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SUPPLEMENTARY INFORMATION: In Fiscal Year 2023, OCS published a total of 11 separate new competitive grant opportunities for the RPIC, each corresponding to a specific ACF region.¹ Each NOFO mandated that applicants

must be physically located in the ACF region of their application. As the merit review process was initiated, OCS identified that Regions 3, 6, and 7 were not represented by eligible applicants due to their inadvertent error of applying for a different region's NOFO rather than their own. This supplement will enable the current award recipients

to support and sustain the continuance of vital regional CSBG T/TA strategies and activities to align the period of performance, activities, timelines, and OCS oversight among all CSBG regional T/TA award recipients.

OCS announces the intent to award the following supplement awards:

Recipient	Award amount
Maryland Association of Community Action Agencies, Annapolis, Maryland	\$1,200,000
Oklahoma Association of Community Action Agencies, Inc., Edmond, Oklahoma	1,200,000
Kansas Association of Community Action Program, Inc., Topeka, Kansas	1,200,000

Statutory Authority: Sections 674(b)(2)(A) and 678A of the CSBG Act, as amended (42 U.S.C. 9903(b)(2)(A) and 9913).

Karen D. Shields,

Senior Grants Policy Specialist, Office of Grants Policy, Office of Administration.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Home-Based Child Care Toolkit for Nurturing School-Age Children Study (New Collection)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, United States Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF) Office of Planning, Research, and Evaluation (OPRE) at the U.S. Department of Health and Human Services (HHS) is proposing to collect information to examine a toolkit of new measures designed to assess and strengthen the quality of child care, the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC Toolkit). This study aims to build evidence about the English version of the HBCC-NSAC

Toolkit for use by/with providers caring for children in a residential setting (*i.e.*, home-based child care [HBCC]).

DATES: *Comments due within 60 days of publication.* 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.

ADDRESSES: You can obtain copies of the proposed collection of information and submit comments by emailing OPREinfocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The HBCC-NSAC Toolkit is designed for home-based providers who regularly care for at least 1 school-age child who is not their own. The purpose of the HBCC-NSAC Toolkit is to help home-based providers identify their caregiving strengths and areas for growth. The HBCC-NSAC Toolkit consists of a self-administered provider questionnaire (composed of multiple newly developed measures) and a family communication questionnaire (composed of 1 communication tool). For validation purposes, the study will include the provider questionnaire from the HBCC-NSAC Toolkit with additional items from existing measures and a separate family survey with child and family background information items and items from an existing measure. A subset of providers will be observed with an existing observation measure. Study participants will include home-based providers who can complete the

provider questionnaire in English. They must currently care for at least 1 school-age child (age 5 and in kindergarten, or ages 6 through 12) in a home for at least 10 hours per week and for at least 8 weeks in the past year. These providers may also care for younger children (ages birth through 5 and not yet in kindergarten). Families (a parent or guardian of school-age children receiving care in the HBCC setting) who can complete the family survey in English will also be included in the study. The study will be based on a purposive sample of home-based providers in at least 10 geographic locations to maximize variation in the sample. OPRE proposes to collect survey and observational data from home-based providers who are licensed or regulated by states to provide child care and early education (CCEE) and providers who are unlicensed or legally exempt from state regulations for CCEE. Study participants may or may not participate in the child care subsidy program. The data collection activities are designed to provide critical information that is needed to analyze the reliability and validity of the HBCC-NSAC Toolkit's provider questionnaire. The resulting data will help ACF understand if the HBCC-NSAC Toolkit's provider questionnaire can be used to support home-based providers in identifying and reflecting on their caregiving strengths and areas for growth.

Respondents: Home-based providers; families of the children cared for by the providers.

¹ Note: Due to the size of Region 4, OCS funds two RPICs in the region (4a and 4b).

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total/annual burden (in hours)
1. Provider telephone script and recruitment information collection	204	1	0.33	67
2. Provider telephone script and recruitment information collection including observations	150	1	.42	63
3. HBCC–NSAC Toolkit provider questionnaire	150	1	.75	113
4. Family survey	166	1	0.25	42

Estimated Total Annual Burden Hours: 285.

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. 9858.

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2023–21649 Filed 9–29–23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Application Requirements for the Low Income Home Energy Assistance Program (LIHEAP) Model Plan Application (Office of Management and Budget #0970–0075)

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

ACTION: Request for public comments.

SUMMARY: The Office of Community Services (OCS), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting to extend the currently approved Low Income Home Energy Assistance Program

(LIHEAP) Model Plan Application (OMB #0970–0075, expiration 12/31/2023) through August 31, 2024, and then making significant revisions to the FY 2025 application to be effective September 1, 2024. This notice outlines the proposed revisions for FY 2025.

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above.

ADDRESSES: Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing *infocollection@acf.hhs.gov*. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: States, including the District of Columbia, tribes, tribal organizations, and U.S. territories applying for LIHEAP block grant funds must, prior to receiving federal funds, submit an annual application (Model Plan) that meets the LIHEAP statutory and regulatory requirements. In addition to the Model Plan, grant recipients are also required to complete the Mandatory Grant Application, SF–424—Mandatory, which is included as the first section of the Model Plan.

The LIHEAP Model Plan is an electronic form and is submitted to ACF/OCS through the On-Line Data Collection (OLDC) system within GrantSolutions, which is currently being used by all LIHEAP grant recipients to submit other required LIHEAP reporting forms. To reduce the reporting burden, all data entries from each grant recipient’s prior year’s submission of the Model Plan in OLDC are saved and re-populated into the form for the following fiscal year’s application.

OCS is requesting the current LIHEAP Model Plan form to be extended through August 31, 2024. The currently approved form and justification package can be reviewed here: [https://](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202009-0970-011)

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OCS proposes the following changes to the LIHEAP Model Plan form beginning with FY 2025 reporting effective September 1, 2024:

SF–424 Model Plan

- *4a:* Change from “Federal Entity Identifier” to “Unique Entity Identifier (UEI).”
- *7b and c:* Remove UEI is requested in 4a.
- *7f:* Add after current language “(This person will be listed on Notice of Funding Awards and on the U.S. Department of Health and Human Services’ LIHEAP contact list web page)”
 - Remove Prefix, Suffix, Middle Name and Organizational Affiliation.
- *8a:* Remove the “a” after 8 “Type of Applicant”
- *Add:* 8a Is the applicant a Tribal Consortium?
 - *Add:* 8b If yes, please attach at least one the following documentation:
 - (1) Current State-Tribe Agreement between their state and the Consortium, signed by the State Chief Executive Officer (such as a Governor or the delegate) and the Consortium President;
 - (2) Consortium letter listing the Tribes and signed by the elected Tribal Chief or President of each Tribe in the Consortium and signed by the Consortium President;
 - (3) A current resolution letter from each tribe in the Consortium, signed by the elected Tribal Chief or President of that Tribe. Each resolution letter needs to state that the Consortium has the Tribes’ permission to apply for, and administer, LIHEAP on their behalf; needs to designate a time period for the permission or until rescinded or revoked.
 - *8b:* Remove, not utilized.
 - *9:* Remove “Name of Federal Agency”—not used.
 - *13:* Change to “CONGRESSIONAL DISTRICTS OF APPLICANT”
 - Eliminate 13a and b.—Already answered in #7; and Eliminate “Attach