#### 2006 Current Fiscal Year Report: Secretary's Council on Public Health

Preparedness Report Run Date:	04/20/2024 08:43:0	9 AM		
1. Department or Agency		2.	2. Fiscal Year	
Department of He Services	alth and Human	20	06	
3. Committee or Subcommittee			3b. GSA Committee No.	
Secretary's Counc Preparedness	cil on Public Health	11	11994	
4. Is this New Du	ring 5. Current 6.	Expected	7. Expected	
Fiscal Year?	Charter Re	enewal Date	Term Date	
No	10/22/2003 10	/22/2005	10/22/2005	
8a. Was Termina FiscalYear?	8b. Spe ted During Termin Author	ation	8c. Actual Term Date	
Yes	Departr Determ		11/22/2005	
9. Agency Recommendation FiscalYear	n for Next	gislation Terminate?	10b. Legislation Pending?	
Recommendation	n for Next	-	Legislation	
Recommendation FiscalYear Terminate	n for Next Req to	Terminate?	Legislation	
Recommendation FiscalYear Terminate	n for Next Req to No	Terminate?	Legislation	
Recommendation FiscalYear Terminate 11. Establishment 12. Specific Establishment	n for Next Req to No nt Authority Author 13. Effective Date	rized by Law 14. Commitee	Legislation Pending? 14c.	
Recommendation FiscalYear Terminate 11. Establishment 12. Specific Establishment Authority 42 USC 217a	n for Next Req to No nt Authority Author 13. Effective Date	Terminate? Tized by Law 14. Commitee Type Continuing	Legislation Pending? 14c. Presidential? No	
Recommendation FiscalYear Terminate 11. Establishment 12. Specific Establishment Authority 42 USC 217a	n for Next Req to No at Authority Author 13. Effective Date 11/17/1962	Terminate? Tized by Law 14. Commitee Type Continuing	Legislation Pending? 14c. Presidential? No	
Recommendation FiscalYear Terminate 11. Establishment 12. Specific Establishment Authority 42 USC 217a 15. Description of Advisory Board 16a. Total Number of Reports	n for Next Req to No at Authority Author 13. Effective Date 11/17/1962	Terminate? Tized by Law 14. Commitee Type Continuing	Legislation Pending? 14c. Presidential? No	
Recommendation FiscalYear Terminate 11. Establishment 12. Specific Establishment Authority 42 USC 217a 15. Description of Advisory Board 16a. Total Number of Reports	n for Next Req to No at Authority Author 13. Effective Date 11/17/1962 f Committee Scier No Reports for his FiscalYear	Terminate? Terminate? 14. Commitee Type Continuing	Legislation Pending? 14c. Presidential? No	

**Current Next** 

	FY	FY
18a(1). Personnel Pmts to	\$0.0	0\$0.00
Non-Federal Members	<i>+</i>	
18a(2). Personnel Pmts to	\$0.0	0\$0.00
Federal Members	φ0.0	οφο.οο
18a(3). Personnel Pmts to	\$0 በ	0\$0.00
Federal Staff	ψ0.0	οψ0.00
18a(4). Personnel Pmts to	ድር በ	0\$0.00
Non-Member Consultants	ψ0.0	οφ0.00
18b(1). Travel and Per Diem to	\$0.0	0\$0.00
Non-Federal Members	φ0.0	οφ0.00
18b(2). Travel and Per Diem to	\$0.0	0\$0.00
Federal Members	φ0.0	οφ0.00
18b(3). Travel and Per Diem to	\$0 በ	0\$0.00
Federal Staff	ψ0.0	οψ0.00
18b(4). Travel and Per Diem to	ድር በ	0\$0.00
Non-member Consultants	ψ0.0	οψ0.00
18c. Other(rents,user charges,	ድር በ	0\$0.00
graphics, printing, mail, etc.)	ψ0.0	οφ0.00
18d. Total	\$0.0	00\$0.00
19. Federal Staff Support Years	0.0	0.00
(FTE)	0.0	0.00

# 20a. How does the Committee accomplish its purpose?

The Council was composed of public health representatives and other appropriate constituents and provided advice to the Secretary, Department of Health and Human Services, on a continuting basis on matters relating to the appropriate actions to prepare for, and respond to, public health emergencies, including acts of bio-terrorism. The Council did not meet this fiscal year.

### 20b. How does the Committee balance its membership?

The 18 member Council, appointed by the Secretary, were selected from among the leading representatives from State and local public health agencies, other components of the public health community, academia, and other appropriate stakeholders with disciplines relevant to the activities of public health preparedness.

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

The Council did not meet during FY05.

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

The expertise and experience of members of the Council could not be obtained from DHHS staff or other established sources. The membership was constituted to meet the specific requirements of the mission of the Council and the Department.

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

#### 21. Remarks

The Secretary's Council on Public Health Preparedness did not meet in FY05 or the beginning of FY06 before it terminated on 11/22/05.

#### **Designated Federal Officer**

Judy Blumenthal Executive Director

Committee Members	Start	End	Occupation	Member Designation
Benjamin, Georges	08/01/2002	10/22/2005	Secretary, Department of Health and Mental Hygiene	Special Government Employee (SGE) Member

Cassell, Gail	08/01/2002	10/22/2005	Vice President, Infectious Disease Research	Special Government Employee (SGE) Member
Chin, James	08/01/2002	10/22/2005	Clinical Professor of Epidemiology	Special Government Employee (SGE) Member
Cigarroa, Francisco	08/01/2002	10/22/2005	President, University of Texas Health Sciences Center	Special Government Employee (SGE) Member
Conway-Welch, Colleen	08/01/2002	10/22/2005	Fellow, American Academy of Nursing	Special Government Employee (SGE) Member
Fisher, Donald	08/01/2002	10/22/2005	President and CEO	Special Government Employee (SGE) Member
Flaherty, Timothy	08/01/2002	10/22/2005	Chairman	Special Government Employee (SGE) Member
Gensheimer, Kathleen	08/01/2002	10/22/2005	Epidemiologist	Special Government Employee (SGE) Member
Gilchrist, Mary	08/01/2002	10/22/2005	Director, University Hygienic Laboratory	Special Government Employee (SGE) Member
Hamburg, Margaret	08/01/2002	10/22/2005	Vice President for Biological Programs	Special Government Employee (SGE) Member
Henderson, Donald	08/01/2002	10/22/2005	Professor, School of Hygiene and Public Health	Special Government Employee (SGE) Member
Maki, Dennis	08/01/2002	10/22/2005	Ovid O. Meyer Professor of Medicine	Special Government Employee (SGE) Member

Malson, Robert	08/01/2002	10/22/2005	President and Chief Executive Officer	Special Government Employee (SGE) Member
Milne, Thomas	08/01/2002	10/22/2005	Executive Director	Special Government Employee (SGE) Member
Murphy, Frederick	08/01/2002	10/22/2005	Professor Virology	Special Government Employee (SGE) Member
Roth, Paul	10/01/2003	10/22/2005	Dean, School of Medicine	Special Government Employee (SGE) Member
Sorenson, Andrew	08/01/2002	10/22/2005	President	Special Government Employee (SGE) Member
Stocker, Michael	10/01/2003	10/22/2005	Chief Executive Officer	Special Government Employee (SGE) Member

Number of Committee Members Listed: 18

#### Narrative Description

Pursuant to Section 319 of the Public Health Service Act, the Secretary , Department of Health and Human Services, (Secretary) determined that a public health emergency existed as a consequence of the terrorist attacks on September 11, 2001. The Secretary's Council on Public Health Preparedness (Council) advised the Secretary on appropriate actions to respond to this public health emergency and similar emergencies. The Council advised the Secretary regarding steps that the Department of Health and Human Services can take to (1) improve the public health and health care infrastructure to better enable Federal, State, and local goverments to respond to a public health emergency and, specifically a bio-terrorism event; (2) ensure that there are comprehensive contigency plans in place at the Federal, State, and local levels to respond to a public health emergency and, specifically, a bio-terrorism event; and (3) improve public health preparedness at the Federal, State, and local levels.

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

	Checked if	
	Applies	
Improvements to health or safety		
Trust in government		
Major policy changes		
Advance in scientific research		
Effective grant making		
Improved service delivery		
Increased customer satisfaction		
Implementation of laws or regulatory		
requirements		
Other	~	1

#### **Outcome Comments**

The council served as an invaluable resource in the ongoing effort to strengthen the nation's response to terrorist events. The mandate of the Council was to continue to focus on identifying initiatives, providing advice, and making recommendations to the Office of the Assistant Secretary for Public Health Preparedness in support of the Department's efforts to prepare for, protect against, and respond to acts of terrorism and other public health emergencies that affect the civilian population.

#### What are the cost savings associated with this committee?

None	$\checkmark$
Unable to Determine	
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

#### **Cost Savings Comments**

The Council advised the Secretary, DHHS, as stated in the narrative description above. These accomplishments can often take years to unfold into improved public health and safety, established governmental responses to various public health emergencies, and established comprehensive contingency plans in the event of a public health emergency.

# What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

0

Number of Recommendations Comments

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency? 0%

#### % of Recommendations Fully Implemented Comments

Section 9(b) of the Federal Advisory Committee Act states that unless otherwise specifically provided by statute or Presidential directive, advisory committees shall be utilized solely for advisory functions. Determinations of action to be taken and policy to be expressed with respect to matters upon which an advisory committee reports or makes recommendations shall be made solely by the President or an officer of the Federal Government. NIH does not currently track this information.

### What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency? 0%

#### % of Recommendations Partially Implemented Comments

Section 9(b) of the Federal Advisory Committee Act states that unless otherwise specifically provided by statute or Presidential directive, advisory committees shall be utilized solely for advisory functions. Determinations of action to be taken and policy to be expressed with respect to matters upon which an advisory committee reports or makes recommendations shall be made solely by the President or an officer of the Federal Government. NIH does not currently track this information.

#### Does the agency provide the committee with feedback regarding actions taken to

#### implement recommendations or advice offered?

Yes 🗹 No 🗌 Not Applicable 🗌

#### **Agency Feedback Comments**

Minutes, written reports, and oral presentations.

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

	Checked if Applies
Reorganized Priorities	$\checkmark$
Reallocated resources	$\checkmark$
Issued new regulation	
Proposed legislation	
Approved grants or other payments	
Other	

#### **Action Comments**

This committee did not meet in FY05.

### Is the Committee engaged in the review of applications for grants? No

### Grant Review Comments

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

	Checked if Applies
Contact DFO	$\checkmark$
Online Agency Web Site	$\checkmark$
Online Committee Web Site	
Online GSA FACA Web Site	<b>Ý</b>
Publications	
Other	

#### **Access Comments**

This committee did not meet in FY05.