

voluntarily relinquish its status as a PSO for any reason, or when a PSO's listing expires. AHRQ delisted the Hospital Rep Safety Solutions Corp., PSO number P0264, of its status as a PSO, when it failed to correct a finding of deficiency, and has delisted the PSO accordingly.

DATES: The delisting was effective at 12:00 Midnight ET (2400) on September 9, 2026.

ADDRESSES: The directories for both listed and delisted PSOs are ongoing and reviewed weekly by AHRQ. Both directories can be accessed electronically at the following HHS website: <https://www.pso.ahrq.gov/listed>.

FOR FURTHER INFORMATION CONTACT:

Cathryn Bach, Center for Quality Improvement and Patient Safety, AHRQ, 5600 Fishers Lane, MS 07E01D, Rockville, MD 20857; Telephone (toll free): (866) 403-3697; Telephone (local): (301) 427-1111; TTY (toll free): (866) 438-7231; TTY (local): (301) 427-1130; Email: psa@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION:

Background

The Patient Safety Act, 42 U.S.C. 299b-21 to 299b-26, and the related Patient Safety Rule, 42 CFR part 3, published in the **Federal Register** on November 21, 2008 (73 FR 70732-70814), establish a framework by which individuals and entities that meet the definition of provider in the Patient Safety Rule may voluntarily report information to PSOs listed by AHRQ, on a privileged and confidential basis, for the aggregation and analysis of patient safety work product.

The Patient Safety Act authorizes the listing of PSOs, which are entities or component organizations whose mission and primary activity are to conduct activities to improve patient safety and the quality of health care delivery.

HHS issued the Patient Safety Rule to implement the Patient Safety Act. AHRQ administers the provisions of the Patient Safety Act and Patient Safety Rule relating to the listing and operation of PSOs. The Patient Safety Rule authorizes AHRQ to list as a PSO an entity that attests that it meets the statutory and regulatory requirements for listing. A PSO can be "delisted" if it is found to no longer meet the requirements of the Patient Safety Act and Patient Safety Rule, when a PSO chooses to voluntarily relinquish its status as a PSO for any reason, or when a PSO's listing expires. Section 3.108(d) of the Patient Safety Rule requires AHRQ to provide public notice when it

removes an organization from the list of PSOs.

AHRQ has delisted the Hospital Rep Safety Solutions Corp. for cause. Accordingly, the Hospital Rep Safety Solutions Corp., P0264, was delisted effective at 12:00 Midnight ET (2400) on September 9, 2026.

More information on PSOs can be obtained through AHRQ's PSO website at <http://www.pso.ahrq.gov>.

Roger D. Klein,

Director.

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BILLING CODE 4160-90-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #:0970-0474]

Proposed Information Collection Activity; U.S. Repatriation Forms

AGENCY: Office of Human Services Emergency Preparedness and Response, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF) is requesting a 3-year extension of the U.S. Repatriation Program forms (OMB #0970-0474, expiration 1/31/2027). There are several changes requested to the thirteen forms. Burden estimates have also been updated.

DATES: *Comments due December 1, 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: The purpose of the U.S. Repatriation Program (Program) is to provide temporary assistance to eligible U.S. citizens and their dependents (repatriates) returned by the Department of State from a foreign country because of destitution, illness, war, threat of war, or a similar crisis, and who are without available resources, or (2) mental illness. Temporary assistance is provided upon their arrival in the

United States and is available initially for up to 90 days from a repatriate's date of arrival in the United States.

Temporary assistance is provided in the form of a service loan and is repayable to the U.S. Government.

Temporary assistance is defined in 42 U.S.C. 1313(c) as money payments, medical care, temporary lodging, transportation, and other goods and services necessary for the health or welfare of individuals, including guidance, counseling, and other welfare services provided to them within the United States upon their arrival in the United States. Other goods and services may include clothes, food, assistance with obtaining identification (driver's license, birth certificate), child care, and translation services.

The ACF Office of Human Services Emergency Preparedness and Response (OHSEPR), at the U.S. Department of Health and Human Services (HHS), administers the Program.

OHSEPR made changes to all thirteen forms to ensure the information collected aligns with Program statutes and regulations as well as the purpose and use of the form. Revisions include clarifying statutory authority and aligning data collection with policy. Forms were also simplified. These changes reduced the burden hours.

The following is a description of the proposed revisions:

Emergency Repatriation Eligibility Application (Form RR-01)

The purpose of this form is for U.S. citizens and their dependents to request temporary assistance during an emergency repatriation incident. To reduce the burden of reviewing numerous forms to receive assistance, proposed revisions include the following:

- Adding information about privacy and loan repayment

Emergency Repatriation Reimbursement Request (Form RR-02)

The purpose of this form is for states to request reimbursement for emergency repatriation expenditures. Proposed revisions include the following to align with deregulatory priorities:

- Changing reference 45 CFR part 75 to 2 CFR part 200
- Removing references to 45 CFR part 211 and 45 CFR part 212

Loan Waiver and Deferral Application (Form RR-03)

The purpose of this form is for repatriates to request a waiver or deferral of their loan for temporary assistance received through the U.S. Repatriation Program. Proposed

revisions include the following to align with deregulation changes:

- Removing references to 45 CFR part 211 and 45 CFR part 212

Routine Repatriation Reimbursement Request (Form RR-04)

The purpose of this form is for state and local service providers to submit reimbursement requests for providing temporary assistance to repatriates under the U.S. Repatriation Program. Proposed revisions include the following to align with deregulatory priorities and decrease fraud, waste, and abuse:

- Changing reference 45 CFR part 75 to 2 CFR part 200
- Removing references to 45 CFR part 211 and 45 CFR part 212
- Adding information on supporting documentation for administrative costs
- Updating information on where to submit form

Repatriation Repayment and Privacy Agreement (Form RR-05)

The purpose of this form is for repatriates to agree to accept temporary assistance under the U.S. Repatriation Program, to agree to repay HHS for temporary assistance, and to allow HHS to share personal information for benefits purposes. Proposed revisions include the following to align with deregulatory priorities and ACF priorities:

- Removing references to 45 CFR part 211 and 45 CFR part 212
- Adding information about automatic waivers for wrongful detainees and kin taking custody of unaccompanied minors

Refusal of Temporary Assistance (Form RR-06)

The purpose of this form is for repatriates to refuse to accept temporary assistance under the U.S. Repatriation Program after receiving information about the Program. Proposed revisions include adding the following to align with deregulation:

- Removing references to 45 CFR part 211 and 45 CFR part 212

Temporary Assistance Extension Request (Form RR-07)

The purpose of this form is for repatriates to request an extension of temporary assistance beyond the initial 90-day eligibility period. Proposed

revisions include the following to align with deregulatory priorities:

- Removing references to 45 CFR part 211 and 45 CFR part 212
- Removing collection of dependent information
- Removing questions on lawsuits, assets, fixed monthly expenses, and loans and liabilities

Needs Assessment Form (Form RR-09)

The purpose of this form is for repatriation case workers to collect information on the needs of repatriates. This is a new form. Information collected includes repatriation program case information, repatriate arrival information, repatriate background information, dependent information, contact information, engagement information, valid identification information, information on need for medical care and accessibility and functional assistance, information on need for temporary lodging, information on need for local transportation, information on need for cash assistance, information on need for food assistance, information on need for translation assistance, information on need for legal aid, information on need for vocational training assistance, information on need for childcare assistance, information on need for other assistance.

State Contact List

The purpose is to ensure current and accurate points-of-contact within states and territories for the U.S. Repatriation Program routine and emergency operations.

Proposed revisions include the following to reduce burden to the states:

- Separately asking for the names of contacts by role and the state departments and agencies involved in repatriation

Repatriation Training and Technical Assistance Request

States, territories, counties, and local service providers may use this form to request training and technical assistance on the U.S. Repatriation Program via a web portal account. Proposed revisions include the following to reduce burden on the states:

- Combining categories for “Emergency Repatriation—Financial Reimbursement” and “Routine Repatriation—Financial Reimbursement”
- Combining categories for “Emergency Repatriation—Unaccompanied

Minors” and “Routine Repatriation—Unaccompanied Minors”

- Adding question on delivery preference

Post-Training Survey

The purpose of this survey is to receive feedback on trainings to improve the support for and customer experience of states, territories, and local service providers supporting the U.S. Repatriation Program. Proposed revisions include the following to reduce burden for respondents and focus on program improvement:

- Removing questions on number of years in position
- Changing training evaluation from questions to statements
- Changing reference to “your position” to “your role” in regards to relevance of training
- Changing question on training engagement from “interactive and engaging” to “engaging and supported my learning”
- Changing question on material from “easy to understand” to “clear and easy to understand”
- Changing question asking respondent to rate the quality of the multimedia to asking respondent whether the multimedia “supported my learning”
- Removing question on training meeting expectations
- Removing question on asking respondent to rate the quality of the training session
- Removing question on how multimedia could be improved
- Adding question on how prepared respondent feels to apply what they have learned

Emergency Repatriation Cooperative Agreement Reporting Template

The purpose of this reporting template is for states to report whether they conducted any emergency repatriation operations over the reporting period, and if so, to report on emergency repatriation center operations, immediate support services and resources offered, coordination and information sharing, demobilization, and lessons learned. This is a new form.

Respondents: States, territories, local social service providers, administrative staff, repatriates, and authorized representatives of repatriates.

Annual Burden Estimates:

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Annual burden hours
Emergency Repatriation Eligibility Application	250	1	0.5	125
Emergency Repatriation Reimbursement Request	10	1	0.3	3
Loan Waiver and Deferral Application	25	1	0.5	12.5
Routine Repatriation Reimbursement Request	55	2	0.3	33
Repatriation Repayment and Privacy Agreement	800	1	0.17	136
Refusal of Temporary Assistance	50	1	0.05	2.5
Temporary Assistance Extension Request	125	1	0.3	37.5
Emergency Repatriation Request for Cost Approval and Federal Support	5	10	0.3	15
Repatriation State Contact List	55	1	0.17	9.35
Repatriation Training and Technical Assistance Request Form	55	1	0.25	13.75
Repatriation Post-Training Survey	55	2	0.17	18.7
Needs Assessment	800	1	0.75	600
Emergency Repatriation Cooperative Agreement Reporting Template	13	1	0.4	5.2
Estimated Total Annual Burden Hours:	1,011.5			

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.

Authority: 42 U.S.C. 1313, 24 U.S.C. 321–329.

Samantha L. Illangasekare,
ACF/OPRE Certifying Officer.

[FR Doc. 2026–20265 Filed 10–1–26; 8:45 am]

BILLING CODE 4184–PL–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning

individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Musculoskeletal, Oral and Skin Sciences Integrated Review Group; Skeletal Structure, Physiology and Disease Study Section.

Date: October 27–28, 2026.

Time: 9:00 a.m. to 7:00 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Amber Taylor Collins, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 827–5245, amber.collins@nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Medical Imaging Research.

Date: October 27–28, 2026.

Time: 9:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Debanjan Goswami, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Office 810–G, Bethesda, MD 20892, (301) 451–1587, debanjan.goswami@nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; RFA–TR–25–002: Review of R21 applications for Concept Studies for Rare Diseases.

Date: October 27, 2026.

Time: 9:30 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Lee Warren Slice, Ph.D., Scientific Review Officer, Center for

Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 867–5309, slicelw@mail.nih.gov.

Name of Committee: Biological Chemistry and Macromolecular Biophysics Integrated Review Group; Chemical Biology and Probes Study Section.

Date: October 27–28, 2026.

Time: 9:30 a.m. to 8:30 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Prema Chandrasekhar Iyer, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 480–1821, prema.iyer@nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Fellowships: Neurobiology of Development, Aging, and Cognition.

Date: October 27–28, 2026.

Time: 9:30 a.m. to 7:30 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: John Drake Morgan, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Dr., Room 1015A, Bethesda, MD 20892, (301) 827–9283, morganjd@csr.nih.gov.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Special: Integrative Myocardial Physiology.

Date: October 27–28, 2026.

Time: 9:30 a.m. to 6:30 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Sara Ahlgren, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, RM 4136,