

**SUMMARY:** The Office of Disease Prevention and Health Promotion and the Federal Steering Committee for the Prevention of HAIs have developed a new phase of the *National Action Plan to Prevent Health Care-Associated Infections: Road Map to Elimination (HAI Action Plan)*. The first three phases of the *HAI Action Plan* meaningfully enhanced coordination of federal efforts to address HAIs by establishing a structure to regularly share best practices, resources, and lessons learned among federal partners. Given the pressing public health threat of antibiotic resistance and the need to maximize efficiency of federal activities, the Steering Committee recognized the opportunity to leverage this existing committee and network of participants to enhance the implementation of the *CARB National Action Plan* goal of slowing the emergence of antibiotic resistant bacteria and preventing the spread of resistant infections through antibiotic stewardship programs. Thus, Phase Four of the *HAI Action Plan* focuses on the importance of antibiotic stewardship to prevent HAIs, and specifically highlights the coordination between various health agencies. Recommendations within Phase Four align and reinforce the goals and objectives of the *CARB National Action Plan*. This update to the *HAI Action Plan* reaffirms a federal commitment to improving health care quality and protecting the health of all Americans. Phase Four is titled: *Coordination among Federal Partners to Leverage HAI Prevention and Antibiotic Stewardship*. The Steering Committee and the Office of Disease Prevention and Health Promotion invite public and private professionals, organizations, and consumer representatives to provide comments on the most recent draft of Phase Four.

**DATES:** Comments on the proposed Phase Four of the *National Action Plan to Prevent Health Care-Associated Infections: Road Map to Elimination* must be received no later than 5 p.m. on December 26, 2017.

**ADDRESSES:** Interested persons or organizations are invited to submit written comments by any of the following methods:

- *Email:* [OHQ@hhs.gov](mailto:OHQ@hhs.gov) (please indicate in the subject line: Phase Four: HAI Action Plan).
- *Mail/Courier:* Office of Disease Prevention and Health Promotion, Attn: Division of Health Care Quality, Department of Health and Human Services, 1101 Wootton Parkway, Suite LL100, Rockville, MD 20852.

**FOR FURTHER INFORMATION CONTACT:** Anna Gribble, Health Policy Fellow, Office of Disease Prevention and Health Promotion, via email at [anna.gribble@hhs.gov](mailto:anna.gribble@hhs.gov).

**SUPPLEMENTARY INFORMATION:** HAIs are a significant cause of morbidity and mortality within the United States, and at any given time, approximately one in every 25 hospitalized patients has at least one HAI. This translates to approximately 1.7 million individuals each year. In 2008, the Department of Health and Human Services established the Steering Committee for the Prevention of HAIs. The Committee consists of senior-level leaders from across the Department including clinicians, scientists, and public health practitioners. In 2009, the first iteration of the *HAI Action Plan* was developed and focused on addressing high-priority HAI-related infections within acute care hospital settings. However, given the movement of patients between various health care settings, infection control and the prevention and elimination of HAIs could no longer be compartmentalized to any one type of facility. The Steering Committee decided to expand the scope of its activities to include additional settings and released a second phase of the *HAI Action Plan* in 2009 with three new areas of focus: HAIs in ambulatory surgical centers and end-stage renal disease facilities, as well as increasing influenza vaccination coverage among health care personnel. The Committee expanded the action plan yet again in 2013 with a third phase which included long-term care facilities. More recently, the emergence of antibiotic-resistant bacteria and the clear tie with health care-associated infections has led the Steering Committee to focus on antibiotic stewardship. In July 2016, the Steering Committee decided to develop Phase Four of the *HAI Action Plan* to cover the federal partners coordinated approach to preventing HAIs and implementing antibiotic stewardship initiatives and to describe the clear tie between these two health care quality concerns.

Interested persons or organizations are invited to submit written comments in response to the proposed Phase Four of the *HAI Action Plan*. Written comments should not exceed more than two pages. The comments should reference the specific section of the document to which feedback refers. To be considered, the person or representative from an organization must self-identify and submit the written comments by close of business on December 26, 2017.

Dated: November 20, 2017.

**Don Wright,**

*Deputy Assistant Secretary for Health, (Disease Prevention and Health Promotion).*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the National Preparedness and Response Science Board

**AGENCY:** Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Preparedness and Response Science Board (NPRSB) will hold a public teleconference on December 7, 2017.

**DATES:** The NPRSB meeting is December 7, 2017, from 12:00 p.m. to 1:00 p.m. EST.

**ADDRESSES:** We encourage members of the public to attend the teleconference. To register, send an email to [nprsb@hhs.gov](mailto:nprsb@hhs.gov) with "NPRSB Registration" in the subject line. Submit your comments to [nprsb@hhs.gov](mailto:nprsb@hhs.gov) or on the NPRSB Contact Form located at <http://www.phe.gov/Preparedness/legal/boards/nprsb/Pages/RFNBSBComments.aspx>.

**SUPPLEMENTARY INFORMATION:** Pursuant to section 319M of the Public Health Service Act (42 U.S.C. 247d-7f) and section 222 of the Public Health Service Act (42 U.S.C. 217a), HHS established the NPRSB. The Board shall provide expert advice and guidance to the HHS Secretary on scientific, technical, and other matters of special interest regarding current and future chemical, biological, nuclear, and radiological agents, whether naturally occurring, accidental, or deliberate. The NPRSB may also provide advice and guidance to the HHS Secretary and/or the Assistant Secretary for Preparedness and Response (ASPR) on other matters related to public health emergency preparedness and response.

*Background:* The NPRSB public meeting on December 7, 2017, is dedicated to the deliberation and vote on the Future of the NPRSB Work Group Draft Letter to the ASPR. We will post modifications to the agenda on the NPRSB December 7, 2017, meeting Web site, which is located at <https://www.phe.gov/nprsb>.

*Availability of Materials:* We will post all meeting materials prior to the meeting on the NPRSB December 7, 2017, meeting Web site located at <https://www.phe.gov/nprsb>.

*Procedures for Providing Public Input:* Members of the public attend by teleconference via a toll-free call-in phone number, which is available on the NPRSB Web site at <https://www.phe.gov/nprsb>.

We encourage members of the public to provide written comments that are relevant to the NPRSB teleconference prior to December 7, 2017. Send written comments by email to [nprsb@hhs.gov](mailto:nprsb@hhs.gov) with "NPRSB Public Comment" in the subject line. The NPRSB Chair will respond to all comments received by December 1, 2017, during the meeting.

Dated: November 15, 2017.

**Robert P. Kadlec,**

*Assistant Secretary for Preparedness and Response, Department of Health and Human Services.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Announcement of Meetings of the Tick-Borne Disease Working Group

**AGENCY:** Office of HIV/AIDS and Infectious Disease Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** The Department of Health and Human Services (HHS), in accordance with Section 2062 of the *21st Century Cures Act*, announces the inaugural meetings of the Tick-Borne Disease Working Group (Working Group). For these first meetings, Working Group members will focus on plans to submit a report to the Secretary of HHS and Congress that is due December 2018. The report will address a number of issues related to tick-borne diseases, including: Ongoing research; advances in research; Federal activities; gaps in research; the Working Group's meetings; and the comments received by the Working Group. The report will also include any recommendations to the Secretary of Health and Human Services. Planning will include developing plans to solicit stakeholder input and establish subcommittees. Working Group members will also determine how and when future meetings will be conducted.

**DATES:** December 11, 2017, from 12:30 p.m. to 4:30 p.m., Eastern Time, and

December 12, 2017 from 9:00 a.m. to 4:30 p.m., Eastern Time.

**ADDRESSES:** Hubert H. Humphrey Building, Great Hall, 200 Independence Avenue SW., Washington, DC 20201; via webcast at: <https://www.hhs.gov/ash/advisory-committees/tickborne-disease/index.html>.

**FOR FURTHER INFORMATION CONTACT:**

James Berger, Office of HIV/AIDS and Infectious Disease Policy, Office of the Assistant Secretary for Health, Department of Health and Human Services; via email at [tickbornedisease@hhs.gov](mailto:tickbornedisease@hhs.gov).

**SUPPLEMENTARY INFORMATION:** Members of the public may attend the meetings in person or via webcast at <https://www.hhs.gov/ash/advisory-committees/tickbornedisease/index.html>.

In-person attendance at the meetings is limited to space available; therefore preregistration for public members is advisable and can be accomplished by registering at <http://events.r20.constantcontact.com/register/event?llr=zz7zptzab&oeidk=a07edrodfo088eae0cf> by Friday, December 8, 2017. On the day of the meetings, seating will be provided first to persons who have preregistered. People who have not preregistered will be accommodated on a first come, first served basis if additional seats are still available 10 minutes before the meetings start. Non-U.S. citizens who plan to attend in person are required to provide additional information and must notify the Working Group support staff via email at [tickbornedisease@hhs.gov](mailto:tickbornedisease@hhs.gov) before November 30, 2017. Members of the public who wish to attend the meetings should enter from Independence Avenue. Please allow extra time to get through security.

The Working Group invites public comment on issues related to the Working Group's charge. It may be provided in-person at the meetings or in writing. Persons who wish to provide public comment in person should submit a request to do so via email at [tickbornedisease@hhs.gov](mailto:tickbornedisease@hhs.gov) on or before December 1, 2017. In-person comments will be limited to three minutes each to accommodate as many speakers as possible. A total of 60 minutes will be allocated to public comment and may be divided between the two days of meetings. If more requests are received than can be accommodated, speakers will be randomly selected. The nature of the comments will not be considered in making this selection.

Public comment may also be provided in writing only. Individuals who would like to provide written public comment should send their comments to

[tickbornedisease@hhs.gov](mailto:tickbornedisease@hhs.gov) on or before December 6, 2017.

Meeting information is available at the group's Web page: <https://www.hhs.gov/ash/advisory-committees/tickbornedisease/index.html> or by contacting the Working Group via email at [tickbornedisease@hhs.gov](mailto:tickbornedisease@hhs.gov) to request additional information.

*Purpose of Meetings:* Working Group members will focus on plans to submit a report to the Secretary of HHS and Congress that is due December 2018. The report will address a number of issues related to tick-borne diseases, including: Ongoing research; advances in research; Federal activities; gaps in research; the Working Group's meetings; and the comments received by the Working Group. The report will also include any recommendations to the Secretary of Health and Human Services. Planning will include developing plans to solicit stakeholder input and establish subcommittees. Working Group members will also determine how and when future meetings will be conducted.

*Background and Authority:* The Tick-Borne Disease Working Group was established on August 10, 2017, in accordance with Section 2062 of the *21st Century Cures Act*, and the Federal Advisory Committee Act, 5 U.S.C. App., as amended, to provide expertise and review all HHS efforts related to tick-borne diseases to help ensure interagency coordination and minimize overlap, examine research priorities, and identify and address unmet needs. The Working Group will submit a report to the Secretary of HHS and Congress on issues related to tick-borne diseases, including: Ongoing research; Advances in research; Federal activities; gaps in research; the Working Group's meetings; and the comments by the Working Group.

*Structure, Membership, and Operation:* The Working Group consists of 14 members selected to represent a diverse range of stakeholder perspectives. Seven members were nominated and selected from the public, and seven members, or their designees, represent federal agencies doing this work. A roster of Working Group members is available at the Working Group's Web page: <https://www.hhs.gov/ash/advisory-committees/tickbornedisease/index.html>.

Dated: November 15, 2017.

**Richard Wolitski,**

*Director, Office of HIV/AIDS and Infectious Disease Policy, Designated Federal Officer, Tick-Borne Disease Working Group.*

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