needs; and approaches to engaging survivors in program development and service delivery.
Primary data for the evaluation will be collected via surveys with project directors, case managers, and key community partners; and semi-structured qualitative interviews, including telephone interviews with project directors, in-person interviews with select project staff, survivor leaders, and program partners, and individual interviews with program clients. Interviews from multiple perspectives will enhance the government’s understanding of appropriate service models and practice strategies for identifying, engaging, and meeting the needs of diverse populations of victims of severe forms of human trafficking. Data collection will take place after receiving OMB approval through March 2020.

Data collection for an exploratory evaluation of the DVHT FY15 grantees (“Domestic Human Trafficking Demonstration Projects”) is being conducted under a prior Information Collection Request under 0970–0487. The data have provided insight into approaches grantees used to enhance organizational and community capacity, identify domestic victims, and deliver case management and direct services in collaboration with their community partners. The currently proposed data collection for DVHT FY16 will build on this earlier data collection for the DVHT FY15 study to understand strategies and program models implemented by the grantees in various program contexts. All data collection approved for DVHT FY15 is complete.

Respondents: Project directors, case managers, survivor leaders, other select project staff, key community partners, and clients.

### ANNUAL BURDEN ESTIMATES

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Total number of respondents</th>
<th>Annual number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Annual burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Director Survey</td>
<td>13</td>
<td>7</td>
<td>1</td>
<td>.5</td>
<td>4</td>
</tr>
<tr>
<td>Partner Survey</td>
<td>260</td>
<td>130</td>
<td>1</td>
<td>.25</td>
<td>33</td>
</tr>
<tr>
<td>Case Manager Survey</td>
<td>130</td>
<td>65</td>
<td>1</td>
<td>.33</td>
<td>21</td>
</tr>
<tr>
<td>Project Director Interview #1</td>
<td>13</td>
<td>7</td>
<td>1</td>
<td>2</td>
<td>14</td>
</tr>
<tr>
<td>Project Director Interview #2</td>
<td>13</td>
<td>7</td>
<td>1</td>
<td>1.5</td>
<td>11</td>
</tr>
<tr>
<td>Site Visit Interview Guide</td>
<td>136</td>
<td>68</td>
<td>1</td>
<td>1.5</td>
<td>102</td>
</tr>
<tr>
<td>Client Interview Guide</td>
<td>40</td>
<td>20</td>
<td>1</td>
<td>1</td>
<td>20</td>
</tr>
</tbody>
</table>

Estimated Total Annual Burden Hours: 205.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: OPRE Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: OPREinfocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning 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. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: OIRA_SUBMISSION@OMB.EOP.GOV, Attn: Desk Officer for the Administration for Children and Families.

Emily B. Jabbour,
ACF/OPRE Certifying Officer.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

**Title:** 2019 National Survey of Early Care and Education

**OMB No.:** 0970–0391

**Description:** The Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing a data collection activity as part of the National Survey of Early Care and Education (NSECE) which will be conducted October 2018 through August 2019. The objective of the NSECE is to document the nation’s current supply of early care and education services (that is, home-based providers, center-based providers, and the center-based provider workforce). The 2019 NSECE will collect information on child care and early education providers that serve families with children from birth to 13 years in the country, as well as the early care and education (ECE) workforce providing these services. The proposed collection will consist of three coordinated nationally representative surveys:

1. A survey of individuals providing care for children under the age of 13 in a residential setting (Home-based Provider Interview), 2. a survey of providers of care to children ages 0 through 5 years of age (not yet in kindergarten) in a non-residential setting (Center-based Provider Interview), and 3. a survey conducted with individuals employed in center-based child care programs working directly with children in classrooms (Workforce Interview).

Both the home-based and center-based provider surveys will require a screener to determine eligibility for the main survey.

The 2019 NSECE data collection efforts will provide urgently needed information about the supply of child care and early education available to families across all income levels, including providers serving low-income families of various racial, ethnic, language, and cultural backgrounds, in diverse geographic areas. The provider data will include programs that do or do not participate in the child care subsidy program, are regulated, registered, or otherwise appear in state or national lists and are home-based providers or center-based programs (e.g., private, community-based child care, Head Start, and state or local Pre-K). Accurate data on the availability and characteristics of early care and education programs are essential to assess the current and changing landscape of child care and early education programs since the 2012 NSECE data collection, and to provide