Response: GSA will implement additional certifications and representations into SAM, as directed by OMB. At this time, only the assurances in the SF–424B are being incorporated.

Comment: One respondent stated that the SAM registration process is time-consuming and frustrating for their foreign-based recipients and they object to adding another layer to the process. They further stated that their grants are usually under \$10,000.

Response: Although 2 CFR 25-Universal Identifier and System for Award Management, requires that all entities applying for or receiving federal awards, including subrecipients of federal awards, must register in SAM, there are conditions under which a federal agency may exempt a foreign entity from this requirement. 2 CFR 25.110 (d)(2)(ii) allows agencies to determine the practicality of whether a "foreign entity applying for or receiving an award or subaward for a project or program outside the United States valued at less than \$25,000" must comply with the SAM registration requirement.

Comment: One respondent stated that eliminating an agency's ability to require certifications and assurances on their own application is impractical.

Response: Although the standard governmentwide certifications and representations will be certified in SAM, Federal agencies will still be able to require the submission of agency or program specific certifications and representations with applications.

Comment: One respondent stated that the cost and implementation timeline considerations for agencies with online project and grant application systems. The respondent further stated that they could not implement system changes by October 1.

Response: GSA has informed OMB of this consideration. The implementation date for entities to begin providing certifications during their initial registration and their subsequent annual re-registration will be no earlier than January 1, 2019. The full transition to grant certifications in SAM will not be completed for a year, since existing registrants will complete the certifications in their annual recertification process. Once a recipient has registered or re-registered, the Federal agency will be able to download or print a copy of the entity's certification to be entered into the entity's grant award file.

### C. Annual Reporting Burden

Respondents: 143,334. Responses per Respondent: 1. Total annual responses: 143,334. Hours per Response: 2.5. Total Burden Hours: 358,335.

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the System for Award Management Registration Requirements for Prime Grant Recipients, whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

Obtaining Copies of Proposals:
Requesters may obtain a copy of the information collection documents in hard-copy or electronic format. Hard copy: General Services Administration, Regulatory Secretariat Division (MVCB), 1800 F Street NW, Washington, DC 20405, telephone 202–501–4755. Please cite OMB Control No. 3090–0290, System for Award Management Registration Requirements for Prime Grant Recipients, in all correspondence.

Dated: October 4, 2018.

#### David A. Shive,

Chief Information Officer.

[FR Doc. 2018–22407 Filed 10–12–18; 8:45 am]

BILLING CODE 6820-WY-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[Docket No. CDC-2018-0099]

Draft Guideline: Infection Control in Healthcare Personnel: Infrastructure and Routine Practices for Occupational Infection Prevention and Control Services

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS).

**ACTION:** Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), in the Department of Health and Human Services (DHHS), announces the opening of a docket to obtain comment on the Draft Guideline: Infection Control in Healthcare Personnel: Infrastructure and Routine Practices for Occupational Infection Prevention and Control Services (Draft Guideline). The Draft Guideline is an update of two sections of the Guideline for Infection Control in Healthcare Personnel, 1998: C. Infection Control Objectives for a Personnel Health Service and D. Elements of a Personnel Health Service for Infection Control. The updated recommendations in the Draft Guideline are intended to facilitate the provision of occupational infection prevention and control services to healthcare personnel and to prevent transmission of infections between healthcare personnel and others.

**DATES:** Written comments must be received on or before December 14, 2018.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC-2018-0099, by any of the following methods:

- Federal eRulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments.
- Mail: Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, Attn: Docket No. CDC– 2018–0099, HICPAC Secretariat, 1600 Clifton Road NE, Mailstop A07, Atlanta, Georgia 30329.

Instructions: Submissions via http://regulations.gov are preferred. All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to http://regulations.gov, including any personal information provided. For access to the docket to read background documents or comments received, go to http://www.regulations.gov.

#### FOR FURTHER INFORMATION CONTACT:

Kendra Cox, Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop A–07, Atlanta, Georgia 30329; Telephone: (404) 639–4000.

### SUPPLEMENTARY INFORMATION:

### **Public Participation**

Interested persons or organizations are invited to participate by submitting written views, recommendations, and data.

Please note that comments received, including attachments and other supporting materials, are part of the public record and are subject to public disclosure. Comments will be posted on <a href="https://www.regulations.gov">https://www.regulations.gov</a>. Therefore, do not include any information in your comments or supporting materials that you consider confidential or

inappropriate for public disclosure. If vou include vour name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose (but is not required) to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/ near-duplicate examples of a mass-mail campaign. CDC will carefully consider all comments timely submitted in preparation of the final guideline Infection Control in Healthcare Personnel: Infrastructure and Routine Practices for Occupational Infection Prevention and Control Services and may revise the final document as appropriate.

#### **Background**

The Draft Guideline, located in the "Supporting & Related Material" tab of the docket, updates two sections from the 1998 Guideline: C. Infection Control Objectives for a Personnel Health Service and D. Elements of a Personnel Health Service for Infection Control. Those sections described the infrastructure and routine practices of Occupational Health Services for providing occupational infection prevention and control services to healthcare personnel.

Once finalized, the *Draft Guideline* is intended for use by the leaders and staff of Occupational Health Services and the administrators and leaders of healthcare organizations in order to facilitate the provision of occupational infection prevention and control services to healthcare personnel.

Since 2015, the Healthcare Infection Control Practices Advisory Committee (HICPAC) has worked with national partners, academicians, public health professionals, healthcare providers, and other partners to develop this *Draft Guideline* as a recommendation for CDC to update sections of the 1998 Guideline. HICPAC includes representatives from public health, infectious diseases, regulatory and other federal agencies, professional societies, and other stakeholders.

The draft recommendations in this *Draft Guideline* are informed by a systematic literature review of articles published in peer-reviewed journals or repositories of systematic reviews; and a review of occupational infection prevention and control guidelines, regulations, and standards. This *Draft Guideline* is not, and once finalized will not be, a federal rule or regulation; instead its purpose, as discussed above,

will be to facilitate the provision of occupational prevention and control services to healthcare personnel.

Dated: October 10, 2018.

#### Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2018–22377 Filed 10–12–18; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[60Day-19-1105; Docket No. CDC-2018-0098]

#### Proposed Data Collection Submitted for Public Comment and Recommendations

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice with comment period.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled One Health Harmful Algal Bloom System (OHHABS). The OHHABS is a voluntary reporting system available to state and territorial public health departments and their designated environmental health or animal health partners. It collects data on individual human and animal cases of illnesses from harmful algal bloom (HAB)associated exposures, as well as environmental data about HABs.

**DATES:** CDC must receive written comments on or before December 14, 2018.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC-2018-0098 by any of the following methods:

• Federal eRulemaking Portal: Regulations.gov. Follow the instructions for submitting comments.

• Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS–D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without

change, all relevant comments to Regulations.gov.

**Please note:** Submit all comments through the Federal eRulemaking portal (*regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email: omb@cdc.gov. SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of

The OMB is particularly interested in comments that will help:

information, and each reinstatement of

collection to the OMB for approval. To

comply with this requirement, we are

publishing this notice of a proposed

data collection as described below.

previously approved information

collection before submitting the

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

3. Enhance the quality, utility, and clarity of the information to be collected; and

- 4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses.
  - 5. Assess information collection costs.

### **Proposed Project**

One Health Harmful Algal Bloom System (OHHABS)—Extension— National Center for Emerging and Zoonotic Infectious Diseases (NCEZID),