

the basic clause requires contractors to submit a written proposed plan to provide and maintain work environments and procedures that will safeguard the public and Government personnel, property, materials, supplies, and equipment exposed to contractor operations and activities; avoid interruptions of Government operations and delays in project completion dates; and control costs in the performance of this contract. The plan must include an analysis of the significant hazards to life, limb, and property inherent in contract work performance and a plan for controlling these hazards. The contracting officer and technical representatives analyze the Accident Prevention Plan to determine if the proposed plan will satisfy the safety requirements identified in the contract, to include certain provisions of the Occupational Safety and Health Act (per FAR 36.513(c)) and applicable standards issued by the Secretary of Labor at 29 CFR part 1926 and 29 CFR part 1910.

- FAR 52.236–15, Schedules for Construction Contracts. This clause requires contractors to prepare and submit to the contracting officer for approval three copies of a practicable schedule showing the order in which the contractor proposes to perform the work, and the dates on which the contractor contemplates starting and completing the several salient features of the work (including acquiring materials, plant, and equipment). The contracting officer uses this information to monitor progress under a Federal construction contract when other management approaches for ensuring adequate progress are not used.

- FAR 52.236–19, Organization and Direction of the Work. This clause requires contractors, under cost-reimbursement construction contracts, to submit to the contracting officer a chart showing the general executive and administrative organization, the personnel to be employed in connection with the work under the contract, and their respective duties. The contractor must keep the data furnished current by supplementing it as additional information becomes available. The contracting officer uses this information to ensure the work is performed by qualified personnel at a reasonable cost to the Government.

### C. Annual Burden

*Respondents:* 3,771.

*Total Annual Responses:* 13,267.

*Total Burden Hours:* 21,338.

*Obtaining Copies:* Requesters may obtain a copy of the information collection documents from the GSA Regulatory Secretariat Division by

calling 202–501–4755 or emailing [GSARegSec@gsa.gov](mailto:GSARegSec@gsa.gov). Please cite OMB Control No. 9000–0064, Certain Federal Acquisition Regulation Part 36 Construction Contract Requirements.

**Janet Fry,**

*Director, Federal Acquisition Policy Division,  
Office of Governmentwide Acquisition Policy,  
Office of Acquisition Policy, Office of  
Governmentwide Policy.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for Office of Management and Budget Review; 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 30 days of publication.* Office of Management and Budget (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). 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 [OPREinfocollection@acf.hhs.gov](mailto: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.

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. Community organization onboarding call .....	30	1	1	30
2. Provider telephone script and recruitment information collection .....	204	1	0.33	67
3. Provider telephone script and recruitment information collection including observations .....	150	1	.42	63
4. Observation scheduling call .....	60	1	.17	10
5. HBCC–NSAC Toolkit provider questionnaire .....	150	1	.83	125
6. HBCC–NSAC Toolkit family questionnaire .....	166	1	0.25	42

*Estimated Total Annual Burden Hours:* 337.  
*Authority:* 42 U.S.C. 9858.

**Mary B. Jones,**  
*ACF/OPRE Certifying Officer.*  
 [FR Doc. 2024–00006 Filed 1–4–24; 8:45 am]  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Voluntary Partner Surveys To Implement Executive Order 14058 in the Health Resources and Services Administration, OMB No. 0915–0212—Revision**

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA’s ICR only after the 30-day comment period for this notice has closed.

**DATES:** Comments on this ICR should be received no later than February 5, 2024.

**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 Review—Open for Public Comments,” or by using the search function.

**FOR FURTHER INFORMATION CONTACT:** To request a copy of the clearance requests submitted to OMB for review, email Joella Roland, the HRSA Information Collection Clearance Officer, at [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or call (301) 443–3983.

**SUPPLEMENTARY INFORMATION:**

*Information Collection Request Title:* Voluntary Partner Surveys to Implement Executive Order 14058 in the Health Resources and Services Administration, OMB No. 0915–0212—Revision.

*Abstract:* The purpose of information collections under this generic umbrella ICR package is to conduct a limited number of partner surveys. If this generic ICR is approved, information on each individual partner survey conducted under this generic ICR will not be published separately in the **Federal Register**. Approval of this specific umbrella ICR would allow HRSA to continue to conduct voluntary customer surveys of its partners to assess strengths and weaknesses in program services and processes. A previous version of this ICR was done in response to Executive Order 12862, which called on the Federal Government to gather feedback from customers, set customer service standards, and measure performance against those standards. In December 2021, the White House issued Executive Order 14058, calling on the Federal Government to improve its service delivery to its customers and put people at the center of Federal Government activity. In accordance with this directive, HRSA is requesting approval of this generic umbrella ICR from OMB to conduct the partner surveys with a

slight increase in the allotted burden hours so that HRSA can assess its performance from a larger swath of its partner population to help ensure that HRSA’s customer service delivery continues to improve, in accordance with the directive in Executive Order 14058.

HRSA customer service feedback will continue to be gathered in the form of focus groups, in-class evaluation forms, mail surveys, and telephone surveys. Although HRSA cannot anticipate all of the collections that will fall under this generic umbrella ICR, HRSA anticipates receiving OMB approval to include the following collections:

- Surveys of HRSA grantees to determine satisfaction with grant processes or technical assistance provided by a HRSA contractor. Surveys may also be done to determine partner satisfaction with HRSA products or services. Surveys may be conducted by mail, telephone, or online. These surveys include the Division of Practitioner Data Bank Usability Survey generic fast track ICR, which helps identify strengths and weaknesses of the National Practitioner Data Bank customer service call center agents, and the HRSA Electronic Handbooks Customer Service Survey generic fast track ICR, which gathers public feedback about HRSA’s electronic handbooks.

- Evaluation forms completed by providers who receive training from HRSA funding recipients, to measure satisfaction with the training experience. Evaluation forms may also be done after a conference or other training session with HRSA partners. Evaluation forms may be done hard-copy or online. One evaluation form generic fast track ICR that is expected to be included in this generic umbrella ICR is the National Ryan White Conference survey forms evaluating the National