Federal Register of August 28, 2009, requesting comments on this draft PIN. Sixteen parties, including both individuals and groups, submitted a total of 31 comments regarding the draft PIN. After review and careful consideration of all comments received, HRSA has amended the PIN to incorporate certain recommendations from the public. The final PIN reflects these changes.

In addition to making the final PIN available on HRSA’s Web site, HRSA is also posting the Agency’s “Response to Public Comments.” The purpose of that document is to summarize the major comments received and describe the Agency’s response, including any corresponding changes made to the PIN. Where comments did not result in a revision to the PIN, explanations are provided.

FOR FURTHER INFORMATION CONTACT: For questions regarding this notice, please contact the Office of Policy and Program Development, Bureau of Primary Health Care, HRSA, at OPPDGeneral@hrsa.gov.

Dated: March 8, 2010.
Mary K. Wakefield, Administrator.

Federal Register
Vol. 75, No. 50 / Tuesday, March 16, 2010 / Notices

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Clinical Laboratory Improvement Advisory Committee: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92–463) of October 6, 1972, that the Clinical Laboratory Improvement Advisory Committee, Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through February 19, 2012.

For information, contact Thomas Hearn, PhD, Designated Federal Officer, Clinical Laboratory Improvement Advisory Committee, Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road, NE, Mailstop C12, Atlanta, Georgia 30333, telephone (404) 718–1048 or fax (404) 639–3039.

The Director, Management Analysis and Services Office, has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the CDC and the Agency for Toxic Substances and Disease Registry.

Dated: March 9, 2010.
Elaine L. Baker, Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Mine Safety and Health Research Advisory Committee, National Institute for Occupational Safety and Health (MSHRAC, NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting for the aforementioned committee:

Time and Date: 8:15 a.m.–5 p.m., March 30, 2010; 8 a.m.–11:30 a.m., March 31, 2010. Place: Hilton Garden Inn Pittsburgh/ Southpointe, 1000 Corporate Drive, Canonsburg, Pennsylvania 15317, telephone (724) 743–5000, fax (724) 743–5010. Status: Open to public, limited only by the space available. The meeting room accommodates approximately 50 people.

Purpose: This committee is charged with providing advice to the Secretary, Department of Health and Human Services; the Director, CDC; and the Director, NIOSH, on priorities in mine safety and health research, including grants and contracts for such research, 30 U.S.C. 812(b)(2), Section 102(b)(2).

Matters To Be Discussed: The meeting will focus on deep cover retreat mining research, mine illumination research, mine escape and rescue, human factors research, coal dust particle size surveys, and updates on proximity detection, a mine escape vehicle, robotics research, and results of broad agency announcements for mining research.

Agenda items are subject to change as priorities dictate.

For More Information Contact: Jeffery L. Kohler, PhD, Designated Federal Officer, MSHRAC, NIOSH, CDC, 626 Cochran's Mill Road, telephone (412) 386–5300, fax (412) 386–5300.

The Director, Management Analysis and Services Office, has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: March 9, 2010.
Elaine L. Baker, Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Advisory Council on Nurse Education and Practice; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92–463), notice is hereby given of the following meetings:

Name: National Advisory Council on Nurse Education and Practice (NACNEP).

Dates and Times: April 22, 2010, 8:30 a.m.–4:30 p.m.; April 23, 2010, 8:30 a.m.–4 p.m.

Place: Doubletree Bethesda Hotel & Executive Meeting Center, 8120 Wisconsin Avenue, Bethesda, MD 20814.

Status: The meeting will be open to the public.

Agenda: Agency and Bureau administrative updates will be provided.

Purpose: The purpose of this meeting is to address issues relating to the role of nursing in primary care and implications for workforce. The objectives of the meeting are to: (1) Delineate the variety of roles nurses play in primary care including health promotion, screening, public education, illness prevention, primary care and management of stable chronic conditions; (2) review and evaluate the data related to education preparation and supply of primary care nurses and advanced practice registered nurses; (3) describe factors that facilitate and sustain primary care practice by qualified, competent advanced practice registered nurses; (4) identify the financial and regulatory barriers to effective, accessible primary care delivered by nurses and recommended strategies for resolution; and (5) review and recommend community-based, nurse-directed models for primary care delivery that are cost effective and produce quality outcomes. This meeting is a continuation of the meeting that was held November 2009. Experts from professional nursing, public and private organizations will make presentations on primary care delivery models. During this meeting, the NACNEP council