

CHARTER

**NATIONAL TASK FORCE ON FETAL ALCOHOL SYNDROME
AND FETAL ALCOHOL EFFECT**

Purpose

The Secretary is mandated under Section 399H of the Public Health Service Act, (42 U.S.C. Section 280f), as amended by Public Law 105-392)), to establish a National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect: (1) to foster coordination among all governmental agencies, academic bodies, and community groups that conduct or support fetal alcohol syndrome and fetal alcohol effect research, programs, and surveillance; and (2) to otherwise meet the general needs of populations actually or potentially impacted by fetal alcohol syndrome and fetal alcohol effect.

Authority

Section 399H of the Public Health Service Act, (42 U.S.C. 280f), as amended. The task force is governed by provision of Public Law 92-463, as amended (5 U.S.C. App.2), which sets forth standards for the formation and use of advisory committees.

Function

The National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect shall (a) advise Federal, state, and local programs and research concerning fetal alcohol syndrome (FAS) and fetal alcohol effect (FAE), including programs and research concerning education and public awareness for relevant service providers, school-age children, women at risk, and the general public, medical diagnosis, interventions for women at risk of giving birth to children with FAS and FAE, and beneficial services for individuals with FAS and FAE and their families; (b) coordinate its efforts with the Interagency Coordinating Committee on Fetal Alcohol Syndrome of the Department of Health and Human Services; and (c) report, on a biennial basis, to the Secretary and relevant committees of Congress on the current and planned activities of the participating agencies.

Structure

The task force shall consist of 13 members including the Chair. The Chairperson of the Interagency Coordinating Committee on Fetal Alcohol Syndrome of the Department of Health and Human Services shall be a standing member. Members and the Chair shall be selected by the Secretary or designee, from authorities knowledgeable in the field of FAS and FAE and shall include individuals with FAS and FAE or parents or legal guardians of individuals with FAS and FAE, and representatives from advocacy and research organizations such as the Research Society on Alcoholism, the FAS Family Resource Institute, the National Organization of Fetal Alcohol Syndrome, The Arc of the United States, the academic community, and Federal, state and local government agencies and offices. The task force shall include seven liaison representatives from the following organizations: American Academy of Pediatrics; American Academy of Family Physicians; American College of Obstetrics and Gynecology; March of Dimes; National Organization on Fetal Alcohol Syndrome; The Arc of the United States; and the Center for Science in the Public Interest.

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. Terms of more than two years are contingent upon the renewal of the task force by appropriate action prior to its termination. A member may serve 180 days after the expiration of that member's term if a successor has not taken office.

Subcommittees may be established from time to time. 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.

Management and support services shall be provided by the Division of Birth Defects and Developmental Disabilities, National Center on Birth Defects and Developmental Disabilities, CDC.

Meetings

Meetings shall be held approximately two times per year at the call of the Chair with the advance approval of a government official, who shall also approve the agenda. A government official shall be present at all meetings.

Meetings shall be open to the public except as determined otherwise by the Secretary or other official to whom the authority has been delegated; notice of all meetings shall be given to the public.

Meetings shall be conducted, and records of the proceedings kept, as required by applicable laws and Departmental regulations.

Compensation

Members who are not full-time Federal employees shall be paid at the rate of \$250 per day, or at the rate of \$31.25 per hour, as determined by the agency, not to exceed \$250 per day; plus per diem and travel expenses in accordance with Standard Government Travel Regulations.

Annual Cost Estimate

Estimated annual cost for operating the task force, including compensation and travel expenses for members but excluding staff support, is \$102,778. Estimate of annual person-years of staff support required is 1.0, at an estimated annual cost of \$80,828.

Reports

The task force will report, on a biennial basis, to the Secretary and relevant committees of Congress on the current and planned activities of the participating agencies.

In the event a portion of a meeting is closed to the public, as determined by the Secretary of HHS, in accordance with the Government in the Sunshine Act (5 U.S.C. 552b(c)) and the Federal Advisory Committee Act, a report shall be prepared which shall contain, as a minimum, a list of members and their business addresses, the task force activities, and recommendations made during the fiscal year. A copy of the report shall be provided to the Department Committee Management Office.

Termination Date

Unless renewed by appropriate action prior to its expiration, the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect will terminate on May 17, 2008.

Approved:

04/26/06

Date

Alvin Hall, M.S.

Director

Management Analysis and Services Office