# Overview of Federal Advisory Committees and CDC's Board of Scientific Counselors, Deputy Director for Infectious Diseases (BSC, DDID)

## **Federal Advisory Committees and FACA**

- A federal advisory committee is defined as any committee, board, commission, council, conference, panel, task force, or other similar group, or any subcommittee or other subgroup that is not composed solely of full-time officers or employees of the federal government.
- Federal advisory committees can be established by statute, by the President, or by one or more federal agencies to advise or make recommendations on matters relating to the programs, responsibilities, or activities of a department or agency.
- Although federal advisory committees have been used since early in the nation's history and have been legislated since 1842, Congress formally recognized the merits of seeking the advice and assistance of U.S. citizens in the federal government's decision-making process in 1972 through the Federal Advisory Committee Act (FACA; Public Law 92-463).
  - The purpose of FACA was to ensure that advice rendered to the executive branch by the various advisory committees, task forces, boards, and commissions formed over the years by Congress and the President be both objective and accessible to the public.
  - The Act also formalized a process for establishing, operating, overseeing, and terminating these advisory bodies.

# CDC's Board of Scientific Counselors, Deputy Director for Infectious Diseases

- The Board of Scientific Counselors (BSC), Deputy Director for Infectious Diseases (DDID), is one of CDC's 19 federal advisory committees, which work to achieve stakeholder and public engagement in CDC's efforts and commitment to improve people's health.
- As outlined in its current charter, the BSC, DDID advises the Secretary, Department of Health and Human Services; the Director, CDC; the CDC DDID; and the Directors of CDC's three infectious disease national centers (NCEZID, NCHHSTP, and NCIRD\*) concerning strategies, goals, and priorities for the programs and research within the national centers and monitors the overall strategic direction and focus of DDID and the national centers.
- The board comprises 17 non-government voting members (designated special government employees, or SGEs) with expertise across a broad range of infectious diseases and related issues. The board also includes important non-voting members. These include 4 ex officio members from other federal agencies (HHS Office of the Assistant Secretary for Preparedness and Response, National Vaccine Program, Food and Drug Administration, and National Institutes of Health), along with 7 liaison representatives from other CDC advisory committees with infectious disease responsibilities (the chair or other designee from ACET, ACIP, CHAC, CLIAC, and HICPAC\*), the Public Health Agency of Canada, and the Secretariat of Health of Mexico. In addition to their participatory roles at BSC, DDID meetings, ex officio members and liaison representatives also help communicate issues from and back to their respective organizations/parent committees. Ex officio and liaison representatives are selected and remain on the BSC, DDID at the discretion of their organizations/parent committees.
- BSC, DDID meetings are typically held twice per year, with teleconferences scheduled between meetings as needed. Meetings are 1–2 days in duration, and are open to the public. Meeting dates are posted on the <u>CDC BSC</u>, <u>DDID website</u>; meetings are also announced in the *Federal Register* at least 15 calendar days before each meeting. BSC members must declare any conflicts of interest for the topics under discussion and must recuse themselves from participation if conflicts are present.

November 2021

- The BSC, DDID has four established non-federal advisory workgroups: the Food Safety Modernization Act (FSMA) Surveillance Working Group; the Infectious Disease Laboratory Working Group; the Acute Flaccid Myelitis (AFM) Task Force, and the Vaccine Confidence Work Group. Unlike federal advisory boards, workgroups do not hold public meetings. Data and other information presented during workgroup meetings are considered proprietary. Workgroup members should also declare any conflicts of interest, and conflicts should be recorded; however, workgroup members may participate in discussions despite potential conflicts.
  - Any findings and observations made by workgroups are presented for consideration and approval to the full BSC, DDID. If approved, they are submitted to the CDC Deputy Director for Infectious Diseases and other CDC leaders.

## Management of the BSC, DDID

The Designated Federal Official (DFO) for an advisory committee (also referred to as the Executive Secretary) is a permanent federal employee who is responsible for the committee's overall management. Logistic, operational, and administrative components of an advisory committee are handled by the Committee Management Specialist(s). For the BSC, DDID, the following individuals serve in these positions:

## **Designated Federal Official**

Hilary Eiring, MPH Senior Advisor for Policy and Communications, Deputy Director for Infectious Diseases Tel: 770-488-3901 <u>HEiring@cdc.gov</u>

## **Committee Management Specialists**

Kim Distel, MS, MLIS (operations and logistics) Writer-Editor, Deputy Director for Infectious Diseases Tel: 404-639-4768 KDistel@cdc.gov

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#### \*Abbreviations:

ACET: Advisory Council for the Elimination of Tuberculosis
ACIP: Advisory Committee on Immunization Practices
CHAC: CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment
CLIAC: Clinical Laboratory Improvement Advisory Committee
HICPAC: Healthcare Infection Control Practices Advisory Committee
NCEZID: National Center for Emerging and Zoonotic Infectious Diseases
NCHHSTP: National Center for HIV, Viral Hepatitis, STD, and TB Prevention
NCIRD: National Center for Immunization and Respiratory Diseases