Infectious Zoonotic Disease, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mail Stop H16–3, Atlanta, GA 30329.

Instructions: 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: Katherine Allen-Bridson, RN, BSN, MScPH, CIC, National Center for Emerging and Infectious Zoonotic Disease, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mail Stop H16–3, Atlanta, GA 30329. Phone: 404–639–4000; Email:nhsn@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose of the Notice: The purpose of this notice is to request input and information from individuals and organizations on issues and areas for potential improvement for consideration as CDC updates and maintains the NHSN surveillance protocols for 2020. CDC will carefully consider all comments with an intent to improve on and maintain the requirements for a successful surveillance program:

Acceptable data collection burden, consistency, sensitivity, specificity, representativeness, and timeliness. The CDC reserves the right to respond to time-sensitive issues outside of this RFI as needed to maintain the reliability of the NHSN data.

Scope of Issue: The mission of CDC’s Division of Healthcare Quality Promotion (DHQP) is to protect patients and healthcare personnel and promote safety, quality, and value in national and international healthcare delivery systems. In accordance with this mission, DHQP seeks to identify effective prevention methods, foster their implementation, and measure their impact on the incidence of healthcare-associated infections (HAIs). Over 21,000 healthcare facilities report data on HAIs to CDC’s NHSN. This includes data that CDC reports to the Centers for Medicare and Medicaid Services (CMS) on behalf of healthcare facilities. CMS uses the data in its public reporting and payment programs.

Approach: CDC seeks information from NHSN users and stakeholders regarding the NHSN surveillance protocols, including comments that describe specific concerns about and recommendations for specific changes regarding the following topics: Protocol scope, definitions, criteria, data collection requirements, and other surveillance specifications for the OPC and BSI module.

Also, CDC is exploring the possibility of adding a new HAI event to its surveillance protocols, hospital onset bacteremia (HOB). The scope of HOB’s surveillance would be all bloodstream infections that develop in patients following hospital admission, i.e., those bloodstream infections that are not present on admission. Although this scope would be wider than Central Line-associated Bloodstream Infection (CLABSI) surveillance, CLABSI surveillance could be incorporated as a subset of HOB surveillance. CDC seeks input on NHSN’s current CLABSI surveillance protocol and potential work on HOB surveillance.

Potential Areas of Focus: CDC is interested in receiving information on issues and areas for potential improvement for consideration for the following:

1. Outpatient Procedure Component surveillance protocol.
3. Possible addition of hospital onset bacteremia (HOB) to NHSN’s surveillance protocols.

Examples of the types of information valuable to CDC include:

1. How could the CLABSI and OPC surveillance protocols and/or surveillance definitions be improved?
2. What challenges are faced when applying these definitions? What could be added to the definitions to address these challenges?
3. What protocol or data analysis changes could make the CLABSI or OPC data more useful?

Dated: February 6, 2019.
Sandra Cashman,
Executive Secretary, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended, and the Determination of the Chief Operating Officer, Centers for Disease Control and Prevention, pursuant to Public Law 92–463. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP)—SIP19–001

Improving Cognitive Impairment Detection and Referral to Resources among Older Adults: Applying the KAER Model in a Clinical Health Care System.

Times: 11:00 a.m.–6:30 p.m., EDT.
Place: Teleconference.
Agenda: To review and evaluate grant applications.

For Further Information Contact: Jaya Raman Ph.D., Scientific Review Officer, CDC, 4770 Buford Highway, Mailstop F80, Atlanta, Georgia 30341, Telephone: (770) 488–6511, kva@cdc.gov.

The Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Sherri Berger,
Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019–01960 Filed 2–11–19; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

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