



# Board of Scientific Counselors Office of Infectious Diseases

December 10, 2010

CLIAC Briefing  
March 2, 2011

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# Background

- The Office of Infectious Disease's Board of Scientific Counselors (BSC) and CLIAC are 2 of CDC's more than 20 Federal Advisory Committees
- The BSC provides advice on infectious disease issues (epidemiology, surveillance, and laboratory)
- Since 2005, CLIAC has, at the request of the BSC, participated in BSC meetings; CLIAC is a liaison representative
- Clinical lab & CLIA input very beneficial to BSC



## December 6, 2010 Meeting Brief Update

- Primary purpose of meeting to discuss **draft Infectious Disease Framework**, currently under development.
  
- ID Framework will provide **overarching priorities** to sustain and improve infectious disease prevention and control efforts.
  - Will serve as a **guidance document for CDC's infectious disease efforts**
  - Also designed to help provide a **roadmap for collective action** among CDC's public health partners
  
- Meeting also included updates from
  - Dr. Rima Khabbaz (*OID and ID National Center activities*)
  - Dr. Tom Frieden (*CDC's priorities and Winnable Battles*)
  - Drs. Anne Schuchat and Steve Redd (*Follow-up to H1N1 pandemic and current influenza season*)
  - Dr. Eric Mintz (*Cholera in Haiti*)
  - Dr. Chesley Richards (*Prevention through Healthcare / Health Reform*)



## December 6, 2010 Meeting Brief Update

### Comments on Draft ID Framework

- Need more clearly defined purpose
- Need to identify ID gaps in public health (e.g., public health workforce),
- Framework should include consideration of current economic climate, yet not let these constraints limit mention of needed public health initiatives
- Framework should include
  - Importance of evidence-based studies to drive effective public health action
  - Importance of measureable outcomes
- Framework should not be disease specific
- “Revitalizing” public health infrastructure has been a focus for decades, so terminology should be avoided; however, efforts to ensure strong, capable, and forward-looking public health capacities (e.g., use of new technologies, electronic laboratory reporting, novel surveillance and communication strategies) remain critical.