



CHARTER

Advisory Commission on Childhood Vaccines

1. Committee's Official Designation: The Committee shall be known as the Advisory Commission on Childhood Vaccines (ACCV).
2. Authority: The ACCV is required by 42 U.S.C. 300aa-19, Section 2119 of the Public Health Service (PHS) Act. The Advisory Committee is governed by provisions of the Federal Advisory Committee Act of 1972 (5 U.S.C. Appendix 2), as amended, which sets forth standards for the formation and use of advisory committees.
3. Objectives and Scope of Activities: The ACCV provides advice and recommendations to the Secretary of Health and Human Services (Secretary) on the National Vaccine Injury Compensation Program (VICP or the Program), which provides compensation for certain vaccine-related injuries or deaths.
4. Description of Duties: The ACCV shall:
 - (1) advise the Secretary on the implementation of the Program;
 - (2) on its own initiative or as the result of the filing of a petition, recommend changes in the Vaccine Injury Table;
 - (3) advise the Secretary in implementing the Secretary's responsibilities under Section 2127 of the PHS Act regarding the need for childhood vaccination products that result in fewer or no significant adverse reactions;
 - (4) survey federal, state, and local programs and activities relating to the gathering of information on injuries associated with the administration of childhood vaccines, including the adverse reaction reporting requirements of Section 2125(b), and advise the Secretary on means to obtain, compile, publish, and use credible data related to the frequency and severity of adverse reactions associated with childhood vaccines;
 - (5) recommend to the Director of the National Vaccine Program research related to vaccine injuries which should be conducted to carry out the Program; and
 - (6) consult regarding the development or revision of vaccine information materials as required by Section 2126 of the PHS Act.
5. Agency or Official to Whom the Committee Reports: The ACCV provides advice and recommendations to the Secretary.

6. Support: Management and support service are provided by the Health Systems Bureau of the Health Resources and Services Administration.
7. Estimated Annual Operating Costs and Staff Years: The estimated annual cost for operating the ACCV, including compensation and travel expenses for members but excluding staff support, is \$34,786. Estimated staff support required is 1.5 FTE years at an estimated annual cost of \$266,016.
8. Designated Federal Officer (DFO): A full-time or permanent part-time federal employee, appointed in accordance with Agency procedure, will serve as the DFO (or designee) and ensure that all procedures are within applicable statutory, regulatory, and Department of Health and Human Services (Department) General Administration Manual directives. The DFO (or designee) approves and prepares all meeting agendas, calls all Advisory Committee or subcommittee meetings, attends all Advisory Committee and subcommittee meetings, adjourns any meeting when the DFO (or designee) determines adjournment to be in the public interest, and chairs meetings when directed to do so by the HRSA Administrator.
9. Estimated Number and Frequency of Meetings: The ACCV shall meet four times per year. Each meeting must be called or approved by the DFO. A quorum for purposes of meeting is five. A decision at a meeting is to be made by a majority of the voting members of the Commission present at the meeting. Meetings shall be open to the public except as determined otherwise by the Secretary or designee in accordance with the Government in the Sunshine Act (5 U.S.C. 552b(c)) and the Federal Advisory Committee Act of 1972 (5 U.S.C. Appendix 2). 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.
10. Duration: Continuing.
11. Termination: Unless renewed by appropriate action prior to its expiration, the ACCV's charter will terminate 2 years from the date the charter is filed.
12. Membership and Designation: The Commission shall be composed of the following:
 - (1) Nine members appointed by the Secretary as follows:
 - (A) three members who are health professionals, who are not employees of the United States, and who have expertise in the health care of children, the epidemiology, etiology, and prevention of childhood diseases, and the adverse reactions associated with vaccines, of whom at least two shall be pediatricians;
 - (B) three members from the general public, of whom at least two shall be legal representatives of children who have suffered a vaccine-related injury or death; and
 - (C) three members who are attorneys, of whom at least one shall be an attorney whose specialty includes representation of persons who have suffered a

vaccine-related injury or death and of whom one shall be an attorney whose specialty includes representation of vaccine manufacturers.

- (2) The Director of the National Institutes of Health, the Assistant Secretary for Health, the Director of the Centers for Disease Control and Prevention, and the Commissioner of the Food and Drug Administration (or the designees of such officials), each of whom shall be a nonvoting ex officio member.

The Secretary shall select members of the Commission. The members of the Commission shall select a Chair and Vice Chair from among the members. The nine members appointed by the Secretary for a term of 3 years may serve after the expiration of their term until their successors have taken office.

The nine members appointed by the Secretary who are not officers or employees of the federal government shall serve as Special Government Employees. The ex officio members shall be Regular Government Employees and serve on the Commission without compensation in addition to that received in their regular public employment.

13. Subcommittees: Standing and ad hoc subcommittees, composed of members of the parent committee, may be established with the approval of the Secretary or designee to perform specific functions within the ACCV's jurisdiction. Subcommittees must report back to the parent Advisory Committee, and do not provide advice or work products directly to the Department or the Health Resources and Services Administration. The Department's Committee Management Officer will be notified upon the establishment of each subcommittee and will be provided information on the subcommittee's name, membership, function, and estimated frequency of meetings.
14. Recordkeeping: Records of the Advisory Committee, formally and informally established subcommittees, or other subgroups of the Advisory Committee, shall be handled in accordance with General Records Schedule 6.2, 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.

15. Filing Date: July 21, 2022

Approved:

July 1, 2022

Date

/Carole Johnson/
Administrator, Health Resources and Services
Administration