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**6 ADVISORY BOARDS**

The Infectious Diseases Clinical Research Consortium (IDCRC) committed to the establishment of 3 advisory boards, an External Advisory Board (EAB), a Laboratory Sciences Advisory Board (LSAB) and a Community Advisory Board (CAB). The CAB will be organized in Year 2 of the Award.

**6.1 AB Composition, Terms and Responsibilities General**

Each AB will have a minimum of 5 members, all accomplished individuals knowledgeable in the respective fields. They will meet to conduct annual reviews, evaluate performance and provide advice for each sector. These boards will meet annually via videoconference, or as part of the annual meeting.

Additional members may be added on an ad hoc basis depending on needs specific to the content under discussion.

**6.1.1 Term Limits**

Members of the committees will serve no more than three successive two-year terms.

**6.2 EXTERNAL ADVISORY BOARD**

The **EAB** will be comprised of individuals knowledgeable in the field of infectious diseases and their prevention and treatment, clinical investigation, product development, policy, or other disciplines chosen by the SOGC in conjunction with NIAID.

As part of its directive, the EAB will monitor the objectives and success of the LG’s activities overall (LOC, COU, LOU and SDSU). This will entail ensuring that the LG’s focus on scientific areas of the highest priority and need is sustained; that the LG is responsive to evolving science and public health challenges (such as COVID-19); and that the LG conducts this work with high standards of professionalism and competence.

During their inaugural meeting, the EAB will design a set of performance criteria derived from the individual Unit's performance plan outlined in the RPPR.

Overall function and productivity may be demonstrated in several ways including but not limited to:

- alignment with/addressing priorities set by DMID, IDCRC, & emerging public health priorities
- development, review, and approval of new study proposals (Initial concept proposals, expanded concept proposals)
- initiation of new studies and completion of ongoing studies
- results reporting, presentation, and publication
- evidence of impact on public health policy and/or product licensure or labeling changes.

The EAB will be asked to review the IDCRC LG and Executive Management Team (EMT) performance on an annual basis.

### **6.3 LABORATORY SCIENCES ADVISORY BOARD**

The **LSAB** will be comprised of individuals with expertise in fields such as immunology, omics, microbial pathogenesis, pharmacokinetics, and drug/device design will conduct an annual review of the laboratory research conducted within the IDCRC and advise on opportunities for innovation and ancillary studies.

### **6.4 COMMUNITY ADVISORY BOARD**

The **CAB** will be convened in Year 2 of the Award. It is anticipated that the CAB will be comprised of community stakeholders who represent groups most likely to be the focus of IDCRC research. The CAB will be asked to weigh in on implications and conduct of planned research as well as communications to ensure that messaging about this research is appropriate and best positioned to reach these communities. The CAB will include leaders in public health, underrepresented minorities, and the elderly, among others, who will meet with the SOGC to share community perspectives and ideas, questions and concerns about ID research so they can be proactively addressed.

### **6.3 Conflict of Interest**

The consortium follows a strict conflict of interest (COI) policy. All EAB members should complete a standardized COI form annually to have on file. This form is focused on financial or potential financial conflicts.