

Virginia; to acquire 100 percent of the voting shares of Virginia Commerce Bancorp, Inc, and thereby indirectly acquire Virginia Commerce Bank, both of Arlington, Virginia.

B. Federal Reserve Bank of St. Louis (Yvonne Sparks, Community Development Officer) P.O. Box 442, St. Louis, Missouri 63166-2034:

1. *Banc Investors, L.L.C.*, Town and Country, Missouri; to acquire 33.32 percent of the voting shares of 1st Advantage Bancshares, Inc., and thereby indirectly acquire 1st Advantage Bank, both of St. Peters, Missouri.

Board of Governors of the Federal Reserve System, July 2, 2013.

Michael J. Lewandowski,

Associate Secretary of the Board.

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GOVERNMENT ACCOUNTABILITY OFFICE

Advisory Council on the Standards for Internal Control in the Federal Government

AGENCY: Government Accountability Office.

ACTION: Notice of teleconference meeting.

SUMMARY: The US Government Accountability Office (GAO) is preparing to revise the Standards for Internal Control in the Federal Government, known as the "Green Book," under the authority provided in the Federal Managers' Financial Integrity Act. As part of the revision process, GAO is holding a teleconference with the Green Book Advisory Council (GBAC). The Comptroller General has established the GBAC to provide input and recommendations to the Comptroller General on revisions to the "Green Book." The purpose of the meeting is to discuss proposed revisions to the "Green Book."

DATES: The meeting will be held July 25, 2013 from 10:00 a.m. to 12:00 p.m. EDT.

FOR FURTHER INFORMATION CONTACT: For information on the Green Book Advisory Council and the Standards for Internal Control in the Federal Government please contact Kristen Kociolek, Assistant Director, Financial Management and Assurance telephone 202-512-2989, 441 G Street NW., Washington, DC 20548-0001.

SUPPLEMENTARY INFORMATION: The meeting will be a teleconference held by the US Government Accountability Office. This teleconference meeting

follows an initial meeting, on May 20, 2013, of the GBAC. During the May 20, 2013 meeting the GBAC discussed an initial Green Book draft. Members of the public will be provided an opportunity to address the Council with a brief (five-minute) comment period on matters directly related to the proposed update and revision. Any interested person who plans to participate in the teleconference as an observer must contact Kristen Kociolek, Assistant Director, 202-512-2989, prior to July 19, 2013. The toll free call-in number is 1-800-369-1927, and the participant code is 41706.

Authority: 31 U.S.C. 3512 (c), (d).

James Dalkin,

Director, Financial Management and Assurance, U.S. Government Accountability Office.

[FR Doc. 2013-16256 Filed 7-5-13; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: "Pretest of the Ambulatory Surgery/Procedure Survey on Patient Safety Culture Questionnaire (Ambulatory Surgery SOPS)." In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501-3521, AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by September 6, 2013.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at doris.lefkowitz@AHRQ.hhs.gov.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at doris.lefkowitz@AHRQ.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

Pretest of the Ambulatory Surgery/Procedure Survey on Patient Safety Culture Questionnaire (Ambulatory Surgery SOPS)

One setting which has demonstrated tremendous growth both in the volume and complexity of procedures being performed is ambulatory surgical and procedure centers (ASCs). ASCs are defined by the Centers for Medicare & Medicaid Services (CMS) as distinct entities that operate exclusively to provide surgical services to patients who do not require hospitalization and are not expected to need to stay in a surgical facility longer than 24 hours (42 CFR 416.2). Many of the services performed in these facilities extend beyond procedures traditionally thought of as surgery, including endoscopy, and injections to treat chronic pain.

Currently, there are over 5,300 Medicare-certified ASCs in the U.S., which represents a greater than 54% increase since 2001. In 2007, Medicare paid for more than 6 million surgeries performed in these facilities at a cost of nearly \$3 billion. Recent CMS audits suggest infection control deficiencies in these facilities are widespread. For example, preliminary data from 2011 found that 51 percent of ASCs surveyed had an infection control deficiency; 11 percent were considered very serious deficiencies. These findings are only slightly lower than 2010 audits and a 2008 sample of ASCs in three states.

Given the widespread impact of ASCs on patient safety, the new Ambulatory Surgery/Procedure Survey on Patient Safety Culture (Ambulatory Surgery SOPS) will measure ASC staff perceptions about what is important in their organization and what attitudes and behaviors related to patient safety culture are supported, rewarded, and expected. The survey will help ASCs to identify and discuss strengths and weaknesses of patient safety culture within their individual facilities. They can then use that knowledge to develop appropriate action plans to improve their practices and their culture of patient safety. This survey is designed for use in ASCs that practice all types of surgical procedures including those that require incisions and less invasive or non-surgical procedures such as gastrointestinal procedures or pain management injections.

This research has the following goals:

(1) Develop, cognitively test and modify as necessary the Ambulatory Surgery/Procedure Survey on Patient