

Centers for Disease Control and Prevention (CDC) Atlanta GA 30329-4027

C H A R T E R of the BOARD OF SCIENTIFIC COUNSELORS INFECTIOUS DISEASES (Formerly

Board of Scientific Counselors, Deputy Director for Infectious Diseases)

Committee's Official Designation (Title).

Board of Scientific Counselors Infectious Diseases.

Authority.

The Board of Scientific Counselors, Infectious Diseases (BSC ID), was established under Section 222 of the Public Health Service Act [42 U.S.C. §217a], as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, Public Law 92-463, [5 U.S.C. §§1001-1014], as amended.

Objective and Scope of Activities.

The Secretary, Department of Health and Human Services (HHS) is authorized under Section 301 [42 U.S.C. §241] and Section 311 [42 U.S.C. §243] of the Public Health Service Act, as amended, to: (1) conduct, encourage, cooperate with, and assist other appropriate public authorities, scientific institutions, and scientists in the conduct of research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases, and other impairments; (2) assist States and their political subdivisions in the prevention of infectious diseases and other preventable conditions, and in promoting health and well-being; and (3) train State and local personnel in public health work.

The BSC ID shall advise the Secretary, HHS; the Director, Centers for Disease Control and Prevention (CDC); and the Directors of the National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), the National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), the National Center for Immunization and Respiratory Diseases (NCIRD), and the Global Health Center (GHC), CDC.

Description of Duties.

The Board provides advice concerning strategies, goals, and priorities for the programs and research within the national centers and will monitor the overall strategic direction and focus of CDC's infectious disease programs and centers. The Board may administer and oversee peer review of scientific programs related to infectious diseases. The Board may also 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 centers relating to infectious diseases.

Agency or Official to Whom the Board Reports.

The Board provides advice to the Secretary, HHS; the Director, CDC; and the Directors of NCEZID, NCHHSTP, NCIRD, and GHC, CDC.

Support.

Management and support services shall be provided by NCEZID, 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 \$65,013. Estimate of annual person-years of staff support required is 1.85 at an estimated annual cost of \$248,304.

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 Board 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 the Board and subcommittee meetings, adjourn any meeting when the DFO deems 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 committee and subcommittees. If the DFO cannot fulfill the assigned duties of the committee, 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 three times per 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 its expiration, the BSC ID will terminate two years from the date this charter is filed.

Membership and Designation.

The BSC ID shall consist of up to 17 members, including the Chair, and may include Federal employees. Of the 17 members, federal members may be deemed Regular Government Employees. Members other than Federal employees shall be deemed Special Government Employees (SGEs). Members and the Chair shall be appointed by the Secretary, HHS, or designee, from authorities knowledgeable in the fields relevant to the issues addressed by the 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.

The Board shall also consist of three non-voting ex officio members: one representative each from the HHS Office of Infectious Disease and HIV/AIDS Policy, the Food and Drug Administration, the National Institutes of Health, and such additional officials of the United States Government as the Secretary, HHS, deems necessary for the Board to effectively carry out its functions.

In addition, the Board shall consist of six non-voting liaison representatives: one representative from the Public Health Agency of Canada; one representative from the Secretariat of Health of Mexico; the Chair (or designee) of the Healthcare Infection Control Practices Advisory Committee; the Chair (or designee) of the Advisory Committee on Immunization Practices; the Chair (or designee) of the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment; the Chair (or designee) of the Advisory Council for the Elimination of Tuberculosis; and such other liaison representatives as the Secretary, HHS, deems necessary for the Board to effectively carry out its mission. 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 the approval of the Secretary, HHS, or his/her designee. The subcommittees must report back to the parent committee and do 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.

Recordkeeping.

The records of the Board, established subcommittees, or other subgroups 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.	
October 31, 2023	
APPROVED:	
	Kalwant Smagh -S Digitally signed by Kalwant Smagh -S Date: 2023.10.30 11:49:33 -04'00'
Date	Director
	Office of Strategic Business Initiatives