U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

C H A R T E R

ADVISORY COMMITTEE ON CHILDHOOD LEAD POISONING PREVENTION

Authority

42 U.S.C §217a [Section 222 of the Public Health Service Act, as amended]. The committee is governed by the provisions of Public Law 92-463, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees.

Objective and Scope of Activities

Section 301 of the Public Health Service Act (42 U.S.C. §241) provides that the Secretary shall render assistance to public authorities in the diagnosis, treatment, control and prevention of physical and mental diseases and impairments of persons. In doing so, the Secretary is authorized to make available information as to the practical application of research and is authorized to obtain the assistance and advice of experts and consultants. Section 311 of the Public Health Serve Act (42 U.S.C. §243) authorizes the Secretary to assist and advise State and local authorities in matters relating to the preservation and improvement of the public's health.

Description of Duties

The Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP) shall provide advice and guidance to the Secretary, Department of Health and Human Services (HHS); the Assistant Secretary for Health; and the Director, Centers for Disease Control and Prevention (CDC), regarding new scientific knowledge and technological developments and their practical implications for childhood lead poisoning prevention efforts. The committee shall also review and report regularly on childhood lead poisoning prevention practices and recommend improvements in national childhood lead poisoning prevention efforts.

Agency or Official to Whom the Committee Reports

The committee shall provide advice and guidance to the Secretary, HHS; the Assistant Secretary for Health; and to the Director, CDC.

Support

Management and support services shall be provided by the Office of the Director, National Center for Environmental Health/Agency for Toxic Substances and Disease Registry, CDC.

Estimated Annual Operating Costs and Staff Years

Estimated annual cost for operating the committee, including compensation and travel expenses for members, but excluding staff support, is $120,282. Estimate of annual person-years of staff support required is 1.0, at an estimated annual cost of $76,577.

Designated Federal Officer

CDC will select a fulltime or permanent part-time Federal employee to serve as the Designated Federal Official (DFO) to attend each 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 of the committee and subcommittee meetings, adjourn any meeting when the DFO determines adjournment to be in the public interest, and chair meetings when directed to do so by the official to whom the committee reports. The DFO or his/her designee shall be present at all meetings of the full committee and subcommittees.

Estimated Number and Frequency of Meetings

Meetings shall be held approximately two 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 ACCLPP will terminate 2 years from the date the charter is filed.

Membership and Designation

The Committee shall consist of 13 members, including the Chair. Members shall be selected by the Secretary from authorities knowledgeable in the fields of pediatric lead screening, diagnosis, and medical management; laboratory issues; environmental lead hazard detection and reduction; preventive medicine; epidemiology; and public health. At least one member shall be a parent or legal guardian of individuals affected by lead poisoning. Members shall be deemed Special Government Employees.

The committee shall also consist of nonvoting federal representatives from the Department of Housing and Urban Development; the Environmental Protection Agency; the National Institute of Environmental Health Sciences, National Institutes of Health; the Consumer Product Safety Commission; the Agency for Toxic Substances and Disease Registry; the National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention; the Food and Drug Administration; the Maternal and Child Health Bureau, Health Resources and Services Administration; the Centers for Medicare and Medicaid Services; the Department of State; and such additional officials of the United States Government as the Secretary deems necessary for the committee to carry out its function.

The committee shall also include nonvoting liaison representatives from the American Academy of Pediatrics, the American Public Health Association, the Association of State and Territorial Health Officials, the Council of State and Territorial Epidemiologists, the Association of State and Territorial Public Health Laboratory Directors, the American Association of Health Plans, the American Association of Poison Control Centers, the American Industrial Hygiene Association, the Coalition to End Childhood Lead Poisoning, the National Center for Healthy Housing, the American Academy of Nurse Practitioners, and other nonvoting liaison representatives from organizations with interest in childhood lead poisoning prevention as the Secretary deems necessary to effectively carry out the function of the committee. Liaison members 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. Terms of more than two years are contingent upon the renewal of the committee 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

Subcommittees composed of members and nonmembers of the parent committee may be established with 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.

Record Keeping

The records of the committee and established subcommittees of the committee shall be managed in accordance with General Records Schedule 26, Item 2 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, 2011

Approved:

10/17/11
Date

Director
Management Analysis and Services Office