552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. 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: Center for Scientific Review Special Emphasis Panel, Childhood Obesity ARRA CR.

Date: October 2, 2009. Time: 10 a.m. to 12 p.m.

Agenda: To review and evaluate grant applications.

Place: Hyatt Regency Bethesda, One Bethesda Metro Center, 7400 Wisconsin Avenue, Bethesda, MD 20814.

Contact Person: Ann A. Jerkins, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6154, MSC 7892, Bethesda, MD 20892. 301–435– 4514. jerkins@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Center for Scientific Review Special Emphasis Panel, Arthritis, Connective Tissue and Skin (ACTS), Small Business Applications.

Date: October 7, 2009. Time: 8:30 a.m. to 4 p.m.

Agenda: To review and evaluate grant applications.

*Place:* Hilton Washington/Rockville, 1750 Rockville Pike, Rockville, MD 20852.

Contact Person: Aftab A. Ansari, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4108, MSC 7814, Bethesda, MD 20892. 301–594–6376. ansaria@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: September 14, 2009.

#### Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E9–22587 Filed 9–18–09; 8:45 am]

BILLING CODE 4140-01-M

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

## Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings 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. 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: Center for Scientific Review Special Emphasis Panel; PCMB Member SEP.

Date: September 30, 2009.

Time: 9 a.m. to 10 p.m.

*Agenda:* To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Barbara Whitmarsh, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 2206, MSC 7890, Bethesda, MD 20892, (301) 435–4511, whitmarshb@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: Center for Scientific Review Special Emphasis Panel; Member Conflicts: GMPB.

Date: October 2, 2009.

Time: 12 p.m. to 6 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892 (Telephone Conference Call).

Contact Person: Patricia Greenwel, PhD, Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 2178, MSC 7818, Bethesda, MD 20892, 301–435–1169, greenwep@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS) Dated: September 11, 2009.

#### Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E9–22435 Filed 9–18–09; 8:45 am] BILLING CODE 4140–01–M

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Docket Number NIOSH-187]

Proposed Enhancements to Occupational Health Surveillance Data Collection Through the Healthcare Personnel Safety (HPS) Component of the National Healthcare Safety Network (NHSN)

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice of public meeting and availability for public comment.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following meeting and request for public comment on proposed enhancements to occupational health surveillance data collection through the Healthcare Personnel Safety (HPS) Component of the National Healthcare Safety Network (NHSN).

Public Comment Period: Comments must be received by October 21, 2009.

Public Meeting Date and Time: November 16, 2009, 1 p.m.–5 p.m. and November 17, 2009, 8 a.m.–5 p.m.

Place: Sheraton Cincinnati Airport Hotel, 2826 Terminal Drive, Hebron, Kentucky 41048, (859) 371–6166.

Purpose of Meeting: To obtain public comment on the content and conduct of enhancements to occupational health surveillance data collection through the Healthcare Personnel Safety (HPS) Component of the National Healthcare Safety Network (NHSN). Special emphasis will be placed on discussion of the content of the data collection forms.

Status: The forum will include scientists and representatives from industry, labor, and other stakeholders, and is open to the public. Attendance is limited only by the space available. The meeting room will accommodate approximately 60 people. Interested parties should contact Ahmed Gomaa at agomaa@cdc.gov or (513) 841–4337, or

Sara Luckhaupt at *sluckhaupt@cdc.gov* or (513) 841–4123 for information about how to register for the meeting.

**ADDRESSES:** Oral comments given at the meeting will be recorded and included in the NIOSH–187 docket. You may submit comments, identified by docket number NIOSH–187, by any of the following methods:

- Mail: NIOSH Docket Office, Robert A. Taft Laboratories, MS-C34, 4676 Columbia Parkway, Cincinnati, OH 45226.
  - Facsimile: (513) 533-8285.
  - E-mail: nioshdocket@cdc.gov.

All information received in response to this notice will be available for public examination and copying at the NIOSH Docket Office, 4676 Columbia Parkway, Cincinnati, Ohio 45226. A complete electronic docket containing all comments submitted will be available on the NIOSH Web page at <a href="http://www.cdc.gov/niosh/docket">http://www.cdc.gov/niosh/docket</a>, and comments will be available in writing by request. NIOSH includes all comments received without change in the docket, including any personal information provided.

Background: The NHSN is an Internet-based surveillance system established in 2005 by the CDC Division of Healthcare Quality Promotion (DHQP) that includes both patient safety and healthcare personnel health and safety modules. The proposed enhancement to the NHSN will electronically link and integrate a wide variety of ongoing occupational health surveillance activities and facilitate more accurate and timely prevention strategies, while meeting necessary confidentiality and security requirements.

This project focuses on surveillance and prevention of four occupational health outcomes among healthcare workers: (1) Traumatic injuries in the workplace (specifically: (a) musculoskeletal disorders due to patient handling and working in awkward postures, (b) slips, trips, and falls, and (c) workplace violence); (2) dermatitis due to workplace exposures; (3) workrelated asthma; and (4) airborne transmission of tuberculosis in the workplace. Once these enhancements to NHSN are successfully implemented, additional occupational health metrics can be added to the system to address emerging problems such as pandemic influenza.

The success of this project will depend on the participation of healthcare facilities in the surveillance system. Because the stakeholders themselves will be the central users of our proposed additions to NHSN, they will be extensively involved in every stage of this project—including initial development, implementation, and evaluation of the new module and event forms. This meeting will provide an opportunity for stakeholders to contribute to the initial development of the data collection forms.

#### FOR FURTHER INFORMATION CONTACT:

Ahmed Gomaa, Robert A. Taft Laboratories, MS–R17, 4676 Columbia Parkway, Cincinnati, OH 45226, telephone (513) 841–4337, or Sara Luckhaupt, same address, telephone (513) 841–4123.

References: National Healthcare Safety
Network (NHSN)—http://
www.cdc.gov/nhsn/index.html.
Healthcare Personnel Safety
Component—http://www.cdc.gov/
nhsn/hps.html.

Dated: September 14, 2009.

#### Tanja Popovic,

Chief Science Officer, Centers for Disease Control and Prevention.

[FR Doc. E9–22656 Filed 9–18–09; 8:45 am] **BILLING CODE 4163–19–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

# Patient Safety Organizations: A Compliance Self-Assessment Guide

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Notice of Availability—Patient Safety Organizations: A Compliance Self-Assessment Guide.

**SUMMARY:** AHRQ is announcing the availability of a document entitled: "Patient Safety Organizations: A Compliance Self-Assessment Guide." The Patient Safety and Quality Improvement Act of 2005, Public Law 109–41, 42 U.S.C. 299–b21—b–26 (Patient Safety Act) provides for the formation of Patient Safety Organizations (PSOs), which collect, aggregate, and analyze confidential information regarding the quality and safety of healthcare delivery. The Patient Safety and Quality Improvement Final Rule (Patient Safety Rule) (42 CFR part 3) authorizes AHRQ, on behalf of the Secretary of HHS, to: list as a PSO an entity that attests that it meets the statutory and regulatory requirements for listing; and request additional information and conduct reviews (including announced or unannounced site visits) to assess PSO compliance. To assist PSOs in making the required attestations and preparing for a

compliance review, AHRQ developed the sample questions in this guide to encourage each PSO to take a thorough and systematic approach to compliance. The guide recognizes that each PSO's approach to compliance may be different based upon the specific mission it has chosen, the specific activities and expertise it offers to healthcare providers, and its size and mode of operation. Thus, these questions are merely illustrative; some questions will not be applicable or even appropriate for every PSO. The guide does not establish new standards or requirements beyond those that are established by the Patient Safety Rule.

**DATES:** Availability of resource.

ADDRESSES: "Patient Safety Organizations: A Compliance Self-Assessment Guide" can be accessed electronically at the following HHS Web site: http://www.pso.ahrg.qov/ index.html.

#### FOR FURTHER INFORMATION CONTACT:

Diane Cousins, RPh., Center for Quality Improvement and Patient Safety, AHRQ, 540 Gaither Road, Rockville, MD 20850; Telephone (toll free): (866) 403–3697; Telephone (local): (301) 427 1111; TTY (toll free): (866) 438–7231; TTY (local): (301) 427–1130; E-mail: pso@ahrq.hhs.qov.

#### SUPPLEMENTARY INFORMATION:

#### **Background**

The Patient Safety Act establishes a framework by which healthcare providers can report information voluntarily to PSOs, on a privileged and confidential basis, for the aggregation and analysis of patient safety events and quality concerns. A PSO is an entity listed by the Secretary of HHS, which has a primary focus to conduct activities to improve patient safety and the quality of healthcare delivery.

The requirements governing PSOs are set forth in subpart B of the Patient Safety Rule. These include: the requirements that an entity must meet to become, and remain listed, as a PSO; the procedures and processes for assessing an entity's eligibility; the processes for ensuring a PSO's compliance with the requirements of the Patient Safety Rule, and for correcting deficiencies in a PSO's compliance; and the process by which a PSO can voluntarily relinquish its listing or, in the case of a PSO that does not correct one or more deficiencies, the process for delisting a PSO for cause. Within the framework established by the Patient Safety Act, PSOs are a source of expert advice for providers, and PSOs enable providers to take advantage of the potential for significant aggregation of patient safety