



CHARTER
of the
BOARD OF SCIENTIFIC COUNSELORS
CENTER FOR PREPAREDNESS AND RESPONSE

Committee’s Official Designation (Title).

Board of Scientific Counselors, Center for Preparedness and Response (“BSC, CPR” or “Board”).

Authority.

Section 222 of the Public Health Service Act, [42 U.S.C. §217a], as amended. The Board is governed by the provisions of Public Law 92-463, as amended (5 U.S.C. App. 2).

Objective and Scope of Activities.

Section 301 of the Public Health Service Act, [42 U.S.C. §241], as amended, provides that the Secretary shall render assistance to public authorities in the diagnosis, treatment, control and prevention of physical and mental diseases and impairments of persons. In doing so, the Secretary is authorized to make available information as to the practical application of research and is authorized to obtain the assistance and advice of experts and consultants. Section 311 of the Public Health Service Act, [42 U.S.C. §243], as amended, authorizes the Secretary to assist and advise state and local authorities in matters relating to the preservation and improvement of the public health.

The Board of Scientific Counselors, Center for Preparedness and Response shall provide advice and guidance to the Secretary, Department of Health and Human Services (HHS), the Assistant Secretary for Health (ASH), HHS; the Director, Centers for Disease Control and Prevention (CDC); and to the Director, CPR, CDC.

Description of Duties.

The Board provides advice concerning strategies and goals for preparedness and response activities pertaining to programs and research within the agency and the CPR Divisions and monitors the overall strategic direction and focus of the CPR divisions and offices.

The Board may perform second-level peer review of applications for grants-in-aid for research and research training activities, cooperative agreements, and research contract proposals relating to the broad areas within the center.

Agency or Official to Whom the Committee Reports.

The Board shall provide advice and guidance to the Secretary, HHS; the ASH, HHS; the Director, CDC; and to the Director, CPR, CDC.

Support.

Management and support services shall be provided by the Office of the Director, CPR, CDC.

Estimated Annual Operating Costs and Staff Years.

Estimated annual cost for operating the Board, including compensation and travel expenses but excluding staff support is \$77,218. The estimate of annual person-years of staff support required is 1.25 at an estimated annual cost of \$171,869.

Designated Federal Officer.

CDC will select a full-time or permanent part-time Federal employee to serve as the Designated Federal Officer (DFO) to attend each meeting and ensure that all procedures are within applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO will approve and prepare all meeting agendas, call all of the committee and subcommittee meetings, adjourn any meeting when the DFO determines adjournment to be in the public interest, and chair meetings when directed to do so by the agency head. The DFO shall be present at all meetings of the full Board and subcommittees. In the event that the DFO cannot fulfill the assigned duties of the Board, one or more full-time or permanent part-time employees will be assigned as DFO and carry out these duties on a temporary basis.

Estimated Number and Frequency of Meetings

Meetings shall be held approximately two times a year at the call of the DFO, in consultation with the Chair.

Meetings shall be open to the public except as determined otherwise by the Secretary, HHS, or other official to whom the authority has been delegated, in accordance with the Government in the Sunshine Act (5 U.S.C. §552b(c)) and Section 10(d) of the Federal Advisory Committee Act; notice of all meetings shall be given to the public.

Duration.

Continuing.

Termination.

Unless renewed by appropriate action prior to expiration, the BSC, CPR will terminate two years from the date this charter is filed.

Membership and Designation.

The BSC, CPR shall consist of 11 members, including the Chair. Members and the Chair shall be selected by the Secretary, HHS, or his/her designee, from authorities knowledgeable in the fields relevant to the issues addressed by the offices and divisions within the center, e.g., business, crisis leadership, emergency response and management, engineering, epidemiology, health policy and management, informatics, laboratory science, medicine, mental and behavioral health, public health law, public health practice, risk communication and social science. These members shall be deemed Special Government Employees.

The Board shall consist of three non-voting ex officio members, one each from the HHS Office of the Secretary, the Food and Drug Administration, and the National Institute for Allergy and Infectious Diseases. In addition, the Board shall consist of 7 liaison representatives from the Association of Public Health Laboratories; the Association of State and Territorial Health Officials; the National Association of County and City Health Officials; the Council of State and Territorial Epidemiologists; the Association of Schools and Programs of Public Health; the Tribal Epidemiology Centers; the National Emergency Management Association and such others as the Secretary deems necessary to carry out the functions of the Board. Liaisons shall be deemed representatives.

Members shall be invited to serve for overlapping terms of up to four years, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. A member may serve 180 days after the expiration of that member's term if a successor has not taken office.

Subcommittees.

Subcommittees composed of members of the parent committee and other subject matter experts may be established with approval of the Secretary, HHS, or his/her designee. The subcommittees must report back to the parent committee and must not provide advice or work products directly to the agency. The Department Committee Management Officer will be notified upon establishment of each subcommittee and will be provided information on its name, membership, function, and estimated frequency of meetings.

Record Keeping.

The records of the Board, as well as established subcommittees of the Board, shall be managed in accordance with General Records Schedule 6.2, Federal Advisory Committee Records, or other approved agency records disposition schedule. These records shall be available for public inspection and copying, subject to the Freedom of Information Act, 5. U.S.C. §552.

Filing Date.

November 5, 2021

Approved:

Date

Director
Strategic Business Initiatives Unit