security program in writing that is reasonably designed to protect the security, confidentiality, and integrity of personal information collected from or about consumers. The security program must contain administrative, technical, and physical safeguards appropriate to Dave & Buster’s size and complexity, the nature and scope of its activities, and the sensitivity of the personal information collected from or about consumers. Specifically, the order requires Dave & Buster’s to:

- Designate an employee or employees to coordinate and be accountable for the information security program.
- Identify material internal and external risks to the security, confidentiality, and integrity of personal information that could result in the unauthorized disclosure, misuse, loss, alteration, destruction, or other compromise of such information, and assess the sufficiency of any safeguards in place to control these risks.
- Develop and use reasonable steps to select and retain service providers capable of appropriately safeguarding personal information they receive from respondents, and require service providers by contract to implement and maintain appropriate safeguards.
- Evaluate and adjust its information security program in light of the results of the testing and monitoring, any material changes to its operations or business arrangements, or any other circumstances that it knows or has reason to know may have a material impact on the effectiveness of its information security program.

Part II of the proposed order requires that Dave & Buster’s obtain within 180 days, and on a biennial basis thereafter for ten (10) years, an assessment and report from a qualified, objective, independent third-party professional, certifying, among other things, that it has in place a security program that provides protections that meet or exceed the protections required by Part I of the proposed order; and its security program is operating with sufficient effectiveness to provide reasonable assurance that the security, confidentiality, and integrity of consumers’ personal information is protected.

Parts III through VII of the proposed order are reporting and compliance provisions. Part III requires Dave & Buster’s to retain documents relating to its compliance with the order. For most records, the order requires that the documents be retained for a five-year period. For the third-party assessments and supporting documents, Dave & Buster’s must retain the documents for a period of three years after the date that each assessment is prepared. Part IV requires dissemination of the order now and in the future to principals, officers, directors, and managers at corporate headquarters, regional offices, and at each store having responsibilities relating to the subject matter of the order. Part V ensures notification to the FTC of changes in corporate status. Part VI mandates that Dave & Buster’s submit an initial compliance report to the FTC, and make available to the FTC subsequent reports. Part VII is a provision “sunsetting” the order after twenty (20) years, with certain exceptions.

The purpose of the analysis is to aid public comment on the proposed order. It is not intended to constitute an official interpretation of the proposed order or to modify its terms in any way.

By direction of the Commission.

Donald S. Clark
Secretary

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Call for Co-Sponsors for Office of Healthcare Quality’s Programs to Strengthen Coordination and Impact National Efforts in the Prevention of Healthcare-Associated Infections (HAIs)

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Public Health and Science, Office of Healthcare Quality.

ACTION: Notice.

SUMMARY: The U.S. Department of Health and Human Services (HHS), Office of Public Health and Science (OPHS), Office for Healthcare Quality (OHQ) announces the opportunity to collaborate with the U.S. Department of Health and Human Services (HHS). HHS invites public and private professional health related organizations to participate as collaborating co-sponsors in the development and implementation of an innovative program that advances the goals enumerated in the HHS Action Plan to prevent Healthcare-Associated Infections.

DATES: Expressions of interest for FY 2010–11 must be received no later than cob April 15, 2010.

ADDRESS: Expressions of interest, comments, and questions may be submitted by e-mail to ohq@hhs.gov; by regular mail to Office of Healthcare Quality, Department of Health and Human Services, 200 Independence Ave., SW., Room 716G, Washington, DC 20201, or via fax to 202–401–9547.

FOR FURTHER INFORMATION CONTACT: Daniel Gallardo via electronic mail to Daniel.Gallardo@hhs.gov; or by phone at 202–690–2470.

SUPPLEMENTARY INFORMATION:
Healthcare-associated infections (HAIs) exact a significant toll on human life. They are among the leading causes of preventable death in the United States, accounting for an estimated 1.7 million infections and 99,000 associated deaths in 2002. In hospitals, they are a significant cause of morbidity and mortality. In addition to the substantial human suffering caused by healthcare-associated infections, the financial burden attributable to the infections is staggering. It is estimated that healthcare-associated infections cause $28 to $33 billion in excess healthcare costs each year. For these reasons, the prevention and reduction of healthcare-associated infections is a top priority for the U.S. Department of Health and Human Services (HHS).

The HHS Steering Committee for the Prevention of Healthcare-Associated Infections, led by Dr. Don Wright, Deputy Assistant Secretary for Healthcare Quality, was established in July 2008. The Steering Committee was charged with developing a comprehensive strategy to prevent and reduce healthcare-associated infections and issuing a plan which establishes national goals for healthcare-associated infection prevention and outlines key actions for achieving identified short- and long-term objectives. The plan, released in January 2009 as the HHS Action Plan, is also intended to enhance collaboration with external stakeholders to strengthen coordination and impact of national efforts.

Therefore, OHQ is interested in establishing partnerships with private and public professional health organizations in order to further the efforts in the prevention of Healthcare-Associated Infections. As partners with OHQ, professional health related organizations can bring their ideas, expertise, administrative capabilities, and resources in the development of a program(s) that promotes the reduction and prevention of Healthcare-
Associated Infections at the National level.

Given OHQ’s objective, entities which have similar goals and consistent interests, appropriate expertise and resources, and which would like to pursue a Co-Sponsorship opportunity with OHQ, are encouraged to reply to this notice with a program proposal. Working together, these partnerships will provide opportunities to promote the prevention and reduction of healthcare-associated infections.


Don Wright, Deputy Assistant Secretary for Healthcare Quality, Office of Healthcare Quality, Office of Public Health and Science.

The meeting will be open to the public.

The meeting will be held on April 21, 2010, from 10 a.m. to 4 p.m./Eastern Time.

The meeting will be held on April 28, 2010, from 9 a.m. to 4 p.m./Eastern Time.

Location: The Omni Shoreham Hotel, 2500 Calvert Street, NW., Washington, DC. The hotel telephone number is 202–234–0700.

Contact Person: Judy Sparrow, Office of the National Coordinator, HHS, 330 C Street, SW., Washington, DC 20201, 202–205–4528, Fax: 202–690–6079, e-mail: judy.sparrow@hhs.gov. Please call the contact person for up-to-date information on this meeting. A notice in the Federal Register about last minute modifications that impact a previously announced advisory committee meeting cannot always be published quickly enough to provide timely notice.

Agenda: The committee will hear reports from its workgroups, including the Meaningful Use Workgroup, the Certification/Adoption Workgroup, the NHIN Workgroup, the Privacy & Security Policy Workgroup, and the Strategic Plan Workgroup. ONC intends to make background material available to the public no later than two (2) business days prior to the meeting. If ONC is unable to post the background material on its Web site prior to the meeting, it will be made publicly available at the location of the advisory committee meeting, and the background material will be posed on ONC’s Web site after the meeting, at http://healthit.hhs.gov.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before April 13, 2010. Oral comments from the public will be scheduled between approximately 3:30 p.m. to 4 p.m. Time allotted for each presentation is limited to three minutes. If the number of speakers requesting to comment is greater than can be reasonably accommodated during the scheduled open public hearing session, ONC will take written comments after the meeting until close of business.

Persons attending ONC’s advisory committee meetings are advised that the agency is not responsible for providing access to electrical outlets.

ONC welcomes the attendance of the public at its advisory committee meetings. Seating is limited at the location, and ONC will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Judy Sparrow at least seven (7) days in advance of the meeting.

ONC is committed to the orderly conduct of its advisory committee meetings. Please visit our Web site at http://healthit.hhs.gov for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (Pub. L. 92–463, 5 U.S.C., App. 2).

Dated: March 18, 2010.

Judith Sparrow, Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.