

2025 Current Fiscal Year Report: Board of Scientific Counselors Deputy Director for Infectious Diseases

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1. Department or Agency		2. Fiscal Year	
Department of Health and Human Services		2025	
3. Committee or Subcommittee		3b. GSA Committee No.	
Board of Scientific Counselors Deputy Director for Infectious Diseases		812	
4. Is this New Fiscal Year?	5. Current Charter	6. Expected Renewal Date	7. Expected Term Date
No	10/31/2023	10/31/2025	03/31/2025
8a. Was Terminated During Fiscal Year?	8b. Specific Termination Authority		8c. Actual Term Date
No	E. O. 14217		
9. Agency Recommendation for Next Fiscal Year	10a. Legislation Req to Terminate?	10b. Legislation Pending?	
Terminate	Not Applicable	Not Applicable	
11. Establishment Authority Authorized by Law			
12. Specific Establishment Authority	13. Effective Date	14. Committee Type	14c. Presidential?
42 U.S.C. 217a	11/17/1962	Continuing	No
15. Description of Committee Scientific Technical Program Advisory Board			
16a. Total Number of Reports	No Reports for this Fiscal Year		
17a. Open	17b. Closed	17c. Partially Closed	Other Activities
0	0	0	0
17d. Total			
0			
Meetings and Dates			
No Meetings			

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$0.00	\$0.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$0.00	\$0.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$0.00	\$0.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$0.00
18b(4). Travel and Per Diem to Non-member Consultants	\$0.00	\$0.00
18c. Administrative Costs (FRNs, contractor support, In-person/hybrid/virtual meetings)	\$0.00	\$0.00
18d. Other (all other funds not captured by any other cost category)	\$0.00	\$0.00
18e. Total Costs	\$0.00	\$0.00
19. Federal Staff Support Years (FTE)	0.00	0.00

20a. How does the Committee accomplish its purpose?

The Board provides critical advice and direction to the Secretary, Department of Health and Human Services (HHS), the CDC Director, and CDC's infectious disease national centers on improving the Agency's efforts to prevent and control infectious diseases. The Board comprises a highly respected and diverse group of nationally and

internationally recognized experts, who bring extensive experience to help CDC ensure sound public health policies and programmatic balance for current and emerging infectious disease threats. Their candid advice and critiques help to improve program focus and maximize program effectiveness. Over many years, the Board has provided valuable advice to CDC for strengthening public health capacity at national, state, and local levels; enhancing preparedness to address new diseases and public health challenges; developing new tools for detecting and controlling infectious diseases; and implementing science-based programs to prevent the spread of infectious diseases. The Board's global scientific expertise plays an integral role in helping CDC's infectious disease programs stay abreast of current health trends and appropriate scientific directions, thereby ensuring the highest quality prevention and control efforts.

20b. How does the Committee balance its membership?

The Board consists of up to 17 public members, including the Chair. Members are selected by the Secretary from authorities knowledgeable in the fields relevant to the issues addressed by the infectious disease national centers (e.g., respiratory diseases, healthcare-associated infections, antimicrobial resistance, foodborne diseases, zoonotic and vector-borne diseases, sexually transmitted diseases, preparedness) and related specialties, including clinical and public health practice (including state and local health departments), laboratory practice, research, diagnostics, microbiology, immunology, molecular biology, bioinformatics, infectious disease modeling and outbreak analytics, health policy/communications, and industry. A variety of

sources are used to identify qualified, diverse candidates for the Board. In addition to the broad professional expertise, a diverse membership, including the geographical location of members, helps to ensure that the committee provides a well-balanced perspective.

20c. How frequent and relevant are the Committee Meetings?

In FY 2024 the full Board and its workgroups met less often than in a typical year because several Board and workgroup members had completed their terms of service during the COVID-19 pandemic, and the membership slots had not yet been refilled. The full Board convened once in FY 2024 via webinar in November 2023. Current plans are for two meetings of the full Board in FY 2025. Typically, between meetings, the Board is kept abreast of CDC's infectious disease activities through periodic emails. None of the Board's workgroups convened in FY 2024. It is anticipated that the Board's workgroups will meet in FY 2025 as follows: The FSMA Surveillance Working Group plans to meet twice in FY 2025 to provide input to the Board on challenges with reoccurring, emerging, and persisting (REP) strains of major pathogens and impacts of culture-independent diagnostic testing to surveillance and solving foodborne illness outbreaks and monitoring for antimicrobial resistance. The AFM Task Force plans to present a final report to the Board in November 2024 and will likely sunset following that meeting. It has shared findings, observations, and outcomes with the Board in two key areas: (1) Acute flaccid myelitis etiologies (AFM) and pathogenesis; and (2) clinical treatment of AFM. The workgroup evaluated new research and identified gaps in knowledge related to pathogenesis and clinical management of AFM

and how research activities should be prioritized. In addition, the workgroup has served as an informational network for the Board to discuss the effects of the COVID-19 pandemic on AFM diagnosis, clinical management, and research activities. The Infectious Disease Laboratory Working Group (IDLWG) did not meet in FY 2024; however, it has an updated Terms of Reference as of May 2024, and in FY 2025, its leadership anticipates the group hold 6 virtual meetings to focus on (1) reviewing progress towards integration of advanced molecular detection techniques into public health, and (2) the current and future state of diagnostic testing capabilities. The Board's newest workgroup, the Wastewater Surveillance Working Group, was established in FY 2024, and it plans to hold 6 virtual meetings in FY 2025, when its discussions will focus on assessing (1) targets for wastewater surveillance that can inform public health action, (2) considerations for determining if community-based or facility-based wastewater testing will best inform public health actions, and (3) the ethical, resource, and other limitations that challenge the use and implementation of wastewater surveillance. The workgroup will report its findings on these topics to the Board at meetings in FY 2025 and beyond.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

The Board plays an essential role in assisting CDC and the infectious disease national centers in evaluating programs, setting priorities, and developing and achieving goals. In FY25, the Board and its workgroups will play an important role in helping CDC address several critical public health issues. Examples include providing critical insights regarding wastewater surveillance as a

public health tool for infectious disease programs, advances in foodborne illness surveillance, data modernization efforts in CDC's infectious disease programs, and advances in infectious disease diagnostics. The Board will provide critical information to our infectious disease centers on improving outbreak responses and potential impacts on at risk populations. The Board and its workgroups have significant expertise in these areas that can help CDC best focus resources strategically. The broad infectious disease expertise represented on the Board and centralized in one committee does not exist elsewhere.

20e. Why is it necessary to close and/or partially closed committee meetings?

N/A

21. Remarks

Special Government Employees (SGE): Jeffrey Duchin, start date 07/27/2024, and Ilhem Messaoudi, start date 11/10/2020, declined to extend their terms beyond their end date 09/30/2024. Saad Omer, start date 07/28/2022, resigned 10/24/2023. FDA ex officio member Joseph Toerner, start date 03/21/2024, resigned his FDA position 07/31/2024. FDA ex officio member Yodit Belew, start date 09/14/2024.

Designated Federal Officer

Sarah D. Wiley Senior Advisor, National Center for Emerging and Zoonotic Infectious Diseases, CDC

Committee Members	Start	End	Occupation	Member Designation
Aiello, Allison	02/14/2024	03/31/2025	Columbia University Irving Medical Center	Special Government Employee (SGE) Member

Barocas, Joshua	02/13/2024	03/31/2025	University of Colorado School of Medicine	Special Government Employee (SGE) Member
Belew, Yodit	09/14/2024	03/31/2025	Associate Director for Therapeutic Review, Office of Infectious Diseases, Food and Drug Administration	Ex Officio Member
Caine, Virginia	07/27/2022	09/30/2025	Marion County Public Health Department	Special Government Employee (SGE) Member
Caliendo, Angela	03/04/2024	03/31/2025	Warren Alpert Medical School	Special Government Employee (SGE) Member
Do, Tri	03/07/2024	03/31/2025	Community Health Center Network	Special Government Employee (SGE) Member
Flores, Anthony	02/14/2024	03/31/2025	McGovern Medical School at UTHealth Houston	Special Government Employee (SGE) Member
Hahn, Christine	02/14/2024	03/31/2025	Idaho Department of Health and Welfare	Special Government Employee (SGE) Member
Mangla, Anil	02/02/2024	03/31/2025	Southern Nevada Health District	Special Government Employee (SGE) Member
Markham, Christine	09/28/2023	03/31/2025	Center for Health Promotion and Prevention Research, The University of Texas Health Science Center at Houston School of Public Health	Representative Member
Meyers, Lauren	08/03/2022	03/31/2025	The University of Texas at Austin	Special Government Employee (SGE) Member
Ojikutu, Bisoula	02/16/2024	03/31/2025	City of Boston, Boston Public Health Commission	Special Government Employee (SGE) Member

Perl, Trish	02/14/2024	03/31/2025	O'Donnell School of Public Health, UTSouthwestern Medical Center	Special Government Employee (SGE) Member
Philip, Susan	08/04/2022	03/31/2025	San Francisco Department of Public Health	Special Government Employee (SGE) Member
Shenoy, Erica	09/18/2023	03/31/2025	Associate Professor, Harvard Medical School; Chief of Infection Control, Massachusetts General Brigham Vice President Infectious Diseases and Vaccination Programs Branch Medical Director, Tuberculosis and Sexually Transmitted Diseases Programs Connecticut Department of Public Health	Representative Member
Sheppard, Donald	09/11/2023	03/31/2025		Representative Member
Sosa-Bergeron, Lynn	08/28/2023	03/31/2025		Representative Member
Wittum, Thomas	02/14/2024	03/31/2025	The Ohio State University	Special Government Employee (SGE) Member

Number of Committee Members Listed: 18

Narrative Description

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What are the most significant program outcomes associated with this committee?

Checked if
Applies

Improvements to health or safety	<input checked="" type="checkbox"/>
Trust in government	<input checked="" type="checkbox"/>
Major policy changes	<input type="checkbox"/>
Advance in scientific research	<input checked="" type="checkbox"/>
Effective grant making	<input type="checkbox"/>
Improved service delivery	<input checked="" type="checkbox"/>
Increased customer satisfaction	<input checked="" type="checkbox"/>
Implementation of laws or regulatory requirements	<input type="checkbox"/>
Other	<input type="checkbox"/>

Outcome Comments

N/A

What are the cost savings associated with this committee?

Checked if Applies

None	<input type="checkbox"/>
Unable to Determine	<input checked="" type="checkbox"/>
Under \$100,000	<input type="checkbox"/>
\$100,000 - \$500,000	<input type="checkbox"/>
\$500,001 - \$1,000,000	<input type="checkbox"/>
\$1,000,001 - \$5,000,000	<input type="checkbox"/>
\$5,000,001 - \$10,000,000	<input type="checkbox"/>
Over \$10,000,000	<input type="checkbox"/>
Cost Savings Other	<input type="checkbox"/>

Cost Savings Comments

The Board's advice and guidance to CDC's infectious disease programs could impact cost savings in numerous ways. Through their broad expertise, the members help identify new strategies and opportunities to better target and focus prevention and control efforts. The Board has also been instrumental in helping enhance collaborations across federal organizations and with state and local public health partners.

What is the approximate Number of recommendations produced by this committee for the life of the committee?

212

Number of Recommendations Comments

In FY2024, 4 recommendations were made to CDC leadership and staff during Board meetings. Because the Board met fewer times in FY2024 than in a typical year and because that meeting focused on 2 specific topics, the Board's recommendations were focused on establishing a workgroup on wastewater surveillance and on completing the required report to the HHS Secretary on foodborne illness surveillance.

What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?

32%

% of Recommendations Fully Implemented Comments

No change in FY2024.

What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?

68%

% of Recommendations Partially Implemented Comments

No change in FY2024.

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes ☒ No ☐ Not Applicable ☐

Agency Feedback Comments

The agency provides feedback to the public at each Board meeting through CDC staff and leadership updates on previous recommendations received from the full Board or suggestions from individual Board members and from the working groups. Feedback is also provided less formally via email updates. Recommendations and suggestions by Board members are also regularly categorized and presented to CDC leadership.

What other actions has the agency taken as a result of the committee's advice or recommendation?

Checked if Applies

Reorganized Priorities	<input checked="" type="checkbox"/>
Reallocated resources	<input type="checkbox"/>
Issued new regulation	<input type="checkbox"/>
Proposed legislation	<input type="checkbox"/>
Approved grants or other payments	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/>

Action Comments

Established a workgroup to examine issues regarding wastewater surveillance so that resources focus on agency-wide priorities, standardized approaches to wastewater testing and analysis are adopted, where appropriate, and a coordinated approach to guidance about the use of wastewater surveillance is taken to inform public health actions.

Is the Committee engaged in the review of applications for grants?

No

Grant Review Comments

N/A

How is access provided to the information for the Committee's documentation?

Checked if Applies

Contact DFO	<input checked="" type="checkbox"/>
Online Agency Web Site	<input checked="" type="checkbox"/>
Online Committee Web Site	<input checked="" type="checkbox"/>
Online GSA FACA Web Site	<input checked="" type="checkbox"/>
Publications	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Access Comments

The full minutes of each Board meeting, which includes summaries of workgroup meetings, are posted on CDC's website.