



NCIPC Board of Scientific Counselors

Summary
Closed Session
July 16, 2015

National Center for Injury Prevention and Control
Centers for Disease Control and Prevention
Atlanta, Georgia



Table of Contents

Information Session: Office of Personnel Management Breach.....3

Opening / Call to Order / Roll Call5

Charge for the Secondary Review.....6

Secondary Review Discussion and Process

CE15-003: Evaluating Structural, Economic, Environmental, or Policy Primary Prevention

CE15-005: Research to Evaluate the CDC Heads Up Concussion Initiative in Youth Sports

CE15-004 - Evaluating Innovative and Promising Strategies to Prevent Suicide among Middle-Aged Men

SBIR Applications Submitted to PA-14-071: “PHS 2014-02 Omnibus Solicitation of the NIH, CDC, FDA and ACF for Small Business Innovation Research Grant Applications (Parent SBIR [R43/R44])”

Closing Comments / Adjourn.....6

Certification.....8

Attachment A: Meeting Attendance.....9

Attachment B: Acronyms Used in this Document..... 11

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)
NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL (NCIPC)**

BOARD OF SCIENTIFIC COUNSELORS

Sixteenth Meeting: July 15-16, 2015
Chamblee Campus, Building 106, Conference Room 1B
Atlanta, GA 30341

Summary Proceedings

The sixteenth meeting of the National Center for Injury Prevention and Control (NCIPC) Board of Scientific Counselors (BSC) took place on Wednesday, July 15, 2015. The BSC met in closed session for secondary review, in accordance with the Privacy Act and the Federal Advisory Committee Act (FACA), on Thursday, July 16, 2015. Dr. Arlene Greenspan served as chair.

Thursday, July 16, 2015: CLOSED TO THE PUBLIC

Information Session: Office of Personnel Management Breach

Daniel Cameron
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention

Mr. Daniel Cameron explained two recent US government hacking incidents. The first incident was discovered by the Office of Personnel Management (OPM) in April 2015 and involved 4.2 million personnel records. Individuals were notified if they were impacted by the breach beginning in June 2015. The information that was obtained in that incident would include:

Name
Social Security Number (SSN),
Date and place of birth
Current and former addresses

To mitigate potentially negative outcomes from the breach, OPM hired a non-governmental group, CSID, to provide identity theft and fraud protection to all impacted individuals for 18 months. The protection includes credit report monitoring as well as full-service identity restoration. BSC members may have received an email indicating that they were affected. The communication includes a Personal Identification Number (PIN) to access the CSID site to create an account. The protection is extended to all affected persons, even if they do not sign up on the site, although individuals can choose to expand their protection by signing up on the site.

The second incident was discovered in May 2015. It involved records associated with background investigation checks from as early as 2000 and affects approximately 21.5 million people, 1.8 million of whom are non-applicants to government entities. Because of its seriousness, those affected by this hack will be protected for three years. OPM is exploring how to provide protection for all federal employees.

The first incident is serious, but not as serious as the second, because less information was hacked and fewer people were affected. The second incident may affect not only family members of government applicants and employees, but also individuals who were listed as references. SSNs would not be associated with those individuals, and they will not receive protection.

Discussion

Dr. Angela Mickalide asked if family members of those affected can receive services.

Mr. Cameron replied that they can. The most current information is available on the OPM Online Incident Resource Center website, and there will be a call center as well.

Dr. Mickalide asked whether spousal SSNs are included on the BSC members' financial disclosure forms.

Mr. Cameron replied that those SSNs are provided, so spouses will receive protection.

Dr. Stephen Hargarten could not recall whether he had received an email, but he did receive a letter in the mail. He asked whether he was covered for both incidents.

Mr. Cameron answered that the first incident is being managed by CSID, but a company has not yet been identified to manage the second incident.

Dr. Mickalide called the provided telephone number, which was a recording that directed her to the website.

Dr. John Allegrante asked about receiving further advice about the incidents or additional coverage. Protection for only three years is somewhat concerning.

Dr. Sherry Hamby understood that federal employees are asking for protection for longer than three years. It would be easy for the hackers to wait until the three years are over, and then begin using the stolen information.

Mr. Cameron was not sure about additional measures, but he indicated that OPM has been communicating updates frequently about the issue.

Dr. Hargarten asked how hackers might use the records and what individuals who have been affected should look for. He wondered whether individuals should call their credit card companies to inform them of their involvement in the breach.

Mr. Cameron replied that it is a good idea to routinely check one's credit cards to ensure that no fraud has been committed. CSID offers credit card number monitoring.

Dr. Mickalide asked for additional information about the security of the CSID site.

Mr. Cameron said that it is not required to provide credit card or any additional information to CSID, or to sign up specifically with the company. Individuals involved in the first incident are automatically protected.

Dr. Hargarten asked whether individuals affected by the second incident will also be protected automatically.

Mr. Cameron did not have information regarding how OPM will address the second breach. It is five times larger than the first event, and it has not been announced what entity will manage the response.

Dr. Maria Testa signed up with CSID and received an insurance certificate.

Mr. Cameron did not receive a certificate, but he did receive notice that he had signed up with the company.

Opening/ Call to Order / Roll Call

Arlene Greenspan, DrPH, MPH, PT
Associate Director for Science
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention

Dr. Arlene Greenspan began the secondary review process, explaining that the purpose of this portion of the BSC meeting was to perform a secondary review of applications received in response to the NCIPC Funding Opportunity Announcements (FOA) that were recommended for further consideration after the initial NCIPC Peer Review Panel.

Secondary review consists of the review and discussion of the programmatic merits of the application. It is not another peer review for scientific and technical merit. This work has already been performed by the NCIPC Peer Review Panel. Generally, the results of the peer review panel are accepted, unless the secondary review committee recommends a different funding priority based on shifting priorities, such as new, innovative work or work that fills important gaps in the field of injury prevention and control as stipulated in the FOA.

Dr. Greenspan indicated that the voting members of the BSC would vote with the assistance, guidance, and advice provided by the BSC federal liaisons. Budget and other considerations also could be discussed and recommended to the NCIPC Director. She indicated that following the secondary review, the results of the vote would be compiled and forwarded to the director of NCIPC for final decisions. The NCIPC staff familiar with the FOA could offer guidance when requested by BSC members. Procurements and Grants Office (PGO) staff were also available also answer questions and provide guidance as needed during the meeting.

Mrs. Tonia Lindley conducted the roll call of BSC members and established that a quorum was present. A list of meeting attendees is appended to this document as Attachment A.

Charge for the Secondary Review

Capt. (USPHS) Mildred Williams-Johnson, PhD, DABT
Director, Extramural Research Program Office
National Center of Injury Prevention and Control
Centers for Disease Control and Prevention

Dr. Mildred Williams-Johnson indicated that in accordance with CDC Peer Review Policy from the Office of the Associate Director for Science (ADS), all extramural research applications submitted to CDC are required to undergo external peer review by a federal advisory committee, except in justified emergency situations. This policy applies to all external research funded by grants or cooperative agreements and includes institutional awards to centers that support centralized resources and facilities or to mixed programs, such as practice-based program activities as well as research.

At CDC, extramural research applications typically undergo a sequential, two-level peer review process. Primary review is conducted by a panel of experts appointed by the CDC Director. This Special Emphasis Panel (SEP) is convened to evaluate the scientific and technical merit of the research applications that have been determined to be responsive to the FOA and eligible for consideration. Secondary review, such as this meeting, involves a separate panel under FACA or a Senior Advisory Panel. The purpose of these committees is to recommend funding for applications to the NCIPC Director.

This meeting focused on the following four FOAs:

CE15-003, Evaluating Structural, Economic, Environmental, or Policy Primary Prevention Strategies for Intimate Partner Violence and Sexual Violence

CE15-004, Evaluating Innovative and Promising Strategies to Prevent Suicide Among Middle-Aged Men

CE15-005, Research to Evaluate the CDC Heads Up Initiative in Youth Sports

PA-14-071 Omnibus Solicitation of the NIH, CDC, FDA, and ACF for Small Business Innovation Research (SBIR) Grant Applications

Upon establishing a quorum, the meeting was closed to the public in order to compete the discussions and process for the secondary review. Following the discussion and voting, the meeting was adjourned after closing comments.

Closing Comments / Adjourn

Capt. (USPHS) Mildred Williams-Johnson, PhD, DABT
Director, Extramural Research Program Office
National Center of Injury Prevention and Control
Centers for Disease Control and Prevention

Dr. Williams-Johnson thanked the BSC for their significant comments. She said she looked forward to further dialogue with respect to some of the points that were raised regarding how the scores are reflected, and whether there might be consideration of other alternatives. The number of applications drives the size of the initial scientific review panel. When there is wide scoring disparity among the panel, those points of view are incorporated into the summary

statement as minority reports. The reports indicate that there was a disparate view of the science on the panel, and they are considered as part of the funding recommendations that are presented to the BSC. Two FOAs were pulled from the list to be reviewed by the BSC because there were too many conflicts of interest among the BSC. The Secondary Review for these FOAs was conducted by a Senior Advisory Panel in accordance with CDC Peer Review Policy. Conflicts of interest are serious, and it is important to manage them carefully so that all applicants have a fair hearing, and so that the reviews and recommendations are as objective and fair as possible.

Discussion

Ms. Castillo recalled past reviews of applications that included BSC members. She suggested that these issues and conflicts could be flagged early in the process.

Dr. Hargarten commented on the difference between the interpretation of appearance of conflict of interest versus true conflict of interest, which is more quantitatively driven. He said he hoped that they could continue to have discussions to clarify these issues. Regarding the standard deviation question in scoring, if there is wide disparity among the peer review panel, then additional comments may be made to sort out the disparity versus an alignment of the reviewers. Applications with disparate scores should be considered more carefully than those that are more aligned.

Dr. Williams-Johnson thanked the BSC again, emphasized that their points would be taken under advisement, and said she looked forward to working with them in the future.

Dr. Greenspan thanked the members for their thoughtful comments and officially adjourned the sixteenth meeting of the NCIPC BSC.

CERTIFICATION

I hereby certify that to the best of my knowledge, the foregoing minutes of the July 16, 2015 NCIPC BSC meeting are accurate and complete:

09/10/2015

Date



Arlene Greenspan, DrPH, MPH, PT
Chair, NCIPC BSC

Attachment A: Meeting Attendance**BSC Members****John P. Allegrante, PhD**

Deputy Provost
Teachers College
Columbia University

Samuel Forjough, MD, MPH, DrPH, FGCP

Department of Family and Community Medicine
Texas A&M Health Science Center College of Medicine

Sherry Lynne Hamby, PhD

Department of Psychology
Sewanee, The University of the South

Stephen Hargarten, MD, PhD

Professor and Chair
Department of Emergency Medicine
Medical College of Wisconsin

Robert L. Johnson, MD

Dean
University of Medicine and Dentistry
New Jersey Medical School

Angela D. Mickalide, PhD, MCHES

Executive Director
Emergency Medical Services for Children's National Resource Center
Children's National Medical Center

Sherry D. Molock, PhD

Associate Professor
Department of Psychology
The George Washington University

Christina A. Porucznik, PhD, MSPH

Assistant Professor
Department of Family and Preventive Medicine
University of Utah

Maria Testa, PhD

Senior Research Scientist
Research Institute on Addictions
University at Buffalo

Shelly D. Timmons, MD, PhD, FACS

Director of Neurotrauma
Department of Neurosurgery
Geisinger Medical Center

Ex-Officio's**Dawn Castillo, MPH**

Director
Division of Safety Research
National Institute for Occupational Safety and Health

Elizabeth A. Edgerton, MD, MPH

Branch Chief
EMSC and Injury Prevention
Maternal and Child Health Bureau
Health Resources and Services Administration

Thomas E. Feucht, PhD

Executive Senior Science Advisor
National Institute of Justice

Lyndon Joseph, PhD

Health Scientist Administrator
Division of Geriatrics and Clinical Gerontology
National Institute on Aging

CDC Staff

Daniel Cameron
Gwendolyn Cattledge, Ph.D., M.S.E.H.
Patrice Davis-Duncan, M.P.H.
Corrine Ferdon, Ph.D.
Arlene Greenspan, Dr.P.H., M.P.H.
Tamara Haegerich, Ph.D.
Dan Holcomb, B.S.
M. Chris Langub, Ph.D.
Tonia Lindley
Sue Neurath, P.h.D.
Tom Simon, Ph.D.
David Sleet, Ph.D.
Paul Smutz, Ph.D.
Jane Suen, Dr.Ph., M.S.
Mildred Williams-Johnson, Ph.D., D.A.B.T.

Other

Stephanie Wallace, Cambridge Communications
Jim Evans, Sound on Site

Attachment B: Acronyms Used in this Document

Acronym	Expansion
ADS	Associate Director for Science
BSC	Board of Scientific Counselors
CA	Cooperative Agreement
CDC	Centers for Disease Control and Prevention
COI	Conflict of Interest
DUIP	Division of Unintentional Injury Prevention
DVP	Division of Violence Prevention
ERPO	Extramural Research Program Office
FACA	Federal Advisory Committee Act
FOA	Funding Opportunity Announcement
FY	Fiscal Year
HHS	(United States Department of) Health and Human Services
IPV	Intimate Partner Violence
NCIPC	National Center for Injury Prevention and Control
NICHHD	National Institute of Child Health and Human Development
NIH	National Institutes of Health
NIOSH	National Institute for Occupational Safety and Health
OPM	Office of Personnel Management
PGO	Procurement and Grants Office
PI	Principal Investigator
PIN	Personal Identification Number
SBIR	Small Business Innovation Research
SEP	Special Emphasis Panel
SPO	Scientific Program Officer
SRO	Scientific Review Officer
SSN	Social Security Number
SV	Sexual Violence
TBI	Traumatic Brain Injury