

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0614]

Submission for Office of Management and Budget Review; Tribal Maternal, Infant, and Early Childhood Home Visiting Program: Demographic and Service Utilization Data Report and Performance Measurement Data Report

AGENCY: Office of Early Childhood Development (ECD), Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Early Childhood Development (ECD) is requesting a 3-year extension with revisions to annual reporting instruments under Office of Management and Budget (OMB) Control #: 0970–0614. This includes proposed revisions to the Demographic and Service Utilization Data Report (DSUR), an extension of the Performance Measurement Data Report (PMR) with no changes, and announces the discontinuation of the Quarterly Performance Report (QPR).

DATES: *Comments due* June 8, 2026.

ADDRESSES: The public may view and comment on this information collection

request at: https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202605-0970-002. You can also obtain copies of the proposed collection of information by emailing infocollection@acf.hhs.gov. Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: ECD is requesting approval for the Tribal Maternal, Infant, and Early Childhood Home Visiting (Tribal MIECHV) program information collection under OMB Control #: 0970–0614, which consists of the DSUR and the PMR. These instruments are used by Tribal MIECHV grant recipients to report annual data on participant demographics, service utilization, staffing, and required performance measures. ECD uses this information to monitor program implementation, assess progress in key outcome areas, inform technical assistance, and meet required annual reporting expectations.

The DSUR includes revisions to streamline reporting and reduce burden for Tribal MIECHV grant recipients. These revisions reduce the number of data reporting tables, remove data elements that are no longer needed, and update terminology to improve clarity and alignment with current reporting requirements. The changes simplify reporting while retaining information necessary for program administration and monitoring.

The PMR is included in this request as an extension with no changes to content; however, the estimated reporting burden has been updated based on findings from a 2024 administrative burden assessment. The PMR collects annual performance data related to benchmark areas required under statute and is used by ECD to assess grant recipient performance and report on program outcomes.

The QPR was removed from under this OMB number as ECD replaced the QPR with a smaller set of operational questions that will be collected through monthly calls, as approved under OMB #: 0970–0490. This change significantly reduces burden while maintaining necessary monitoring functions.

These updates reflect ECD’s ongoing effort to streamline Tribal MIECHV reporting, reduce administrative burden for grant recipients, and maintain the high-quality data needed to understand program performance and support Tribal communities effectively.

Respondents: Tribal MIECHV program grant recipients.

Annual Burden Estimates: Annual burden estimates have been updated based on findings from a 2024 administrative burden assessment of Tribal MIECHV reporting requirements. Revisions reflect reduced time to complete the streamlined DSUR, updated burden estimates for the PMR, and removal of burden associated with the discontinued QPR.

Instrument	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
Tribal MIECHV Demographic Service Utilization Data Report (Grant Recipients)	68	1	146	9,928
Tribal MIECHV Demographic & Service Utilization Data Report (Families)	2,087	1	30 Seconds	17
Tribal MIECHV Performance Measures Report	68	1	151.2	10,282
Estimated Total Annual Burden Hours	20,227

Authority: 42 U.S.C. 711.

Mary C. Jones,

ACF/OPRE Certifying Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #:0970–0519]

Proposed Information Collection Activity; National Human Trafficking Training and Technical Assistance Center Evaluation Package

AGENCY: Office on Trafficking in Persons, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office on Trafficking in Persons (OTIP), Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is requesting an extension of approval with revisions of an Office of Management and Budget (OMB) approved information collection: National Human Trafficking Training and Technical Assistance Center (NHTTAC) Evaluation Package (OMB #: 0970–0519; expiration date June 30, 2026).

DATES: *Comments due* July 6, 2026.

ADDRESSES: 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. 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: OTIP’s NHTTAC delivers training and technical assistance (T/TA) to inform and deliver a public health response to trafficking. In applying a public health approach, NHTTAC builds the capacity of professionals, organizations, and communities to identify and respond to the complex needs of all individuals who have experienced trafficking or who have increased risk for trafficking and address the root causes that put individuals, families, and communities at risk of trafficking. These efforts ultimately help improve the availability and delivery of coordinated and trauma-informed services before, during, and

after an individual’s trafficking exploitation.

NHTTAC provides a variety of services, programs, and facilitated T/TA sessions to improve service provision to people who have experienced trafficking or who have increased risk factors for trafficking, including the Stop, Observe, Ask, and Respond (SOAR) to Health and Wellness training; specialized T/TA; NHTTAC Customer Support; and information through resources and materials about trafficking. This information collection is intended to collect feedback from participants to assess T/TA provided by NHTTAC. Revisions have been made in order to reduce respondent burden where applicable. Additionally, since this collection was last renewed, the SOAR Demonstration Grant Program went into effect. The program’s goal is to fund the implementation of SOAR trainings and related capacity building efforts to identify, treat, and respond to

clients who have experienced human trafficking in healthcare settings. Feedback from SOAR Demonstration Grant Program recipients who participate in NHTTAC SOAR offerings is obtained through instruments approved within this NHTTAC Evaluation Package (0970–0519). Burden estimates have been adjusted to account for these SOAR Demonstration Grant Program participants where applicable.

Respondents: NHTTAC T/TA participants include OTIP grant recipients, including SOAR Demonstration Grant program recipients, individuals with lived experience, professionals who interact with and provide services to individuals who have experienced trafficking or are at risk of trafficking, including healthcare, behavioral health, public health, and human service practitioners, organizations, and communities.

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Universal T/TA Participant Feedback Long Version (full form) Short Version (partial form)	1,500	1	0.43	645	215
Intensive T/TA Participant Feedback	225,000	1	0.10	22,500	7,500
Follow-Up Feedback	600	1	1.17	702	234
Qualitative Guide	8,000	1	0.50	4,000	1,333
Network Survey	2,000	1	1.50	3,000	1,000
Client Satisfaction Survey	600	1	1.00	600	200
Resources Feedback	1,000	1	0.08	80	27
Requester Feedback	500	1	0.08	40	13
Requester Feedback	200	1	0.12	24	8
Estimated Total Annual Burden Hours					10,530

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: 22 U.S.C. 7104 and 22 U.S.C. 7105(c)(4).

Mary C. Jones,
ACF/OPRE Certifying Officer.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2023–D–2370]

Patient-Matched Guides for Orthopedic Implants; Guidance for Industry and Food and Drug Administration Staff; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability.

SUMMARY: The Food and Drug Administration (FDA or Agency) is announcing the availability of a final guidance titled “Patient-Matched Guides for Orthopedic Implants.” This guidance document provides recommendations regarding information that should be included in regulatory submissions for patient-matched guides for orthopedic implants. This guidance also provides recommendations that manufacturers should consider when developing their design process for these device types. This guidance is intended to promote clarity and transparency as to expectations regarding submission recommendations for orthopedic patient-matched guides. Following such recommendations may increase efficiency and consistency in review.