

2022 Current Fiscal Year Report: Board of Scientific Counselors, Center for Preparedness and Response

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1. Department or Agency	Department of Health and Human Services	2. Fiscal Year	2022
3. Committee or Subcommittee	Board of Scientific Counselors, Center for Preparedness and Response	3b. GSA Committee No.	33551
4. Is this New Fiscal Year?	No	5. Current Charter	11/05/2021
		6. Expected Renewal Date	11/05/2023
8a. Was Terminated During Fiscal Year?	No	8b. Specific Termination Authority	
9. Agency Recommendation for Next Fiscal Year	Continue	10a. Legislation Req to Terminate?	Not Applicable
		10b. Legislation Pending?	Not Applicable
11. Establishment Authority	Authorized by Law		
12. Specific Establishment Authority	Section 222 of the Public Health Service Act (42 U.S.C. § 217a) as amended (5 U.S.C. App. 2)	13. Effective Date	01/22/2002
		14. Committee Type	Continuing
		14c. Presidential?	No
15. Description of Committee	Scientific Technical Program Advisory Board		
16a. Total Number of Reports	No Reports for this Fiscal Year		
17a. Open	4	17b. Closed	0
		17c. Partially Closed	0
		Other Activities	0
17d. Total	4		

Meetings and Dates

Purpose	Start	End
<p>Topics discussed were CPR Director Update, CPR Division Updates and Discussion, COVID-19 Response Update, The Data Strategy and Execution</p> <p>Workgroup: An Interagency Approach to Coordinating Data and Analytics Efforts to Support the Whole of Government</p> <p>COVID-19 Response, and CPR Polio Containment Workgroup (PCWG) Update.</p> <p>The agenda included Strategic Capacity Building and Innovation Program: Update and Program Review Working Group Deliberation.</p>	11/02/2021 - 11/02/2021	
<p>This meeting was for CPR BSC Polio Containment Workgroup (PCWG) Updates and Strategic Capacity Building and Innovation Program Review Working Group Updates.</p>	03/24/2022 - 03/24/2022	
<p>Topics of discussion were CPR Preparedness and Response Strategic Plan Update, the Next Generation of PHEP, COVID-19 Response Update, Strategic Capacity Building and Innovation Program Review Working (SRWG) Update, and BSC Discussion of Future Meeting Topics.</p>	06/01/2022 - 06/01/2022	

Number of Committee Meetings Listed: 4

	Current FY	Next FY
18a(1). Personnel		
Pmts to Non-Federal Members	\$2,344.00	\$11,000.00
18a(2). Personnel		
Pmts to Federal Members	\$6,758.00	\$8,110.00
18a(3). Personnel		
Pmts to Federal Staff	\$187,732.00	\$196,399.00
18a(4). Personnel		
Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$0.00	\$39,919.00
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	\$4,544.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	\$32,360.00	\$58,331.00
18d. Total	\$229,194.00	\$318,303.00
19. Federal Staff Support Years (FTE)	1.30	1.30

20a. How does the Committee accomplish its purpose?

The Board provides 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 the Director, Center for Preparedness and 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 divisions and offices. The Board also 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. Second level peer review and review of other agreements or research contract proposals have not been scheduled at this time. The Board also utilizes working groups to facilitate its work. Currently the BSC, CPR has two working groups, one addressing biosafety and containment of polioviruses and another providing are review of the center's Strategic Capacity and Building Innovation Program.

20b. How does the Committee balance its membership?

CPR identified the need to have a diverse, multi-disciplinary group of experts to serve on the Board. The disciplines represented on the Board include business, crisis leadership, emergency response and management, epidemiology, health policy and management, laboratory science, medicine, mental and behavioral health, public health practice, risk communication, and social science. The Board members represent a geographic mix and a diverse sampling of professional backgrounds [academic, medical, government (national, state and local) and private not-for-profit]. CPR continues to identify and solicit nominees who represent a wide variety of ethnic and minority groups, as well as maintain and increase the geographic balance to obtain the broadest representation of different points of views.

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

The current charter specifies at least two meetings per calendar year. The BSC met virtually via Zoom webinar November 2, 2021, December 16, 2021, March 24, 2022, and June 1, 2022, and continues to plan for at least two meetings each year.

Meetings were open to the public in accordance with the Government in the Sunshine Act and Federal Advisory Committee Act. Agenda topics for the meetings can be found in the Meetings section of this report. Meeting minutes are published on-line

<https://www.cdc.gov/cpr/bsc/meetingminutes.htm>.

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

The Director, CPR, and CDC are committed to increasing the application of science and evidence-based principles into public health emergency preparedness and response. This advisory group helps create and support a transparent, multi-disciplinary process for CPR to continuously improve processes, programs, and vision through the input of the Board. The Board's input and recommendations are essential to provide advice and consultation on current and future research priorities; monitor program quality improvement initiatives; and promote innovation related to readiness and response to public health emergencies.

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

N/A

21. Remarks

No formal reports are required of this committee at this time. Octavio Martinez (SGE) resigned (start date 10/30/2019 - end date 6/10/2021); Jamie Ritchey (liaison) resigned (start date 10/1/2019 - end date 6/1/2022); Parham Jaberri resigned (start date 1/15/2020 - end date 9/8/2022); Kristen L. DeBord, ex officio member, has been added (start date 10/20/2020 - end date 10/19/2024).

Designated Federal Officer

Kimberly Lochner Deputy Associate Director for Science, Office for Science and Public Health Practice, Center for Preparedness and Response (OPHPR),

Committee Members	Start	End	Occupation	Member Designation
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Askenazi, Michele	10/01/2019	09/30/2024	Director of Emergency Preparedness, Response, and Communicable Disease Surveillance	Representative Member
Bryant, Paula	01/15/2020	09/30/2024	National Institute Health	Ex Officio Member
Chan, Benjamin	10/01/2019	09/30/2024	State Epidemiologist	Representative Member
DeBord, Kristen	10/20/2020	10/19/2024	Office of the Assistant Secretary for Preparedness and Response	Ex Officio Member
Egan, Christina	10/01/2019	09/30/2024	Chief, Biodefense Laboratory, Wadsworth Center	Representative Member
Fleming, David	11/07/2019	09/30/2023	Trust for America's Health	Special Government Employee (SGE) Member
Gupta, Vin	06/03/2022	09/30/2023	University of Washington	Special Government Employee (SGE) Member
Halverson, Paul	06/08/2022	09/30/2025	Indiana University	Special Government Employee (SGE) Member
Hinton, Denise	01/23/2020	09/30/2024	Chief, Scientist, Food and Drug Administration	Ex Officio Member
Horney, Jennifer	05/13/2021	03/30/2023	Professor and Founding Director, Program in Epidemiology	Special Government Employee (SGE) Member
Jaberi, Parham	01/15/2020	09/08/2022	Chief Deputy Commissioner for Public Health and Preparedness	Representative Member
Lakey, David	05/13/2021	09/30/2024	The University of Texas System	Special Government Employee (SGE) Member

Levine, Marissa	05/13/2021	09/30/2024	Virginia Department of Health and Human Services	Special Government Employee (SGE) Member
Magana, Laura	10/01/2019	09/30/2024	President CEO	Representative Member
Mair, Michael	10/01/2021	12/31/2022	Director OCET	Ex Officio Member
Martinez, Octavio	10/30/2019	09/30/2023	Hogg Foundation for Mental Health, The University of Texas	Special Government Employee (SGE) Member
Pawlecki, Brent	07/14/2016	03/30/2023	The Goodyear Tire & Rubber Company	Special Government Employee (SGE) Member
Ritchey, Jamie	10/01/2019	06/01/2022	Director, Tribal Epidemiology Center	Representative Member
Schall, AJ	03/20/2020	09/30/2024	Director, Delaware Emergency Management Agency	Representative Member
Slemp, Catherine	12/19/2016	03/30/2023	Health Consultant	Special Government Employee (SGE) Member
Tierney, Kathleen	06/13/2022	09/30/2025	University of Colorado at Boulder	Special Government Employee (SGE) Member
Viswanath, Kasisomayajula	08/13/2014	03/30/2023	Professor, Department of Neuroscience, Cell Biology, and Physiology	Special Government Employee (SGE) Member

Number of Committee Members Listed: 22

Narrative Description

The Board of Scientific Counselors, Center for Preparedness and Response (CPR), provides advice and guidance to the Secretary, Department of Health and Human Services (HHS), the Assistant Secretary for Health (ASH); the Director, Centers for Disease Control and Prevention (CDC); and to the Director, CPR, concerning strategies and goals for preparedness and response activities pertaining to programs and research within the divisions

and monitor the overall strategic director and focus of the divisions and offices. The Board may also administer and oversee peer review of CPR scientific programs.

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 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 checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Outcome Comments

Not Applicable

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

What is the approximate Number of recommendations produced by this committee

for the life of the committee?

299

Number of Recommendations Comments

In FY2022, the BSC CPR made 3 formal recommendations endorsing 3 polio containment policies covering occupational health, incident response, and personal protective equipment and hand hygiene and at the December 2021 meeting, the Board made a formal recommendation to establish the Strategic Capacity Building and Innovation Program Review Working Group (SRWG). In FY2021, the BSC CPR made 5 formal recommendations endorsing 5 polio containment policies covering biosafety strategies, security strategies, emergency response strategies, inactivation of infectious material, and shared use of labs for non-poliovirus and poliovirus work. In FY 2020, the BSC CPR made 3 formal recommendations regarding biosafety and polio containment. Based on activity of the Biological Agent Containment Working Group, at the January 2020 meeting, Board members voted to endorse a U.S. National Authority for Containment of Poliovirus (NAC) policy related to biorisk management systems and risk assessment in U.S. Polio Essential Facilities. In addition, at the July 2020 meeting, the Board recommended to sunset the Biological Agent Containment workgroup and establish the Polio Containment workgroup. The Board continues to provide advice and guidance that further promotes and enhances strategic progress throughout the CPR Divisions and Offices. All applicable comments are presented to the respective CPR Office/Division or CDC Centers/Institutes/Offices (CIOs) and updates may be requested and reviewed by the BSC at an upcoming meeting. To date, the Board has held 31 meetings. In FY19 the Board made 3 recommendations based on findings from the Biological Agent Containment workgroup. The Board also has made recommendations on external peer reviews of OPHPR (now CPR) programs resulting in a total of 145 formal recommendations. Of the 145 recommendations, 10 were in reference to Strategic National Stockpile (SNS) 2020 Report and brought to a vote during the April 2-3, 2013, BSC Meeting. The 10 recommendations were accepted for action by OPHPR. The Board deliberated and provided 19 additional recommendations to OPHPR in January 2012 following an external review of OPHPR's Preparedness and Emergency Response Research Centers completed on August 9-12, 2011. In 2011, the Board approved a total of 58 recommendations in two separate meetings. On April 22, 2011, the Board approved 45 recommendations from the external peer review of OPHPR's Division of Emergency Operations conducted on January 26-28, 2010. On August 14-15, 2011, the Board approved 4 recommendations from the external peer review of OPHPR's Division of Strategic National Stockpile conducted on July 28-30, 2009; and 9 recommendations from the external peer review of OPHPR's CPR's Career Epidemiology Field Officer Program completed on June 29-July 1, 2011. An external peer review for OPHPR's Division of State and Local Readiness completed on September

15-17, 2009, resulted in 15 recommendations from the Board which were approved on April 27, 2010. On April 27, 2009, 14 recommendations were approved by the Board following the first external review of the OPHPR Fiscal Allocation Process program conducted on February 25-27, 2009. An additional 29 recommendations made during the August 13-14, 2009, Board meeting resulted from the external review of OPHPR's Division of Select Agents and Toxins.

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

56%

% of Recommendations Fully Implemented Comments

The 4 formal recommendations made in FY22 were fully implemented. CPR's programs continue to take actions to implement the remaining recommendations and will report progress to the Board as applicable.

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

39%

% of Recommendations Partially Implemented Comments

All recommendations have been considered. Formal and informal BSC recommendations that have not been implemented are a result of CPR's mission and scope, resource limitations, or other programmatic or policy issues that limit implementation.

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

Yes No Not Applicable

Agency Feedback Comments

Annual reporting by CPR programs to the Board on actions taken to implement recommendations and advice are part of the review process that is deliberated on and approved by the Board. Programs that undergo external review by the Board are expected to provide a formal response after the Board deliberates and makes its recommendations. Since the Board usually meets twice per year, there could be up to a six-month lag time between completion of a program review and deliberation by the Board.

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

Checked if Applies

- Reorganized Priorities
- Reallocated resources
- Issued new regulation
- Proposed legislation
- Approved grants or other payments
- Other

Action Comments

It is anticipated that recommendations will impact CPR priorities, resource allocation, and other strategic program decisions.

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

No

Grant Review Comments

Not applicable at this time.

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

Checked if Applies

- Contact DFO
- Online Agency Web Site
- Online Committee Web Site
- Online GSA FACA Web Site
- Publications
- Other

Access Comments

Contact DFO by email at OPHPR.BSC.Questions@cdc.gov.