



CHARTER

BOARD OF SCIENTIFIC COUNSELORS NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL

Advisory Committee's Official Designation.

Board of Scientific Counselors, National Center for Injury Prevention and Control (BSC, NCIPC or Board)

Authority.

The BSC, NCIPC was established under Section 394(a) of the Public Health Service Act, [42 U.S.C. §280b-2(a)], as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, Public Law 92-463, (5 U.S.C. § 1001 et seq.), as amended.

Objective and Scope of Activities.

The BSC, NCIPC will: (1) conduct, encourage, cooperate with, and assist other appropriate public health authorities, scientific institutions, and scientists in the conduct of research, investigations, experiments, demonstrations, and studies relating to the causes and strategies related to the prevention of injury, overdose and violence; (2) assist States and other entities in preventing intentional and unintentional injuries, and to promote health and well-being; and (3) make recommendations of grants and cooperative agreements for research and prevention activities related to injury, overdose, and violence.

The Board shall advise and make recommendations to the Secretary, Department of Health and Human Services (HHS); the Director, Centers for Disease Control and Prevention (CDC); and the Director, NCIPC, CDC regarding surveillance, basic epidemiologic research, intervention research, and the implementation, dissemination, and evaluation of promising and evidence-based strategies for the prevention of injury, overdose, and violence.

Description of Duties.

The Board makes recommendations regarding policies, strategies, objectives, and priorities, and reviews progress toward injury, overdose, and violence prevention. The Board provides advice on the appropriate balance of intramural and extramural research, and guidance on the needs, structure, progress and performance of intramural programs. The Board shall provide regular updates and feedback on research priorities related to injury, overdose, and violence prevention.

The Board also provides guidance on extramural scientific program matters. The Board provides second-level scientific and programmatic peer review for applications for research grants, cooperative agreements, and training grants related to injury, overdose, and violence prevention, and recommends approval of projects that merit further consideration for funding support. The Board also provides feedback and input on strategic plans, resources, and priority publications related to injury, overdose, and violence prevention.

Agency or Federal Officer Receiving the Advisory Committee's Advice/Recommendations.

The BSC, NCIPC shall provide advice and make recommendations on the prevention of injury, overdose, and violence to the Secretary, HHS, the Director, CDC, and the Director, NCIPC, CDC.

Support.

Management and support services shall be provided by the Office of the Director, NCIPC, CDC.

Estimated Annual Operating Costs and Staff Years.

The estimated annual cost for operating the Board, including compensation and travel expenses but excluding staff support is \$90,664. The estimate of annual person-years of staff support required is .90 at an estimated annual cost of \$169,833.

Designated Federal Officer.

The CDC Director will select a full-time or permanent part-time federal employee to serve as the Designated Federal Officer (DFO) for the Board and its subcommittees, and the DFO must:

- A. Ensure the Board activities comply with FACA, the FACA Final Rule, agency administrative procedures, and any other applicable laws and regulations;
- B. Approve or call all meetings of the Board or its subcommittee;
- C. Approve the agenda;
- D. Attend all Board and subcommittee meetings for their duration;
- E. Fulfill the requirements under § 10(b) of FACA [5 U.S.C. § 1009(b)], as amended;
- F. Adjourn any meeting when the DFO determines it to be in the public interest;

- G. Chair any meeting when so directed by the agency head;
- H. Maintain information on the Board's activities and provide such information to the public, as applicable;
- I. Ensure the Board members and subcommittee members, as applicable, receive the appropriate training (e.g., FACA overview, ethics training) for efficient operation and compliance with FACA and the FACA Final Rule; and
- J. Ensure a public-facing website is created and maintained for the Board pursuant to 41 CFR § 102-3.120(b).

If the DFO cannot fulfill the assigned duties, 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 up to six 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 FACA, [5 U.S.C. § 1009(d)], as amended. Notice of all meetings shall be given to the public.

Duration.

Continuing.

Termination.

Unless renewed by appropriate action prior to its expiration, the charter for the BSC, NCIPC will expire two years from the date this charter is filed.

Membership and Designation.

The Board shall consist of up to 18 members, which includes two (2) Co-chairs. These members shall be deemed Special Government Employees. Members shall be appointed by the Secretary, HHS, or his/her designee, from authorities knowledgeable in the pertinent disciplines involved in injury, overdose, and violence prevention, including, but not limited to, epidemiologists, statisticians, health professionals, rehabilitation medicine specialists, behavioral scientists, health economists, program evaluation specialists, political science, law, criminology and specialists in various aspects of injury management.

The Board shall also consist of 12 non-voting ex officio members: the Administration for Children and Families; the Administration for Community Living; the National Institute for Occupational Safety and Health, CDC; the National Center for Health Statistics, CDC; the Food and Drug Administration; the Health Resources and Services Administration; the Indian Health Service; the National Institute on Drug Abuse, National Institutes of Health (NIH); the National Institute on Aging, NIH; the National Institute of Child Health and Human Development, NIH; and the National Institute of Mental Health, NIH; the Substance Abuse and Mental Health

Services Administration and such others as the Secretary deems necessary to carry out the functions of the Board.

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 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, as well as established subcommittees 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.

January 13, 2026

Approved:

Date

Director
Office of Strategic Business Initiatives