

4. Reduction in crime or domestic violence
5. Improvement in family economic self-sufficiency
6. Improvement in the coordination and referrals for other community resources and supports

As part of their implementation plans, Tribal MIECHV grantees are required to propose a plan for meeting the benchmark requirements specified in the legislation and must report data annually to HHS, with improvement assessed at the end of Year 4 and Year 5 of their 5-year grants, (i.e. after 3 years of implementation and at the end of their 5-year grant).

The Tribal HV Form 2 will be used by Tribal MIECHV grantees to begin

collecting performance data in October 2017 (pending approval of their benchmark plans) and then reporting performance data starting in October 2018, pending OMB approval. The Tribal HV Form 2 is new to the MIECHV Program information system and is remotely similar to the currently-approved Tribal HV Form 3 (OMB #0915-0357). The creation of Tribal HV Form 2 is due to the added level of specificity and revised performance reporting requirements for grantees to report benchmarks data.

Specifically, ACF will use the proposed Tribal HV Form 2 to:

- Track and improve the quality of benchmark measure data submitted by the Tribal MIECHV grantees;

- Improve program monitoring and oversight; and
- Ensure adequate and timely reporting of program data to relevant federal agencies and stakeholders including the Congress, and members of the public.

Tribal HV Form 2 will provide a template for Tribal MIECHV grantees to report data on their progress under the six benchmark areas. Overall, this information collection will provide valuable information to HHS that will guide understanding of Tribal MIECHV grantees and the provision of technical assistance.

*Respondents:* Tribal Maternal, Infant, and Early Childhood Home Visiting Program Grantees

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
Tribal Maternal, Infant, and Early Childhood Home Visiting Performance Reporting Form .....	20	1	500	10,000

*Estimated Total Annual Burden Hours:* 10,000.

**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](mailto: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](mailto:OIRA_SUBMISSION@OMB.EOP.GOV), Attn: Desk Officer for the Administration for Children and Families.

**Mary Jones,**  
*ACF/OPRE Certifying Officer.*  
 [FR Doc. 2017-10226 Filed 5-18-17; 8:45 am]  
**BILLING CODE 4184-77-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

Proposed Projects:  
*Title:* Head Start Program Information Report.

*OMB No.:* 0970-0427.

*Description:* The Office of Head Start within the Administration for Children

and Families, United States Department of Health and Human Services, is proposing to renew, without changes, authority to collect information using the Head Start Program Information Report, monthly enrollments, contacts, locations, and reportable conditions. All information is collected electronically through the Head Start Enterprise System (HSES). The PIR provides information about Head Start and Early Head Start services received by the children and families enrolled in Head Start programs. The information collected in the PIR is used to inform the public about these programs, to make periodic reports to Congress about the status of children in Head Start programs as required by the Head Start Act, and to assist the administration and training/technical assistance of Head Start programs.

*Respondents:* Head Start and Early Head Start program grant recipients.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Head Start Program Information Report .....	3,267	1	4	13,068
Grantee Monthly Enrollment Reporting .....	2,049	12	0.05	1,229
Contacts, Locations & Reportable Conditions .....	3,267	1	0.25	817

*Estimated Total Annual Burden Hours:* 15,114.

In compliance with the requirements of the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. Chap 35), the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201. Attn: ACF Reports Clearance Officer. Email address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

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.

**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 2017–10150 Filed 5–18–17; 8:45 am]  
**BILLING CODE 4184–40–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Community Services Block Grant (CSBG) Model State Plan (Revision).

*OMB No.:* 0970–0382.

*Description:* Section 676 of the Community Services Block Grant (CSBG) Act requires States, including the District of Columbia and the Commonwealth of Puerto Rico, and U.S. territories applying for CSBG funds to submit an application and plan (Model State Plan). The CSBG State Plan submitted by States must meet statutory requirements prior to being funded with CSBG funds. Applicants have the option to submit a detailed plan annually or biannually. Entities that submit a biannual plan must provide an

abbreviated plan the following year if substantial changes to the initial plan will occur.

In 2015, the Model State Plan was substantially revised by automating the form, streamlining the information, and incorporating accountability measures that include customer satisfaction information from eligible entities that receive a proportional share of CSBG funding through State CSBG lead agencies along with technical assistance, monitoring, and other programmatic support.

In fall 2015, the Office of Community Services (OCS) used the American Customer Satisfaction Index (ACSI) to obtain feedback from CSBG eligible entities about services provided by the state CSBG Lead Agencies, as detailed in the new State Accountability Measures. OCS also obtained feedback from state CSBG Lead Agencies on services provided by the federal agency, as outlined in the new Federal Accountability Measures. Both OCS and state CSBG Directors received their state survey results in February 2016.

To support ongoing implementation of state accountability measures related to customer satisfaction from eligible entities, OCS plans to survey eligible entities using the ACSI survey instrument. No changes are planned from the content of the 2015 survey.

*Respondents:* CSBG eligible entities.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACSI CSBG Eligible Entity Survey .....	1035	1	.5	517.5

*Estimated Total Annual Burden Hours:* 517.5.

*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. Attention Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: [infocollection@acf.hhs.gov](mailto:infocollection@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](mailto:OIRA_SUBMISSION@OMB.EOP.GOV), Attn: Desk Officer for the Administration for Children and Families.

**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 2017–10209 Filed 5–18–17; 8:45 am]  
**BILLING CODE 4184–27–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Submission for OMB Review; 30-Day Comment Request: Application Process for Clinical Research Training and Medical Education at the NIH Clinical Center and Its Impact on Course and Training Program Enrollment and Effectiveness (Clinical Center)**

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information