

Information Note¹

Event:	Additional site visit following the U.S. country visit at the invitation of the United States Government
Date and Location:	9 February 2012; Centers for Disease Control and Prevention (CDC), Atlanta, Georgia, United States
Organizer:	Government of the United States
Host country participants:	Centers for Disease Control and Prevention (CDC); Department of State (Office of Counterproliferation Initiatives and Biological Policy Staff); Federal Bureau of Investigation (FBI)
Visiting participants:	1540 Committee experts, UN Office for Disarmament Affairs (UNODA)

1. Objectives of 1540 Participation

The objectives of this site-visit fell within the objectives of the overall U.S. country visit in September 2011, which combined include:

- exchange views on how the U.S. Government (USG) fulfils its domestic responsibilities regarding the implementation of resolution 1540 (2004), including visits to several USG facilities in and around the Washington, D.C., metropolitan area;
- identify effective practices and lessons learned on implementation (including self-evaluation) for the USG and potentially applicable to some other States;
- provide input to go into the next USG report to the 1540 Committee and its next implementation action plan, including at the request of the USG where gaps in implementation exist and how the USG intends to improve their practices;
- review questions posed to the U.S. biological entities in the September 2011 visit for their relevance to the CDC;
- study the draft report of the U.S. country visit to note complementarities of the role of the CDC with other entities as listed above in meeting the requirements of resolution in the biological field;
- note effective practices and lessons learned suggested in the draft report regarding controls on biological weapons related materials for relevance to the CSC; and,
- contribute input to the final report of the U.S. country visit of September 2011.

2. Background

During the U.S. country visit from 12-16 September 2011 in Washington, D.C. and its environs, the 1540 Committee delegation received briefings and conducted several site visits concerning its implementation of resolution 1540 (2004). The U.S. offered to conduct at a later date, follow-on site-visits including to the CDC in Atlanta, Georgia. The CDC's overall mission is to "collaborate to create the expertise, information and tools that people and communities need to protect their health – through health promotion, prevention of disease, injury and disability, and preparedness for new health threats". (www.cdc.gov).

3. Highlights

¹ For information – not an official report. The views expressed here do not necessarily represent those of the 1540 Committee or of the organizers or participants in the event.

In general, authority to account for, secure and physically protect biological sensitive materials, is allocated to the Department of Health and Human Services (DHHS) for measures related to humans and to USDA for plant and animal measures. DHHS has a broad public health mandate from the Public Health Act of 1944, as amended, with specific responsibility to prevent the spread of communicable diseases within the U.S., and with the authority to use a variety of quarantine tools, including controls on interstate transport. The DHHS delegates authority for much of its daily work in the field of biosecurity, including its Laboratory Registration and Select Agents Tracking Program, to the CDC.

The CDC comprises a Center for Global Health, an Institute and Offices. Staff from the Center for Global Health primarily hosted and coordinated the visit and representatives from divisions and national centers within the Offices made many presentations and led on-site visits. Opening remarks by host representatives underscored U.S. Government efforts to promote an environment of transparency and openness, with measures including organizing visits, developing scientific exchanges, and establishing international norms. CDC has assets all around the world and works on Global Health Security matters, including on implementation by the U.S. and other States of the International Health Regulations.

As encouraged by resolution 1977 (2011), effective practices, experiences and lessons learned were shared during the course of the visit. It was noted that:

- Country and site-visits such as this were welcome to raise awareness of resolution 1540 among implementers, many of whom were in effect already implementing aspects of the resolution but not fully aware of doing so.
- The *Public Health Preparedness Capabilities: National Standards for State and Local Planning* is a source of effective practices.
- Practices involved in the joint efforts of the law enforcement and public health communities on biosecurity in contributing to prevention are compiled in the *Criminal and Epidemiological Investigation Handbook* (http://www2.cdc.gov/phlp/ForensicEpi/docs/Crim_Epi_Hdbk.pdf).
- Select agent regulations, arising from the Public Health Security and Bioterrorism Preparedness and Response Act (2002), address aspects of resolution 1540; for example, accounting for which there is a database of registered agents; security (and safety) requirements for entities working with select agents.
- The select agent regulations are subject to a review process which in Executive Order 13546 of July 2010 called for, *inter alia*, a subset of agents and toxins to be considered for improved physical protection and related security measures.

4. Additional comments

For further information, please contact the 1540 Committee experts by e-mail at 1540experts@un.org.