

**FEDERAL FINANCIAL INSTITUTIONS  
EXAMINATION COUNCIL**

[Docket No. AS22–03]

**Appraisal Subcommittee Notice of  
Meeting****AGENCY:** Appraisal Subcommittee of the Federal Financial Institutions Examination Council.**ACTION:** Notice of meeting.

*Description:* In accordance with Section 1104(b) of Title XI of the Financial Institutions Reform, Recovery, and Enforcement Act of 1989, as amended, notice is hereby given that the Appraisal Subcommittee (ASC) will meet in open session for its regular meeting:

*Location:* This will be a virtual meeting via Zoom. Please visit the agency's homepage ([www.asc.gov](http://www.asc.gov)) and access the provided registration link in the What's New box. You MUST register in advance to attend this Meeting.

*Date:* March 9, 2022.*Time:* 10:00 a.m. ET.*Status:* Open.**Reports**

Chairman  
Executive Director  
Grants Director  
Financial Manager

**Action and Discussion Items**

Approval of Minutes  
December 8, 2021 Special Meeting Minutes  
Amendment to FY22 ASC Budget  
7-Hour National USPAP Update Course  
Selection of ASC Vice Chair

*How to Attend and Observe an ASC Meeting:* The meeting will be open to the public via live webcast only. Visit the agency's homepage ([www.asc.gov](http://www.asc.gov)) and access the provided registration link in the What's New box. The meeting space is intended to accommodate public attendees. However, if the space will not accommodate all requests, the ASC may refuse attendance on that reasonable basis. The use of any video or audio tape recording device, photographing device, or any other electronic or mechanical device designed for similar purposes is prohibited at ASC Meetings.

**James R. Park,***Executive Director.*

[FR Doc. 2022–04166 Filed 2–25–22; 8:45 am]

**BILLING CODE 6700–01–P****FEDERAL FINANCIAL INSTITUTIONS  
EXAMINATION COUNCIL**

[Docket No. AS22–02]

**Appraisal Subcommittee; Notice of  
Meeting; Cancellation****AGENCY:** Appraisal Subcommittee of the Federal Financial Institutions Examination Council.**ACTION:** Notice of meeting; cancellation.

The Special Meeting, which was published in accordance with Section 1104 (b) of Title XI of the Financial Institutions Reform, Recovery, and Enforcement Act of 1989, as amended, at 87 FR 8840, February 16, 2022 and scheduled for Wednesday, February 23, 2022 at 10:00 a.m. ET, was cancelled.

**James R. Park,***Executive Director.*

[FR Doc. 2022–04075 Filed 2–25–22; 8:45 am]

**BILLING CODE 6700–01–P****FEDERAL RESERVE SYSTEM****Formations of, Acquisitions by, and  
Mergers of Bank Holding Companies**

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)).

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E.

Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than March 28, 2022.

A. *Federal Reserve Bank of San Francisco* (Sebastian Astrada, Director, Applications) 101 Market Street, San Francisco, California 94105–1579:

1. *Seattle Bancshares, Inc., Seattle, Washington*; to become a bank holding company by acquiring Seattle Bank, Seattle, Washington.

Board of Governors of the Federal Reserve System, February 22, 2022.

**Michele Taylor Fennell,***Deputy Associate Secretary of the Board.*

[FR Doc. 2022–04069 Filed 2–25–22; 8:45 am]

**BILLING CODE 6210–01–P****DEPARTMENT OF HEALTH AND  
HUMAN SERVICES****Agency for Healthcare Research and  
Quality****Agency Information Collection  
Activities: Proposed Collection;  
Comment Request****AGENCY:** Agency for Healthcare Research and Quality, HHS.**ACTION:** Notice

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project “AHRQ’s National Nursing Home COVID–19 Coordinating Center.” This proposed information collection was previously published in the **Federal Register** on December 8th, 2021 and allowed 60 days for public comment. AHRQ did not receive comments from members of the public. The purpose of this notice is to allow an additional 30 days for public comment.

**DATES:** Comments on this notice must be received by March 30, 2022.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

**FOR FURTHER INFORMATION CONTACT:**

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at [doris.lefkowitz@ahrq.hhs.gov](mailto:doris.lefkowitz@ahrq.hhs.gov).

**SUPPLEMENTARY INFORMATION:****Proposed Project****AHRQ's National Nursing Home COVID-19 Coordinating Center**

As of February 3, 2022, nursing homes have reported 902,964 confirmed cases of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection and coronavirus disease since 2019 (COVID-19), resulting in over 147,000 COVID-19-related deaths. The U.S. Department of Health and Human Services (HHS) has distributed funds to nursing homes and launched several initiatives to improve nursing home safety and infection control. AHRQ's National Nursing Home COVID-19 Action Network (<https://www.ahrq.gov/nursing-home/about/index.html>) (the Network) is a cornerstone of HHS's response, intended to provide training and assistance to nursing homes on best practices to minimize transmission of SARS-CoV-2. The Network expands AHRQ's programmatic efforts to address quality and safety in long-term care, and aligns with other agency efforts to provide COVID-19 guidance to nursing homes. As the pandemic continues, nursing homes require easy access and implementation support for up-to-date best practices on SARS-CoV-2 infection control, COVID-19 care and management, and safety measures to protect residents and staff.

AHRQ's National Nursing Home COVID-19 Coordinating Center plays a complementary role to the Network, serving as a bridge between AHRQ's Network initiatives and the nursing home quality improvement (QI) community. The Coordinating Center is tasked with (1) coordinating engagement with scientific and policy stakeholders to identify safety needs and best practices, (2) ensuring coordinated development and dissemination of QI tools and other resources, and (3) assessing the effectiveness of the Network in providing training and mentorship to support nursing homes in responding to the COVID-19 pandemic.

As part of the Coordinating Center activities, AHRQ seeks to conduct an assessment of whether and how the Network activities aided the nursing homes' efforts to mitigate the challenges posed by the COVID-19 pandemic. The goals of the performance assessment are to:

1. Assess the reach, retention, and engagement of the Network;

2. study the implementation approach, gaps and barriers;

3. study the long-term impact, sustainability, and replicability of the training program and Network activities.

This study is being conducted by AHRQ through its Coordinating Center contractor, NORC at the University of Chicago (NORC), pursuant to AHRQ's statutory authority to conduct and support training and technical assistance on health care and on systems for the delivery of such care. 42 U.S.C. 299a.

**Method of Collection**

To further achieve the goals of this performance assessment, AHRQ is requesting OMB approval for new data collection. More specifically, the new data collection activities intend to collect systematic information from nursing homes on the following:

- Motivations for participation and non-participation in the Network
- Context of participation (including state and local context, and participation in other COVID-19 related-initiatives)
- Perceptions on recruitment, engagement, and retention, including facilitators and barriers of engagement and retention
- Perceptions on the Network training and mentorship resources, including access to and utility of the Network training and resources
- Gaps in knowledge, skills, and resources required for identifying residents and staff infected with COVID-19
- Impacts on the prevention and spread of SARS-CoV-2, implementation of best practice safety measures; improvement of quality of care for residents with mild and asymptomatic cases; and reduction of social isolation for residents, families, and staff

The primary data collection includes the following activities:

- Survey of all participating nursing homes (approximately 8,308) and a 50% representative sample of nonparticipating nursing homes (approximately 2,782) eligible for the Provider Relief Fund. Separate survey instruments will be used for network participants ("Participant Survey") and non-participants ("Non-Participant Survey"). The Participant Survey will be conducted primarily via a secure web-based platform. The Non-Participant Survey will be conducted via web and telephone.

- Key informant interviews with up to 96 individuals from 32 nursing homes participating in the Network across all assessment domains,

conducted virtually on a secure platform.

Information collected will inform whether and how the Network activities aided the nursing homes' efforts to mitigate the challenges posed by the COVID-19 pandemic. This data collection effort will also provide information on why nursing homes may not have been able to participate in the Network (Non-Participant Survey). Findings from the assessment will allow AHRQ to:

- Assess the Network's reach and the effectiveness of the retention and engagement strategies;
- Study implementation of the Network's training sessions, mentorship and technical assistance activities, and dissemination of the safety and quality improvement tools;
- Study the Network's impact on ensuring availability of protective equipment, rapid identification of nursing home residents and staff infected with SARS-CoV-2, entry and transmission of COVID-19, and improving health outcomes; and
- Study the long-term impact, sustainability, and replicability of the training program and Network activities to address other patient safety and quality improvement priorities.

**Estimated Annual Respondent Burden**

*Survey.* The nursing home survey will have two survey instruments:

- Participant Survey for nursing home facilities that participated in the Network
- Non-Participant Survey for nursing homes that did not participate in the Network

For the Participant Survey we expect that 1,662 participants (20% response rate) will agree to participate on behalf of their facilities and that the survey will take about 20 minutes to complete. For the Non-Participant Survey, we expect that 556 participants will agree to participate (20% response rate) on behalf of their facilities and that the survey will take about 5 minutes to complete. This estimate is based on prior provider survey experience and the response rate for the Customer Satisfaction survey which was approximately 20%.

*Key Informant Interviews.* Key informant interviews will be conducted with up to 32 nursing homes (up to 3 staff from each nursing home in each interview, for a total of 96 staff) involved in the Network. All interviews are expected to last 60 minutes, including time for respondents to provide verbal consent for participation and ask any questions at the start.

The total annual burden hours for the survey and key informant interviews are estimated to be 688 hours, as shown in Exhibit 1.

EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Hours per response	Total burden hours
Survey instrument—participant .....	1,662	.33	548
Survey instrument—nonparticipant .....	556	.08	44
Nursing Home Key Informant Interview .....	96	1	96
Total .....	2,314	.....	688

Exhibit 2 shows the estimated annual cost burden associated with the respondents' time to participate in this information collection, which comes to \$41,837.28

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate **	Total cost burden
Survey instrument—participant .....	1,662	548	<sup>1</sup> \$60.81	\$33,323.88
Survey instrument—nonparticipant .....	556	44	<sup>1</sup> 60.81	2,675.64
Nursing Home Key Informant Interview (Management) .....	96	96	<sup>1</sup> 60.81	5,837.76
Total .....	2,314	688	.....	41,837.28

\*\* Wage rates were calculated using the mean hourly wage from the U.S. Department of Labor, Bureau of Labor Statistics, May 2020 National Occupational Employment and Wage Estimates for the United States, [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm).

<sup>1</sup> Average rate for Nursing Care Facilities: Management Occupations.

**Request for Comments**

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3520, comments on AHRQ’s information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ’s health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ’s estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency’s subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: February 22, 2022.

**Marquita Cullom,**  
Associate Director.

[FR Doc. 2022–04102 Filed 2–25–22; 8:45 am]

BILLING CODE 4160–90–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

[OMB No. 0970–0060]

**Submission for OMB Review; Annual Report on Households Assisted by the Low Income Home Energy Assistance Program (LIHEAP)**

**AGENCY:** Office of Community Services, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Community Services (OCS), Division of Energy Assistance, is requesting a 3-year extension of the Household Report Form (OMB #0970–0060, expiration 02/28/2022). Submission of the completed report is one requirement for LIHEAP grant recipients applying for federal LIHEAP block grant funds. OCS proposes minor changes related to reporting of supplemental funding and to update reporting dates and number of respondents.

**DATES:** *Comments due within 30 days of publication.* OMB must make a decision about 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.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). One can find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. You can also obtain copies of the proposed collection of information by emailing [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). Identify all emailed requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* States, the District of Columbia, and the Commonwealth of Puerto Rico are required by the Low-Income Energy Assistance Act of 1981 (42 U.S.C. 8624, Sec 2610) to report statistics for the previous federal fiscal year (FFY) on the following:

- Assisted and applicant households, by type of LIHEAP assistance and funding source;
- Assisted households receiving nominal payments of \$50 or less, by funding source;
- Assisted households receiving only utility payment assistance, by funding source; this information will