compliance with DNV's program requirements.

- Ability to report deficiencies to the surveyed hospital and respond to the hospital's plan of correction in a timely manner.
- Verification of DNV's agreement to provide CMS with a copy of the most current accreditation survey, together with any other information related to the survey as we may require, including corrective action plans.

IV. Analysis of and Responses to Public Comments on the Proposed Notice

In accordance with Section 1865(a)(3)(A) of the Act, on April 9, 2026, the proposed notice solicited public comments regarding whether DNV's requirements met or exceeded the Medicare conditions for hospitals. CMS received several comments, all of which supported the continued approval of DNV's hospital accreditation program. Commenters described DNV as fair, thorough, and knowledgeable of applicable standards and noted that its accreditation program supports hospital quality, patient safety, and effective hospital management. We thank the commenters for their input and have considered it when making our decision.

V. Provisions of the Final Notice

A. Differences Between DNV's Standards and Requirements for Accreditation and Medicare Conditions and Survey Requirements

We assessed DNV's hospital accreditation requirements and survey process in comparison with the Medicare CoPs of part 482 and the survey and certification process requirements of parts 488 and 489. Our review and evaluation of DNV's hospital application, which were conducted as described in section III. of this final notice, yielded the following areas where, as of the date of this final notice, DNV has completed revising its documentation in order to meet our requirements by:

- Revising the Survey Report and Corrective Action Plan Submittal Form to include an allowance for the Fire Safety Evaluation System (FSES) and revising the survey guidance to address the FSES process, required documentation, survey resubmittal requirements, and approval process.
- Revising the inspection, testing, and maintenance frequency guidance to define quarterly, semiannual, annual, 3-year, and 5-year frequencies consistent with CMS requirements and clarifying that the specified frequency is required unless otherwise permitted by the manufacturer or applicable National Fire Protection Association (NFPA) codes and standards.

B. Term of Approval

Based on our review and observations described in sections III. and V. of this final notice, we find that DNV provides reasonable assurance that accredited entities would meet or exceed the applicable Medicare conditions and we approve DNV as a national AO for hospitals that request participation in the Medicare program. The decision announced in this final notice is effective September 26, 2026, through September 26, 2032 (6 years). In accordance with § 488.5(e)(2)(i), the term of the approval will not exceed 6 years.

VI. 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. 3501 *et seq.*).

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Mehmet Oz, having reviewed and approved this document, authorizes Vanessa Garcia, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Vanessa Garcia,

Federal Register Liaison, Center for Medicare & Medicaid Services.

[FR Doc. 2026–19061 Filed 9–16–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0642]

Proposed Information Collection Activity; Diaper Distribution Demonstration and Research Pilot Beneficiary and Organizational Survey and Beneficiary Report

AGENCY: Office of Community Services, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Community Services (OCS), Administration for Children and Families (ACF), Department of Health and Human Services, is proposing to continue to collect data to understand diaper need and outcomes for beneficiaries of the Diaper Distribution Demonstration and Research Pilot (DDDRP). This collection (Office of Management and Budget (OMB) #: 0970–0642) currently includes the Beneficiary Report and Beneficiary Survey. No changes are proposed to the Beneficiary Report. OCS is proposing revisions to the Beneficiary Survey and proposes adding a new Organizational Survey.

DATES: Comments due November 16, 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: This notice is to invite public comments on OCS's proposal to revise the Beneficiary Survey, introduce a survey of grant recipients and their partners, and to continue to use the Beneficiary Report with no changes. This revision request would extend approval of information collection activities for an additional 3 years.

The DDDRP beneficiary survey was developed to examine diaper need and outcomes for beneficiaries served by DDDRP. It was piloted under the Formative Data Collections for ACF Program Support umbrella generic (OMB #: 0970–0531) with the first three cohorts of DDDRP grant recipients. To continue to learn about the people who receive grant services and the extent to which they achieve expected short-term outcomes, the updated proposed survey includes two versions: An enrollment version and a follow-up version.

- The Enrollment Version of the Beneficiary Survey is a revised version of the current Beneficiary Survey. This version will continue to collect demographic data on the children served and caregivers enrolling in the program; information about the employment, education, and income of caregivers; and indicators of diaper need. The survey has been revised to also include contact information for the caregiver, early learning environment participation of children, and diaper-related health. The survey has also been revised to remove several items that proved to be not informative enough to

warrant participant burden or that are inconsistent with administration priorities, including the size diaper each child wears, the language the caregiver speaks, and whether the caregiver is a single parent.

• The Follow up Version of the Beneficiary Survey is a new wave of collection for the survey, but it reduces the number of demographic items to focus on repeated measurement of employment, education, income, early learning environment participation, diaper need, and diaper health. It continues to collect contact information to ensure accurate individual-level linking of data across the two waves.

The DDDRP beneficiary report is a report submitted by grant recipients every 6 months that includes information on beneficiary characteristics and outcomes collected by grant recipient partners from beneficiaries. There are no changes proposed to this report.

Finally, the Organizational Survey is a new tool OCS has developed to capture baseline and follow-up data from grant recipients and partners to understand the extent to which participation in the DDDRP has improved organizational capacity to serve beneficiaries. It is based on findings from a recent implementation study that indicated what skills, capacities and knowledge previous DDDRP grant recipients and partners needed to have/develop to be successful.

Information collection materials will be translated into Spanish and may be translated into additional languages if necessary, based on beneficiaries enrolled by grant recipients. ACF acknowledges that English is the official language and authoritative version of all federal information and will note this on the translated material.

Respondents: Respondents for the Beneficiary Survey are the caregivers enrolling their family members with diaper needs in DDDRP services. Respondents for the Beneficiary Report are the grant recipients and their partners who collect and compile the data, as well as the beneficiaries who provide information about their characteristics and outcomes. Respondents to the Organizational Survey are staff at grant recipient and partner organizations most familiar with the execution of the grant.

Annual Burden Estimates

The estimated burden for the currently approved information collection activities is 8,178.89 hours. The estimated burden of this revised information collection is 5,185.83 hours, a 36 percent reduction in burden. OCS made several changes to survey instruments and fielding to reduce overall burden:

• *Beneficiary Survey—Enrollment Version:* OCS identified items in the Beneficiary Survey that were not informative enough for the evaluation to warrant participant burden or consistent with administration priorities. Specifically, OCS removed 6 currently approved survey questions. OCS also identified opportunities to program the Beneficiary Survey with new skip patterns, looping and pre-population of questions to reduce time needed to answer items. These changes led to a reduced burden estimate of up to 9 minutes per respondent (reduced from 10 minutes per respondent in the prior information collection). Additionally, OCS reduced the overall number of beneficiaries who will participate in the survey. In this revised request, OCS will only collect Beneficiary Survey data from beneficiaries who enroll during a defined 1-year period during the grant recipient's program.

• *Beneficiary Report—Grant Recipients:* OCS reduced the overall number of grant recipients who will need to collect information from beneficiaries and fill out the beneficiary reports, based on upcoming planned funding competitions.

• *Beneficiary Report—Partners:* OCS reduced the number of potential partners anticipated based on current reporting practices for grant recipients and new programmatic recommendations to collaborate with four or fewer partners. Previously, grant recipients were allowed to partner with as many organizations as desired.

• *Beneficiary Report—Beneficiaries:* OCS anticipates that fewer beneficiaries will need to provide information for the Beneficiary Report compared to the prior information collection as there are fewer grant recipients operating during this information collection period overall.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Beneficiary Survey—enrollment version	10,400	1	.15	1,560	520.00
Beneficiary Survey—follow-up version	9,100	1	.13	1,183	394.33
Organizational Survey—baseline version	70	1	.33	23.1	7.7
Organizational Survey—follow-up version	70	1	.25	17.5	5.83
Beneficiary Report—Grant Recipients	25	6	3	450	150.00
Beneficiary Report—Partners	113	6	10	6,780	2,260.00
Beneficiary Report—Beneficiaries	33,397	2	.083	5,543.9	1,847.97
Estimated Total Annual Burden Hours					5,185.83

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: Section 1110, Social Security Act, 42 U.S.C. 1310.

Samantha L. Illangasekare,

ACF/OPRE Certifying Officer.

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