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## Bylaws: Appendix A

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### Historical Document

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### Oak Ridge Reservation Health Effects Subcommittee Purpose, History, Structure, and Process

Citizens Advisory Committee on Public Health Service Activities and Research at Department of Energy Sites

March 21, 2001 (Attachment B Updated January 2002)

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#### ATTACHMENT A

Charter for the Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites

## **ATTACHMENT B**

List of Members for the Oak Ridge Reservation Health Effects Subcommittee

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Statements of Purpose for Subcommittee Work Groups

### **1. INTRODUCTION**

This document provides a blueprint for the function and operation of the Oak Ridge Reservation Health Effects Subcommittee, which convened in November 2000. This document describes the purpose of the subcommittee (Section 2), the history of the subcommittee (Section 3), the roles and responsibilities of subcommittee members (Section 4), and the process guidelines for subcommittee meetings (Section 5).

### **2. PURPOSE**

#### **2.1 Providing Advice and Recommendations to ATSDR and CDC**

The purpose of the Oak Ridge Reservation Health Effects Subcommittee is to provide advice and recommendations concerning public health activities and research conducted by the Agency for Toxic Substances and Disease Registry and the Center for Disease Control and Prevention at the Oak Ridge Reservation Department of Energy site. The advice and recommendations are submitted to the administrator of the Agency for Toxic Substances and Disease Registry (ATSDR), who is also the director of the Centers for Disease Control and Prevention (CDC). The subcommittee's recommendations relate specifically to activities of ATSDR and CDC. Recommendations on activities of any other federal, state, or local agency are not within the scope of the subcommittee's charter.

The subcommittee will review all relevant previous studies and investigations in a step-by-step process in order to provide advice on the selection, design, scope, prioritization, and adequacy of ATSDR's and CDC's public health activities for the Oak Ridge Reservation. Specifically, the subcommittee will

- Help prioritize public health issues and community concerns to be evaluated.
- Provide input in developing ATSDR's public health assessment and community needs assessment for the Oak Ridge Reservation site.
- Provide input into follow-up public health activities.
- Provide an opportunity for citizens to collaborate with agency staff members and learn more about the public health assessment process and other public health activities.

ATSDR is committed to engaging the Oak Ridge community as partners in conceptualizing, planning, and implementing public health activities at the site, and in communicating and discussing results and determining appropriate follow-up actions. The Oak Ridge Reservation Health Effects Subcommittee provides a forum for coordination of these activities. ATSDR and CDC will retain full, independent decision-making authority and responsibility, but will give great weight to the subcommittee's consensus recommendations when making decisions. CDC and ATSDR have the responsibility to respond in writing to all recommendations, either to indicate acceptance or explain the reasons for rejection.

#### **2.2 ATSDR Public Health Assessment**

ATSDR will begin preliminary work on a public health assessment for the Oak Ridge Reservation in 2000. The assessment, for which the subcommittee will provide recommendations, has two main purposes: To determine how releases of hazardous substances from the reservation may have affected off-site public health in communities around the sites.

- To decide what further off-site public health activities or actions should be conducted.

ATSDR will conduct the following activities as a part of the public health assessment:

- Identify and characterize both current and past exposures of off-site populations to radiologic and chemical contaminants.
- Identify populations exposed at levels of health concern.
- Address community health concerns.
- Recommend follow-up public health actions or studies.

### **2.3 ATSDR Community Needs Assessment**

ATSDR will begin preliminary work on the community needs assessment in 2000. This assessment, for which the subcommittee will provide recommendations, will identify the off-site health concerns of residents near the Oak Ridge Reservation. The needs assessment involves collecting data on community demographics, health concerns, health education needs, and available health resources. ATSDR will collect this information by reviewing existing documents, reports, and surveys; interviewing community members, health officials, and health care providers; and conducting community focus groups. The community needs assessment will provide the basis for developing and implementing a community health education program to assist community members and health care providers in understanding, preventing, and mitigating the potential health effects of exposure to hazardous substances from the Oak Ridge Reservation site.

## **3. HISTORY**

The Oak Ridge Reservation Health Effects Subcommittee was formed in 2000 as the culmination of many different activities and events that took place over the previous decade. These activities are described in the following sections. A timeline of activities leading to the formation of the subcommittee is shown in Figure 1.

### **3.1 Initial Concern About Public Health Implications of Department of Energy Activities**

For several decades, the U.S. Department of Energy (DOE) and its predecessor agencies have conducted research and production activities at a number of sites across the country, including the Oak Ridge Reservation. These activities involved development and production of nuclear weapons and materials, as well as other nuclear energy-related research. People in communities near and downwind from these sites became increasingly concerned about whether site activities might be affecting their health. In response to these concerns, DOE asked the U.S. Department of Health and Human Services (DHHS) to independently investigate the public health implications of its nuclear energy-related activities. DOE formally delegated responsibility for this work to DHHS in two memorandums of understanding issued in 1990. Under one memorandum of understanding, the DHHS's Centers for Disease Control and Prevention (CDC) became responsible for analytic epidemiologic research concerning the potential impacts of DOE's energy-related activities.

- The other memorandum of understanding recognized that the Agency for Toxic Substances and Disease Registry (also under DHHS) would be responsible for all public health activities mandated by Superfund. These activities included conducting public health assessments at DOE sites, in addition to other follow-up activities, as appropriate.

These two memorandums of understanding provided the administrative framework for subsequent CDC and ATSDR investigations at DOE sites. To improve coordination, DOE and DHHS consolidated the two memorandums into a single memorandum of understanding in 1999. DOE retained responsibility for other health-related activities, such as a health surveillance of current and former workers, and other DOE programs designed to protect the health and safety of DOE workers and community residents.

### **3.2 Initial Public Health Activities at Oak Ridge Reservation**

The Agency for Toxic Substances and Disease Registry (ATSDR) began its public health activities in the Oak Ridge Reservation area in 1992. At that time, the Tennessee Department of Health was embarking on the Oak Ridge Health Studies to examine the exposure dose that community members may have received from radiological and chemical contaminants released from the site. These studies by the state focused on past exposures. To avoid duplication, ATSDR decided to concentrate its initial work on the potential public health impacts associated with current exposures—specifically the Superfund clean-up activities at the East Fork Poplar Creek and Watts Bar Reservoir areas. ATSDR will utilize the results of these studies in developing the public health assessment.

### 3.3 Establishment of Federal Advisory Committee for DOE Sites

As ATSDR and CDC began their public health activities at DOE sites, communities around these sites expressed an interest in providing advice and recommendations to ATSDR and CDC about their activities. In response, CDC and ATSDR established a Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites on July 7, 1994. This committee is chartered under the Federal Advisory Committee Act (FACA).<sup>\*</sup> A copy of the charter is provided in Attachment A. When a community around a site wants to provide advice and recommendations to ATSDR and CDC, the agencies can establish a subcommittee of this FACA committee. Each subcommittee focuses specifically on public health activities and research at a particular DOE site. The first four subcommittees were established for the Fernald, Hanford, Idaho National Engineering and Environmental Laboratory, and Savannah River sites. Since their inception, these subcommittees have assisted in communicating community site concerns and enhancing the development of research and public health activities at these sites.

### 3.4 Need for Improved Coordination and Communication

In the late 1990s, both government staff members and members of the public who were following public health activities at DOE sites began to feel that these activities could be enhanced by greater coordination. In 1998, in response to these concerns, ATSDR, CDC, and DOE launched a process to develop more credible, coherent, and coordinated agendas of public health activities and health studies for DOE sites. This process involved a series of stakeholder workshops and meetings at each site, including the Oak Ridge Reservation site. These meetings had two purposes:

- To inform community members about the work completed to date.
- To solicit input from community members about current ATSDR and CDC activities and the direction these activities should take in the future.

ATSDR convened a number of agencies to discuss the feedback received regarding the Oak Ridge site. Meeting with staff members from ATSDR and CDC were representatives of DOE, the U.S. Environmental Protection Agency (EPA), the Health Resources and Services Administration, the Tennessee Department of Health, and the Tennessee Department of Environment and Conservation. These agencies determined that they needed to improve communications with communities around the Oak Ridge Reservation about their priorities and public health activities. In February 1999, the agencies requested that ATSDR lead an effort to improve communication.

### 3.5 Establishment of the ORR Public Health Working Group

In response to this charge, ATSDR worked with the other agencies to establish the Oak Ridge Reservation Public Health Working Group. The group provided a forum for local organizations and individuals to discuss how they wanted to provide advice and recommendations to ATSDR and CDC. Three public health working group meetings were held in Oak Ridge, Tennessee, in 1999.

- The first meeting, held in April 1999, included 23 organizations and more than 100 people. At this meeting, community members expressed their interest in having a public health forum and

discussed options for structuring the forum. Almost all participants were interested in establishing a public health forum.

- The second meeting, held in June 1999, was an informal informational meeting at which the agencies discussed their missions, mandates, and budgets, as well as the public health agenda process. Presentations on possible forum structures were given by a community member and two members of advisory groups at other DOE sites.
- Twenty-two organizations and more than 80 people participated in the third meeting, which was held in September 1999. The participants provided the agencies with specific input on the type of public health forum that would best promote communication and interaction between communities and government agencies regarding public health activities at the Oak Ridge Reservation.

In general, members of the public health working group wanted a forum and process that would:

- Enable them to provide group (as opposed to individual) recommendations and advice to the health agencies involved at the site.
- Have a fair and balanced membership without conflicts of interest.
- Compensate subcommittee members for their time.
- Provide open membership on working groups so that all interested individuals could participate in discussing and analyzing health issues.
- Be self-governing and independent of government agencies.

### 3.6 Establishment of the Oak Ridge Reservation Health Effects Subcommittee

After carefully considering this input, ATSDR and CDC determined that the most appropriate way to meet these needs was by establishing a subcommittee under the FACA committee established in 1994. The roles and responsibilities of a Health Effects Subcommittee closely mirror the interests and needs expressed by community members during the working group meeting. The Oak Ridge Reservation Health Effects Subcommittee was officially established on December 28, 1999. It is the fifth subcommittee of the Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites.

### 3.7 Selection of Members of the Oak Ridge Reservation Health Effects Subcommittee

Members for the Oak Ridge Reservation Health Effects Subcommittee were selected by ATSDR and CDC using the same selection process used and approved for the Hanford Health Effects Subcommittee. This process involves several steps:

- Development of selection criteria.
- Nominations by the community.
- Selection of members from the pool of nominees based on the selection criteria.

Criteria for member selection were based on the following:

- Input from the three public health working group meetings in 1999 regarding the number of members and the types of disciplines, background, and interests that should be represented on the subcommittee.
- Requirements that members must be balanced in terms of their affiliations and the functions to be performed by the subcommittee, and that the subcommittee should have equitable geographic, ethnic, and gender representation. (These requirements were specified in FACA Public Law 92-463; GSA Final Rules 41 CFR Part 101-6; and DHHS guideline Chapter 9-00.)

The nomination process began in March 2000 when ATSDR and CDC solicited nominations for membership on the Oak Ridge Reservation Health Effects Subcommittee. In an attempt to reach as many interested individuals as possible, many venues were used to publicize the call and process for nominations. Among these were community mailings, newspaper ads, presentations to community members, speaking engagements, and referrals from community members. In May 2000, a three-person

panel met to select persons to be considered for membership on the subcommittee from the list of nominees. Two community members attended the meeting to observe the selection process. The panel consisted of a representative from ATSDR, a representative from CDC, and the designated federal official who will serve as the liaison between the subcommittee and ATSDR. The nominees proposed for membership by the selection panel were approved by both the director of the National Center for Environmental Health and the assistant administrator of ATSDR. Final approval of the members of the subcommittee was given by the administrator of ATSDR, who is also the director of CDC. Members were appointed for a term of 4 years.

### 3.8 Initiation of ATSDR's Public Health Assessment and Community Needs Assessment Process

The Tennessee Department of Health released the results of the Oak Ridge Health Studies - Reports of the Oak Ridge Dose Reconstruction in January 2000. ATSDR had delayed initiation of the public health assessment until these studies were released and until a forum could be established for community input. The agency will use information from the Tennessee Department of Health studies, as well as other data, in developing the public health assessment. ATSDR will also consider subcommittee recommendations. In 2000, ATSDR will begin work on the public health assessment and on the community needs assessment.

### 3.9 Renewal of the Subcommittee's Charter

By law, a FACA committee's charter terminates two years after it was established unless it is approved for renewal by the director of the agency that chartered the committee (i.e., the administrator of ATSDR/director of CDC in the case of the Citizens Advisory Committee). The ATSDR administrator is also responsible for determining when to terminate the individual subcommittees of the Citizens Advisory Committee. Factors weighed when evaluating whether to renew a committee's charter or terminate a subcommittee include (1) the extent to which the committee has achieved its purpose and goals and (2) whether further input from the committee would benefit the sponsoring agency. The Citizens Advisory Committee on Public Health Service Activities and Research at Department of Energy Sites was originally chartered on July 7, 1994, and the charter has been renewed several times since then, most recently on July 7, 2000. The charter is next up for renewal on July 7, 2002. Members of the Oak Ridge Reservation Health Effects Subcommittee have been appointed for 4-year terms, and their membership will automatically carry over if the subcommittee's charter is renewed.

## 4. ORGANIZATIONAL STRUCTURE AND ROLES

### 4.1 The Structure of the Oak Ridge Reservation Health Effects Subcommittee

The subcommittee consists of 21 members, as well as liaison members. (A list of members is provided in Attachment B.) The subcommittee may create various work groups to conduct in-depth exploration of specific issues and present findings to the subcommittee for deliberation. The subcommittee reports to a designated federal official, who is not a member of the subcommittee. Any recommendations developed by the subcommittee are submitted to the designated federal official, who conveys them to the ATSDR administrator. The subcommittee's recommendations are made independently of ATSDR and CDC. The organizational structure of the subcommittee is illustrated in Figure 2.

### 4.2 Roles and Responsibilities

**Subcommittee Members** Each subcommittee member has the responsibility to attend and participate in meetings and to work collectively to:

- Develop goals and objectives for the subcommittee.
- Discuss issues, gather information, and listen to public comment at subcommittee meetings, and to develop and present recommendations (and supporting rationale) to the designated federal official.

- Participate in work groups, as needed, with a specific statement of work and to communicate with the groups and monitor their progress.
- Conduct outreach (as appropriate) to community groups to keep them informed of the subcommittee's progress.

When working on subcommittee business, all subcommittee members are considered as special government employees. As special government employees, all subcommittee members must comply with the requirements of the Standards of Ethical Conduct for Employees of the Executive Branch (5 C.F.R. Part 2635), Conflict of Interest Statutes (18 U.S.C. 201-208), the DHHS Standards of Conduct, and regulations governing confidentiality and procurement integrity. (The full text of these requirements will be distributed to all members.) As special government employees, members will be compensated for their time at subcommittee meetings, but not for their time preparing for meetings. **Chair** Responsibilities of the person chairing the subcommittee include the following:

- Work with the designated federal official and use input from the subcommittee to help determine dates and locations for meetings.
- Facilitate all meetings of the subcommittee and follow these guidelines:
- Keep meetings focused on the agenda and within the allocated time frame for each agenda item
- Ensure that procedural guidelines are followed and that an atmosphere of mutual respect is maintained
- Provide opportunities for open exchange of information, concerns, and viewpoints
- Encourage members to communicate their knowledge, ideas, and views.
- Encourage members to understand the various interests and positions expressed, so that they can forge common ground and achieve consensus.
- Ensure that all decisions, recommendations, and points of agreement and consensus are clearly articulated so that they can be understood by all members.
- Forward the subcommittee's recommendations and action items to the designated federal official.
- Select the chair for each work group.
- Generally serve as a liaison between any work groups and the designated federal official. Notify the designated federal official of the dates, times, and locations of work group meetings and keep the designated federal official informed about the progress of the work groups.
- Certify the minutes of each subcommittee meeting.

In the unlikely event that the chair is unable to attend a meeting, the designated federal official and the chair will designate a temporary vice-chair who will assume all of the chair's responsibilities at that meeting. **Liaisons** The subcommittee membership includes liaison members. They serve as a liaison between the subcommittee and their respective agencies. The liaisons have the responsibility to keep their agencies informed about subcommittee progress, questions, and concerns. The liaisons also provide, as appropriate, information and resources from their agencies that may help the subcommittee achieve its goals. Liaison members do not vote on recommendations, but in all other respects they participate fully on the subcommittee. **Designated Federal Official** The responsibilities of the designated federal official include the following.

- Supervise the day-to-day operations of the subcommittee.
- Provide direction, control, and assistance to ensure that the subcommittee operates as required under federal law and in accordance with good management practices.
- Ensure that the subcommittee fulfills its mission as described in its charter.
- Call or approve the calling of subcommittee meetings. (As required under FACA, no subcommittee meetings may take place without the approval and attendance of the designated federal official.)
- Publicly announce the meetings in the Federal Register and other appropriate venues.
- Approve the agenda for each meeting (this is also required by FACA).
- Attend each subcommittee meeting and ensure that a full-time employee of the Department of Health and Human Services attends each working group meeting.
- Make all meetings open to the public and provide opportunities for public participation.
- Ensure preparation of materials by ATSDR and CDC for consideration by the subcommittee.

- Provide each subcommittee member with copies of all written statements submitted by interested individuals.
- Maintain all committee records required by statute and dispose of committee records according to statutes.
- Ensure orientation of new members and provide annual ethics training.
- Take appropriate action to resolve any conflict-of-interest issues for subcommittee members if such issues arise during the tenure of the subcommittee. (For example, the designated federal official may obtain approval for a member to abstain from discussion of an issue if that member has a conflict of interest.)
- Prepare reports on special government employees, including the annual ethics report.
- Adjourn any meeting when adjournment is in the public interest. The designated federal official has the authority to adjourn any meeting not considered to be in the public interest.

**Work Groups** Work groups may be created by the subcommittee for a specific purpose. Work groups are composed of at least two subcommittee members who agree to take responsibility for a particular task or function. Work groups may also include community members who are not on the subcommittee. Work groups are often used by FACA committees as an efficient mechanism for in-depth exploration of issues or development of strawman recommendations or other products for deliberation by the subcommittee. Recommendations from work groups are made to the subcommittee (not to ATSDR or CDC). Work groups should not be used to avoid compliance with the procedural requirements of FACA, therefore, work groups should be utilized to research and provide input in specific issues on a short-term basis. The subcommittee will develop a statement of work or purpose statement and goals for each work group (these statements can be found in Attachment C). Once the work group has fulfilled its purpose, the subcommittee will determine whether to continue or disband the group. Work group responsibilities include the following:

- Notify the subcommittee chair in advance about the date, time, and location for work group meetings
- Incorporate into their membership any members of the public who wish to join. As appropriate, invite additional individuals from the community to join the work group. (Work group members are not subject to conflict-of-interest regulations.)
- Plan the specific approaches for achieving the purpose and goals established for the work group by the subcommittee.
- Brief the subcommittee members at subcommittee meetings and consider subcommittee feedback.
- If requested by the subcommittee, develop recommendations and supporting rationale and present them to the subcommittee for deliberation. If consensus is not reached within the work group, present majority and minority recommendations, along with supporting rationale to the subcommittee. It is important to note that-under FACA-all recommendations by the work group to the subcommittee must be fully deliberated by the subcommittee in open session, and final group recommendations and advice to ATSDR and CDC must come from the subcommittee, not from work groups.

Work groups are not subject to FACA or to the Sunshine Act, therefore prior public notice is not required for work group meetings. However, work groups should strive to provide advance notice of work group meetings to the public whenever possible. Work group meetings will be open to all who wish to attend, except where this may not be practical, such as teleconference meetings. Everyone who attends a work group meeting will be given an opportunity to raise issues, ask questions, or engage in a brief discussion with work group members during the portions of the agenda set aside for public participation. Work group materials or work products will also be made available to as broad an audience as possible, and interested parties may submit written comments or other information to the work groups for review and consideration. Work groups are not required to keep minutes, however, they are encouraged to prepare a brief summary of their meetings and provide it to their members and interested members of the public. In forming work groups, the subcommittee will strive to maintain a balanced representation of stakeholder interests insofar as possible, and will seek a broad range of views, opinions, and information. Work groups must be sensitive to the value of participation by all interests and sectors. A quorum for



work groups is two subcommittee members. In addition, the designated federal official or a full-time employee of the Department of Health and Human Services must be in attendance at all work group meetings. Attendance may be by teleconference. Because work groups are not subject to FACA, work groups may determine their rules of order, and all work group members may vote (if the work group chooses to vote), including those who are not also subcommittee members. As special government employees, subcommittee members who participate on work groups will be compensated for their time attending work group meetings, but not for their time spent preparing for those meetings.

## 5. PROCESS GUIDELINES

### 5.1 Frequency and Scheduling of Subcommittee Meeting

Based on agency needs and input from subcommittee members, ATSDR and CDC will determine the frequency of subcommittee meetings. The location of meetings will be determined by the designated federal official in consultation with the chair and members. Members' schedules will be taken into account when selecting meeting times, and members will be notified of meetings several months in advance to help ensure that they will be able to attend. A quorum of subcommittee members (defined as half the members plus one) must be present for a meeting to take place. For a total voting membership of 21 members, a quorum is 12 members. All Oak Ridge Reservation Health Effects Subcommittee meetings will be open to the public and the media. FACA requires that all subcommittee meetings be announced in the Federal Register at least 15 days prior to the meeting date to ensure that interested members of the public have reasonable advance notification. The designated federal official will make every effort to meet this deadline. However, in the unlikely event that Federal Register notification occurs less than 15 days before the meeting, the meeting must be postponed to allow for adequate notification. All subcommittee business will take place at subcommittee meetings (that is, not by teleconference or e-mail) to ensure the opportunity for public observation and comment.

### 5.2 Agenda Development

The subcommittee will establish an agenda work group tasked with the responsibility of developing a draft agenda for each subcommittee meeting. At each meeting, subcommittee members will have the opportunity to provide input and ideas to the agenda work group regarding the agenda for the next meeting. Members of the public may also suggest agenda items during public comment periods. Considering this input, the agenda work group will develop a draft agenda and forward it to the chair and the designated federal official for review. The designated federal official must approve the final agenda.

### 5.3 Guidelines for Conduct

All subcommittee members agree to

- Attend and participate in meetings. Continuity of participation is essential to the success of the subcommittee. By accepting membership on the subcommittee, individuals commit to attending and participating in meetings, and to joining work groups as appropriate to help the subcommittee make progress on specific issues. On the rare occasion that a member cannot attend a subcommittee meeting, the member is responsible for notifying the chair in advance and for reviewing minutes and transcripts of the meeting to catch up on the progress that the subcommittee made during the missed meeting. Also, in the rare event that a member cannot participate for the entire meeting, the member must notify the chair in advance as to which portion of the meeting the member will participate in.
- During meetings, members have the following responsibilities
  - Listen carefully and consider the input and viewpoints of other subcommittee members and from members of the public.
  - Stay focused on the agenda topic being discussed. Refrain from commenting on other subjects until they are covered under the agenda. (Subjects raised that are not directly relevant to the agenda topic may be noted on a flip chart for possible later discussion. Time will be set aside in the agenda when members can raise new topics and issues for subcommittee consideration.)

- Refrain from interrupting others who have the floor, and speak only when called on by the chair. (Members who wish to speak are asked to tip their placard up. The chair will call on members in the order in which the placards were raised, though she may give preference to members who have not yet spoken on the topic.)
- Strive for brevity when making comments to help ensure the most efficient use of the meeting time and provide maximum opportunity for all members to comment.
- Maintain an atmosphere of civility and respect at all times and refrain from personal attack.
- Interact with interested individuals and groups in the Oak Ridge area to understand their interests and viewpoints. Keep them informed (e.g., via meetings, newsletters, and other avenues) about the progress of the subcommittee. Obtain input from them as appropriate.
- Express concerns in a constructive manner. Make every attempt to constructively resolve tensions or disputes.
- When speaking to the media and other individuals outside the subcommittee, members should speak only for themselves and refrain from attributing statements or positions to other participants or speculating about the opinions or recommendations of the subcommittee that are not fully formulated or still in process. Members are free to talk about decisions or recommendations that the subcommittee has formally adopted. If an article or report appears that misquotes or inaccurately represents an individual, inform the group as soon as possible so that it may be discussed.
- Review and approve the minutes of subcommittee meetings.
- Notify the designated federal official immediately of any actual or potential personal conflict of interest that may arise regarding any portion of the subcommittee's agenda or business.

#### 5.4 Process for Making Decisions and Recommendations

This section specifies the method for reaching a consensus on a major formal recommendation to be forwarded to ATSDR and CDC. Consensus is defined as the maximum possible support for a position but not less than 2/3 of the members voting.

- Step 1: Initiate Recommendation. A formal recommendation may be proposed by an individual member or a work group. The recommendations with supporting documents shall be distributed to the Subcommittee in writing at least 14 days before the scheduled meeting. The agenda work group should be requested to assign an agenda position for discussion.
- Step 2: Ensure Clarification. The chair ensures that the subcommittee members are informed as to the history and intent of the recommendation and have opportunity to ask clarifying questions of the proposer. In preparation for discussion and amendment, the motion may be displayed via computer on a screen visible to the subcommittee.
- Step 4: Discuss Recommendation. The chair opens the floor for discussion, restating the recommendation by reference to the hard copy, or screen copy or a reading by the secretary, as appropriate. After informal general discussion of the recommendation, the screen copy may be amended by specific word changes approved by general consent or straw votes at the chair's digression. This amending shall be done sequentially in so far as possible. If at any time it is deemed necessary, the recommendation and its amendments may be referred to a work group for further development including instructions by the subcommittee.
- Step 5: Consideration of Amended Recommendation. At the discretion of the chair or approved motion of the committee, a straw vote may be taken to determine the support for the recommendation. If appropriate the recommendation may be divided into parts in order to reach a consensus on major portions. Minor portions may be subject to further development.
- Step 6: Formal Approval of Recommendation. The formal approval of a major recommendation shall require a 2/3 affirmative vote of the members voting at a scheduled meeting whose agenda includes the recommendation as a business item. The approved recommendation with the voting tally and any supporting documents shall be sent to the DFO to be forwarded to ATSDR and CDC.
- Step 7: Minority Opinion. One or more formal minority opinions shall be permitted on all recommendations and shall be attached to the majority opinion. They shall be prepared by their supporters on a reasonable time schedule and the authorship of each separate opinion shall be indicated.

The above is intended to meet the majority of the requirements processing major recommendations but should not be construed to prevent other useful motions needed to advance the recommendations.

Examples are: "To extend limits of debate" or "Postpone to a definite time".

## 5.5 Minutes of Meetings

Minutes will be kept of all meetings. A draft of the minutes will be circulated to all members to review for accuracy and completeness. Meeting minutes will be reviewed and approved by members at the subsequent meeting. Final minutes will be certified by the chair. Once certified, the minutes will be posted on the subcommittee's website (when operational). A copy of the final minutes will be maintained at ATSDR's Oak Ridge and Atlanta offices and will be circulated by ATSDR to all subcommittee members.

## 5.6 Participation in Meetings by Nonmember

### **Public Comment**

All Oak Ridge Reservation Health Effects Subcommittee meetings will be open to the public and the media. Interested members of the public are encouraged to attend the subcommittee and work group meetings and, where appropriate, make comments and interact with members of the subcommittee or work groups during those portions of the meeting set aside for public participation. Nonmembers are also encouraged to speak during breaks or between meetings with members to convey information, ideas, or concerns. Comments may also be presented orally during the periods set aside for public comment. To ensure accurate communication, it is recommended that all public commenters also submit a written version of their comments to the subcommittee. If ATSDR or CDC receive comments from a member of the public concerning the subcommittee, they will forward the comments to the subcommittee. Therefore, for efficient communication, it is recommended that all commenters provide their comments directly to the subcommittee.

The entire subcommittee meeting is open to any member of the public and, during public comment portions of the meetings, any person wishing to make a comment may do so. However, the subcommittee reserves the right to require any disruptive person (including members of the public) to cease the disruption or leave the meeting. Disruptive behavior includes any behavior to distract or interfere with subcommittee function, foul or abusive language, and violent behavior.

### **Participation on Work Groups**

Nonmembers may also serve on work groups established by the subcommittee. Nonmembers may vote on work group decisions, but they may not participate in voting on any subcommittee decision.

### **Participation in Subcommittee Meetings by Invited Experts**

During the course of the FACA process, the subcommittee and/or the work groups may wish to invite interested individuals or community members who have special concerns, expertise, or insight in a particular area to make a presentation or participate directly in a discussion with the subcommittee. In addition, individual members of the subcommittee or work groups may wish to bring nonmember technical experts or other individuals to actively participate in the discussion of specific issues at certain meetings. All requests for nonmembers to perform these functions will be forwarded to a work group which will recommend to the subcommittee whether nonmembers may participate and if so, when and how they may participate. (Note that these recommendations pertain only to subcommittee portions of the meetings. Public comment portions are open to all who wish to participate.)

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