

Public Meeting Summary

Friday, January 10, 2014

Thomas P. O'Neill, Jr. Federal Building
200 C Street, SW, Washington DC 20024

2:00pm – 3:00pm ET

1-888-324-7507, International Line: 1-517-308-9345, Passcode: 9927878

NBSB Voting Members Present

John Parker, Chair
Georges Benjamin
John Bradley
Nelson Chao
Jane Delgado
David Ecker
Kevin Jarrell
Steven Krug
Betty Pfefferbaum
Sarah Park

NBSB Ex Officio Members Present

Marc Shepanek (NASA Alternate)
Randall Levings (USDA)
David Howell (ASPR Alternate)
Luciana Borio (FDA)
Kevin Welch (DHS)
Robert Sorenson (DoS Alternate)

Call to Order, Roll Call, and Conflict of Interest Rules

Charlotte Spires, DVM, MPH, DACVPM, Executive Director, NBSB
CAPT, U.S. Public Health Service
U.S. Department of Health and Human Services

CAPT Spires called the meeting to order. She provided an overview of the Federal Advisory Committee Act (FACA) and conflict of interest rules, and then proceeded to take roll for all NBSB members present via teleconference.

Welcome and Agenda Overview

John S. Parker, MD, Major General (Retired)
Chair, NBSB

Dr. Parker thanked CAPT Spires for confirming a quorum. He gave a special thanks to Captain Spires and the NBSB staff for their continuous effort. Dr. Parker thanked everyone for their attendance, and provided an overview of the meeting's agenda, which entailed approval by the Board of recommendations to the Secretary of the Department of Health and Human Services (HHS) regarding an

NBSB Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) Strategic Preparedness Goals (SPG) Working Group Report. He then introduced Dr. John Bradley, Co-Chair and Dr. David Ecker, Co-Chair of the NBSB Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) Strategic Preparedness Goals (SPG) Working Group.

NBSB Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) Strategic Preparedness Report Presentation

John Bradley, MD, WG Co-Chair

David Ecker, PhD, WG Co-Chair

Dr. Bradley opened the discussion by summarizing the task given to National Biodefense Science Board (NBSB) from the Assistant Secretary for Preparedness and Response (ASPR) to address questions regarding Strategic Preparedness Goals. The following questions were posed to the NBSB:

- What methodology or process should be used to assess the requirements for preparedness goals versus real resource capacity?
- How should we think about what levels of risk are acceptable given the trade-offs?
- How do we effectively communicate the levels of preparedness versus the level of risk tolerance to the public?
- What do we need to know to make decisions on future investments to achieve the next level of preparedness?

Dr. Bradley discussed the process of creating NBSB responses to the questions, and identifying the expertise required to address the questions for the working group. He noted the initial draft responses and working group conference calls, identified additional areas of expertise needed to complete the task and develop recommendations. The two additional areas of expertise were Material Threat Assessment presented by Dr. Tim Lant of Biomedical Advanced Research and Development (BARDA) and Bioethics presented by Dr. George Annas of Boston University. The working group received additional comments from ex-officios and the entire NBSB. The draft responses to the questions were revised, finalized and posted.

Dr. Ecker discussed the key components for each recommendation compiled by the working group.

Questions posed to the NBSB and recommendations received:

What methodology or process should be used to assess the requirements for preparedness goals versus real resource capacity?

- a. The NBSB recommends a broad characterization of preparedness and a whole-systems approach to goal-setting. The components of preparedness should include the various materials for use in a response, such as those procured for the U.S. Strategic National Stockpile (SNS), or held in sufficient quantity by commercial sources. Surveillance capability is required to know when and where these materials are needed. An effective planning system must be included to test preparedness strategies. An infrastructure is required to distribute them. Public and private resources are needed to use them effectively. Industrial capacity is required to resupply. The NBSB recommends that all material, infrastructure, and human components of preparedness be considered as an integrated and effective system.
- b. The NBSB strongly supports the current PHEMCE methods being used to assess preparedness requirements for a broad range of specific and less-clearly-defined threats. We encourage continued development of advanced analytical tools and investment in training of expert analysts and decision-makers within the PHEMCE.

How should we think about what levels of risk are acceptable given the trade-offs?

- a. Ethical considerations should weigh prominently in preparedness goal-setting to ensure effective preparedness for and response to incidents, especially those that may result in lives lost. Further, a determination of at-risk and vulnerable populations should be made to provide for a response that equitably supports the entire population.
- b. Recognizing that 100% preparedness for every threat scenario at every scale is not likely achievable, the NBSB recommends the concept of establishing a *target* level of preparedness for the most important specific threats and a target level of *all-hazards* preparedness for a wide range of other threats.
- c. The NBSB recommends that PHEMCE experts integrate threat information from available analytical tools and then exercise their experienced judgment to set target preparedness levels sufficient to mount an effective response. The response should be gauged at a scale deemed plausible in order for the populations involved in an incident to maintain access to basic necessities (food/ water/ shelter/ sanitation/ healthcare) and to preserve national security.
- d. Having established both the specific and all-hazards target levels of preparedness, the NBSB recommends that achieving these target levels be the PHEMCE policy goal.

How do we effectively communicate the levels of preparedness versus the level of risk tolerance to the public?

The NBSB recommends that the Secretary consider mechanisms of actively promoting threat and preparedness messaging. These communications should be modern social media vehicles and involve designation of a federal spokesperson (such as the Surgeon General) to convey appropriate preparedness and public responsibility messages. The NBSB recommends that communication with the public focus on several key messages.

- a. Provide an understanding of the process used by ASPR and the Secretary to define threats as critical and the methods used to determine the appropriate nature and level of preparedness in response to these threats.
- b. Communicate that, even under the best of circumstances, the federal government cannot identify all threats, accurately determine their probability or time of occurrence, or achieve a 100% preparedness and response capability level.
- c. Communicate importance of local and state government partnerships and of partnerships with industry and service-based organizations in response preparedness.
- d. Communicate the vital role of individual and family preparedness and accountability, and provide informational resources and practical guidance for how to achieve individual and community preparedness.
- e. This report should be considered for widespread circulation to SLTT partners as it communicates a sound approach to understanding risk and preparedness.

What do we need to know to make decisions on future investments to achieve the next level of preparedness?

The NBSB recommends that the government continue to encourage and provide motivation for innovation to develop materials and methods to facilitate rapid and effective responses to both intentional and naturally occurring threats.

Dr. Parker thanked Drs. John Bradley and David Ecker for their work.

Public Comment Check (via Email)

CAPT Charlotte Spires, DVM, MPH, DACVPM

No public comment was received via email.

NBSB Vote on Report from PHEMCE SPG WG

CAPT Charlotte Spires, DVM, MPH, DACVPM

CAPT Spires polled the members of the board for approval or disapproval. The recommendations were unanimously approved and will be transmitted to the Secretary with a letter.

Wrap-Up and Conclusions

John S. Parker, MD, Major General (Retired), Chair, NBSB

Dr. Parker acknowledged without exception and within a full quorum, the NBSB approves the PHEMCE Strategic Preparedness Goals Report.

Dr. Parker thanked John Bradley and David Ecker, the ex-officios members for their continued support, and everyone for attending the teleconference. Dr. Parker asked CAPT Spires to adjourn the meeting.

CAPT Spires adjourned the meeting at approximately 2:35 P.M.