

enabled Quality Measurement: Efforts, Challenges, and Possibilities (Prepared by Booz Allen Hamilton, under Contract No. HHSA2902009000241.) AHRQ Publication No. 12-0061-EF. Rockville, MD: Agency for Healthcare Research and Quality. July 2012. See: <http://healthit.ahrq.gov/HealthITEnabledQualityMeasurement/Snapshot.pdf>

Dated: July 13, 2012.

**Carolyn M. Clancy,**  
AHRQ Director.

[FR Doc. 2012-17530 Filed 7-19-12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

#### Statement of Organization, Functions, and Delegations of Authority

Part F of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), (last amended at **Federal Register**, Vol. 76, No. 203, pp. 65197-65199, dated October 20, 2011) is amended to change the organizational title from the Office of Clinical Standards and Quality (OCSQ) to the Center for Clinical Standards and Quality. The organizational title change reflects the increasing breadth and importance of quality, patient safety, evidence-based coverage, and value-based purchasing programs. The administrative code is not changed and remains the same.

Part F., Section FC. 10 (Organization) is revised as follows:

Office of the Administrator (FC)  
Office of Equal Opportunity and Civil Rights (FCA)  
Office of Legislation (FCC)  
Office of the Actuary (FCE)  
Office of Strategic Operations and Regulatory Affairs (FCF)  
Center for Clinical Standards and Quality (FCG)  
Center for Medicare (FCH)  
Center for Medicaid and CHIP Services (FCJ)  
Center for Strategic Planning (FCK)  
Center for Program Integrity (FCL)  
Chief Operating Officer (FCM)  
Office of Minority Health (FCN)  
Center for Medicare and Medicaid Innovation (FCP)  
Federal Coordinated Health Care Office (FCQ)  
Center for Consumer Information and Insurance Oversight (FCR)  
Office of Public Engagement (FCS)  
Office of Communications (FCT)

**Authority:** 44 U.S.C. 3101)

Dated: July 11, 2012.

**Marilyn Tavenner,**  
Acting Administrator and Chief Operating Officer, Centers for Medicare & Medicaid Services.

[FR Doc. 2012-17782 Filed 7-19-12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

**Title:** Tribal TANF Data Report, TANF Annual Report, and Reasonable Cause/

Corrective Action Documentation Process-Final.

**OMB No.:** 0970-0215.

#### Description

42 U.S.C. 612 (Section 412 of the Social Security Act as amended by Pub. L. 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA)), mandates that federally recognized Indian Tribes with an approved Tribal TANF program collect and submit to the Secretary of the Department of Health and Human Services data on the recipients served by the Tribes' programs. This information includes both aggregated and disaggregated data on case characteristics and individual characteristics. In addition, Tribes that are subject to a penalty are allowed to provide reasonable cause justifications as to why a penalty should not be imposed or may develop and implement corrective compliance procedures to eliminate the source of the penalty. Finally, there is an annual report, which requires the Tribes to describe program characteristics. All of the above requirements are currently approved by OMB and the Administration for Children and Families is simply proposing to extend them without any changes.

#### Respondents

Indian Tribes

#### ANNUAL BURDEN ESTIMATES

| Instrument                                    | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|---|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Final Tribal TANF Data Report .....           | 66                    | 4                                  | 451                               | 119,064            |
| Tribal TANF Annual Report .....               | 66                    | 1                                  | 40                                | 2,640              |
| Tribal TANF Reasonable Cause/Corrective ..... | 66                    | 1                                  | 60                                | 3,960              |
| Estimated Total Annual Burden Hours .....     | .....                 | .....                              | .....                             | 125,664.           |

#### 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, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF 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, Fax: 202-395-7285, Email:

OIRA\_SUBMISSION@OMB.EOP.GOV,  
Attn: Desk Officer for the  
Administration for Children and  
Families.

Robert Sargis,

Reports Clearance Officer.

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BILLING CODE 4184-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* National Child Abuse and  
Neglect Data System.

*OMB No.* 0980-0229.

*Description:* The Children's Bureau of the Administration on Children, Youth and Families in the Administration for Children and Families of the U.S. Department of Health and Human Services collects national child abuse and neglect statistics through the National Child Abuse and Neglect Data System (NCANDS). NCANDS was established in response to the 1988 amendment (Pub. L. 100-294) to the Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. 5101 *et seq.*), which called for the creation of a coordinated national data collection and analysis program, both universal and case specific in scope, to examine standardized data on false, unfounded, or unsubstantiated reports.

The 1996 CAPTA amendment (42 U.S.C. 5106a(d)) required all States that receive Basic State Grant funds to provide specific data elements, to the extent practicable, to the Federal Government. These data items were incorporated into NCANDS. Since that time, other CAPTA revisions that pertain to child welfare have been included in NCANDS. This application is related to the most recent reauthorization of CAPTA during 2010 (Pub. L. 113-320).

The CAPTA provisions included in NCANDS state that each State to which a grant is made under this section shall annually work with the Secretary to provide, to the maximum extent practicable, a report that includes the following:

1. The number of children who were reported to the State during the year as victims of child abuse or neglect.
2. Of the number of children described in paragraph (1), the number with respect to whom such reports were—

- A. Substantiated;

- B. Unsubstantiated; or
- C. Determined to be false.

3. Of the number of children described in paragraph (2)—

- A. The number that did not receive services during the year under the State program funded under this section or an equivalent State program;

- B. The number that received services during the year under the State program funded under this section or an equivalent State program; and

- C. The number that were removed from their families during the year by disposition of the case.

4. The number of families that received preventive services, including use of differential response, from the State during the year.

5. The number of deaths in the State during the year resulting from child abuse or neglect.

6. Of the number of children described in paragraph (5), the number of such children who were in foster care.

- 7.

- A. The number of child protective service personnel responsible for the—
- i. Intake of reports filed in the previous year;

- ii. Screening of such reports;

- iii. Assessment of such reports; and
- iv. Investigation of such reports.

- B. The average caseload for the workers described in subparagraph (A).

8. The agency response time with respect to each such report with respect to initial investigation of reports of child abuse or neglect.

9. The response time with respect to the provision of services to families and children where an allegation of child abuse or neglect has been made.

10. For child protective service personnel responsible for intake, screening, assessment, and investigation of child abuse and neglect reports in the State—

- A. Information on the education, qualifications, and training requirements established by the State for child protective service professionals, including for entry and advancement in the profession, including advancement to supervisory positions;

- B. Data of the education, qualifications, and training of such personnel;

- C. Demographic information of the child protective service personnel; and

- D. Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor.

11. The number of children reunited with their families or receiving family

preservation services that, within five years, result in subsequent substantiated reports of child abuse or neglect, including the death of the child.

12. The number of children for whom individuals were appointed by the court to represent the best interests of such children and the average number of out of court contacts between such individuals and children.

13. The annual report containing the summary of activities of the citizen review panels of the State required by subsection (c)(6).

14. The number of children under the care of the State child protection system who are transferred into the custody of the State juvenile justice system.

15. The number of children referred to a child protective services system under subsection (b)(2)(B)(ii).

16. The number of children determined to be eligible for referral, and the number of children referred, under subsection (b)(2)(B)(xxi), to agencies providing early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 *et seq.*).

The Children's Bureau proposes continue collecting NCANDS data using two files of the Detailed Case Data Component (DCDC): (1) Child File, the case-level component of NCANDS and (2) Agency File, the aggregate data component. The Children's Bureau is not proposing to continue collecting NCANDS data via the Summary Data Component (SDC), as States will no longer be using this file to submit data.

The Children's Bureau is seeking reapproval of these instruments with modifications. Modifications are being proposed to meet requirements of the amendments in the CAPTA Reauthorization Act of 2010 (Pub. L. 111-320) passed on December 20, 2010 and to clarify existing reporting. The Children's Bureau proposes to modify the Child File as follows:

- *Field 147, Report Time:* The Report Time field will collect the exact time (hour and minute) that a report was received by the hotline or other intake unit. CAPTA requires that each State submits the time from the report of abuse or neglect to the start of the initial child protective services (CPS) agency's response (42 U.S.C. 5106a(d)(8)). Currently, NCANDS only collects the date a report was received. Adding the time field will improve reporting for the Child and Family Services reviews and the GPRA Modernization Act of 2010 (Pub. L. 111-352).

- *Field 148, Investigation Start Time:* The Investigation Start Time field will collect the exact time (hour and minute) that the CPS agency's response was