

42 USC 247d–4b. **“SEC. 319D–1. CHILDREN’S PREPAREDNESS UNIT.**

“(a) **ENHANCING EMERGENCY PREPAREDNESS FOR CHILDREN.**—The Secretary, acting through the Director of the Centers for Disease Control and Prevention (referred to in this subsection as the ‘Director’), shall maintain an internal team of experts, to be known as the Children’s Preparedness Unit (referred to in this subsection as the ‘Unit’), to work collaboratively to provide guidance on the considerations for, and the specific needs of, children before, during, and after public health emergencies. The Unit shall inform the Director regarding emergency preparedness and response efforts pertaining to children at the Centers for Disease Control and Prevention.

“(b) **EXPERTISE.**—The team described in subsection (a) shall include one or more pediatricians, which may be a developmental-behavioral pediatrician, and may also include behavioral scientists, child psychologists, epidemiologists, biostatisticians, health communications staff, and individuals with other areas of expertise, as the Secretary determines appropriate.

“(c) **DUTIES.**—The team described in subsection (a) may—

“(1) assist State, local, Tribal, and territorial emergency planning and response activities related to children, which may include developing, identifying, and sharing best practices;

“(2) provide technical assistance, training, and consultation to Federal, State, local, Tribal, and territorial public health officials to improve preparedness and response capabilities with respect to the needs of children, including providing such technical assistance, training, and consultation to eligible entities in order to support the achievement of measurable evidence-based benchmarks and objective standards applicable to sections 319C–1 and 319C–2;

“(3) improve the utilization of methods to incorporate the needs of children in planning for and responding to a public health emergency, including public awareness of such methods;

“(4) coordinate with, and improve, public-private partnerships, such as health care coalitions pursuant to sections 319C–2 and 319C–3, to address gaps and inefficiencies in emergency preparedness and response efforts for children;

“(5) provide expertise and input during the development of guidance and clinical recommendations to address the needs of children when preparing for, and responding to, public health emergencies, including pursuant to section 319C–3; and

“(6) carry out other duties related to preparedness and response activities for children, as the Secretary determines appropriate.”.

**SEC. 305. NATIONAL ADVISORY COMMITTEES ON DISASTERS.**

(a) **REAUTHORIZING THE NATIONAL ADVISORY COMMITTEE ON CHILDREN AND DISASTERS.**—Section 2811A (42 U.S.C. 300hh–10a) is amended—

(1) in subsection (b)(2), by inserting “, mental and behavioral,” after “medical”;

(2) in subsection (d)—

(A) in paragraph (1), by striking “15” and inserting “25”; and

(B) by striking paragraph (2) and inserting the following: