and stakeholder input, will be presented to the NVAC for adoption in September 2013 at the quarterly NVAC meeting.

DATES: Comments for consideration by the NVAC should be received no later than 5:00 p.m. EDT on August 16, 2013.

ADDRESSES: (1) The draft report and draft recommendations are available on the web at http://www.hhs.gov/nvpo/nvac/index.html.

(2) Electronic responses are preferred and may be addressed to: Jennifer.gordon@hhs.gov.


FOR FURTHER INFORMATION CONTACT: Jennifer Gordon, Ph.D., National Vaccine Program Office, Office of the Assistant Secretary for Health, Department of Health and Human Services; telephone (202) 260–6619; fax (202) 260–1165; email: Jennifer.Gordon@hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

The National Vaccine Program Office (NVPO) is located within the Office of the Assistant Secretary for Health (OASH), Office of the Secretary, U.S. Department of Health and Human Services (HHS). NVPO provides leadership and fosters collaboration among the various Federal agencies involved in vaccine and immunization activities. These coordinated efforts are aimed to achieve the strategic goals outlined in the National Vaccine Plan. The National Vaccine Plan provides a framework, including goals, objectives, and strategies, for pursuing the prevention of infectious diseases through immunizations. The NVPO also supports the National Vaccine Advisory Committee (NVAC). The NVAC advises and makes recommendations to the Assistant Secretary for Health in his capacity as the Director of National Vaccine Program on matters related to vaccine program responsibilities.

Global immunization efforts save millions of lives every year and are deemed one of the most cost-effective strategies in public health. The global health community has the potential to substantially reduce childhood mortality and alleviate the economic and societal burdens vaccine preventable diseases impose on nations through immunization. However, continued efforts are needed to strengthen and optimize routine immunization systems to ensure the full benefits of immunization are extended to all people, regardless of where they are born, who they are, or where they live.

Global immunization efforts are also important to protecting the health and economic investments of the U.S. Globalization, frequent travel, and the ongoing threat of disease outbreaks due to importations of infectious diseases bring global health to the forefront of HHS efforts to protect the health and well-being of Americans as well as populations across the globe. This is reflected in the Secretary’s 2010–2015 HHS Strategy, the HHS Global Health Strategy, the 2010 National Vaccine Plan, and a number of strategic plans specific to the individual HHS agencies and offices.

Through a series of teleconferences and electronic communications, the NVAC Global Immunizations working group identified a number of draft recommendations that fell into six priority areas, which represent both opportunities for improving global immunizations, as well as areas that will benefit the most from continued and enhanced HHS participation. These priority areas include:

1. Tackling time-limited opportunities to complete polio eradication and to advance measles mortality reduction and regional measles/rubella elimination goals
2. Strengthening Global Immunization Systems
3. Enhancing Global Capacity for Vaccine Safety Monitoring and Post-Marketing Surveillance
4. Building Global Immunization Research and Development Capacity
5. Strengthening Capacity for Vaccine Policy and Decision Making
6. HHS Leadership and Coordination.

The NVAC draft report details the background and rationale for each of the recommendations, how HHS is currently contributing to these global efforts, and how the ASH can support and further HHS activities in these areas. The NVAC intends for the recommendations to serve as a potential roadmap for better coordination and tracking of HHS global immunization efforts. The continued participation of HHS in the six priority areas identified by NVAC will make certain that global immunizations remain at the forefront of HHS global health priorities.

II. Request for Comment

NVPO, on behalf of the NVAC Global Immunizations Working Group, requests input on the draft report and draft recommendations. In addition to general comments on the draft report and draft recommendations, NVPO is seeking input on activities not represented in the report where HHS efforts can offer a comparative advantage or where HHS efforts could enhance other USG efforts in alignment with the HHS Global Health Strategy and the National Vaccine Plan. Please limit your comments to six (6) pages.

III. Potential Responders

HHS invites input from a broad range of stakeholders including individuals and organizations that have interests in global immunization efforts and the role of HHS in enhancing those efforts. Examples of potential respondents include, but are not limited to, the following:

—General public:
—Advocacy groups and public interest organizations;
—Academics and professional societies;
—Global organizations, governmental, and non-governmental organizations;
—Development partners, foundations, and philanthropic organizations;
—Representatives from the private sector.

When responding, please self-identify with any of the above or other categories (include all that apply) and your name. Anonymous submissions will not be considered. Written submissions should not exceed six pages. Please do not send proprietary, commercial, financial, business, confidential, trade secret, or personal information.

Dated: July 24, 2013.

Bruce Gellin,
Deputy Assistant Secretary for Health, Director, National Vaccine Program Office.

[FR Doc. 2013–18479 Filed 7–31–13; 8:45 am]

BILLING CODE 4150–44–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Written Comments on the Draft Report of the National Adult Immunization Standards of Practice for Consideration by the National Vaccine Advisory Committee

AGENCY: National Vaccine Program Office, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The National Vaccine Advisory Committee (NVAC) was established in 1987 to comply with Title XXI of the Public Health Service Act (Pub. L. 99–660) (§ 2105) (42 U.S.C. Code 300aa–5 (PDF–78 KB)). Its purpose is to advise and make recommendations to
the Director of the National Vaccine Program on matters related to program responsibilities. The Assistant Secretary for Health (ASH) has been designated by the Secretary of Health and Human Services (HHS) as the Director of the National Vaccine Program. The ASH has charged the NVAC with examining the current adult immunization environment by updating adult immunization standards of practice with the intention of ultimately impacting Healthy People 2020 goals. A review group was established to address this charge on behalf of the NVAC. Through discussion and careful review, the group has developed draft recommendations for consideration by the NVAC to achieve this charge. It is anticipated that the draft report, as revised with consideration given to public comment and stakeholder input, will be presented in at the NVAC at the September 2013 meeting for deliberation and decision on their final recommendation. The draft report will be made available for public review and written comment.

DATES: To receive consideration, comments should be received no later than 5:00 p.m. EST on August 16, 2013.

ADDRESSES: 1. The draft report is available on the web at: http://www.hhs.gov/nvpo/nvac/ 
2. Electronic responses are preferred and may be addressed to nvpo@hhs.gov 


SUPPLEMENTARY INFORMATION:

I. Background

August is National Immunization Awareness Month and while the United States has made significant progress toward eliminating vaccine-preventable diseases among children, unacceptably low immunization rates still exist among many adults. Many adults are aware of annual influenza vaccination, but fewer are aware of other recommended adult vaccines. Additionally, there are many types of immunization providers and sites, as well as many missed opportunities occurring to assess patient vaccination needs. An updated version of the National Adult Immunization Standards provides a framework with the purpose of collaboration, coordination, and communication among immunization stakeholders dedicated to meeting the immunization needs of the patient and protecting the community from vaccine preventable diseases.

II. Request for Comment

NVPO, on behalf of the NVAC, requests input on the draft report located on the NVAC Web site at http://www.hhs.gov/nvpo/nvac/. In addition to general comments, NVPO is seeking input on additional gaps not addressed in the National Adult Immunization Standards of Practice draft report, and/or prioritization criteria and its application. Please limit comments to 6 pages.

III. Potential Responders

The Department of Health and Human Services invites input from a broad range of individuals and organizations that have interests in adult immunizations and ways to increase vaccine coverage in adults. Examples of potential responders include, but are not limited to the following:

—general public;
—advocacy groups and public interest organizations;
—state and local governments;
—state and local health departments;
—healthcare professional societies and organizations;
—healthcare organizations.

When responding, please self-identify with any of the above or other categories (include all that apply) and your name. All comments submitted will be publicly available. Anonymous submissions will not be considered and will not be posted.

Written submission should not exceed 6 pages. Any information submitted will be made public. Consequently, do not send proprietary, commercial, financial, business, confidential, trade secret, or personal information that you do not wish to be made public.

Dated: July 24, 2013.

Bruce Gellin,
Director, National Vaccine Program Office.
[FR Doc. 2013–18480 Filed 7–31–13; 8:45 am]
BILLING CODE 4150–44–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Assistant Secretary for Planning and Evaluation; Advisory Council on Alzheimer’s Research, Care, and Services

AGENCY: Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services.

ACTION: Request for nominations.

SUMMARY: HHS is soliciting nominations for six non-Federal members of the Advisory Council on Alzheimer’s Research, Care, and Services. The six positions are for each of the following categories, as specified in the National Alzheimer’s Project Act: Alzheimer’s patient advocate, Alzheimer’s caregiver, health care provider, representative of state health department, researcher with Alzheimer’s-related expertise, and voluntary health association representative. Nominations should include the nominee’s contact information (current mailing address, email address, and telephone number) and current curriculum vitae or resume.

DATES: Submit nominations by email or FedEx or UPS before COB on August 16, 2013.

ADDRESSES: Nominations should be sent to Helen Lamont at helen.lamont@hhs.gov; Helen Lamont, Ph.D., Office of the Assistant Secretary for Planning and Evaluation, Room 424E, Humphrey Building, Department of Health and Human Services, 200 Independence Avenue SW., Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Helen Lamont (202) 690–7996, helen.lamont@hhs.gov.

SUPPLEMENTARY INFORMATION: The Advisory Council on Alzheimer’s Research, Care, and Services meets quarterly to discuss programs that impact people with Alzheimer’s disease and related dementias and their caregivers. The Advisory Council makes recommendations about ways to reduce the financial impact of Alzheimer’s disease and related dementias and to improve the health outcomes of people with these conditions. The Advisory Council provides feedback on the National Plan to Address Alzheimer’s Disease. On an annual basis, the Advisory Council shall evaluate the implementation of the recommendations through an updated national plan.

The Advisory Council consists of designees from Federal agencies including the Centers for Disease