

**Select Subcommittee on the Coronavirus Pandemic
House Oversight and Accountability Committee
Hearing: “Preparing for the Next Pandemic: Lessons Learned and The Path Forward”**

Key Lessons Learned from the COVID-19 Pandemic Response

U.S. Centers for Disease Control and Prevention (CDC):

Improved Communication:

Through CDC’s Moving Forward initiative, CDC has completed 165 actions, resulting in new systems, processes, and tools to enhance work across the agency. Among the lessons learned, one of the most important is improving how CDC communicates about public health challenges and guidance.

To that end, CDC has prioritized improving communications to support clear, consistent delivery of health information and guidance to Americans in real time. Whether by revamping its website or streamlining guidance and materials for the public, CDC has made great progress in improving its communication.

For example, in March 2024, CDC put out new streamlined guidance that provides people with clear options for preventing the spread of respiratory viruses. In addition, CDC posted a Respiratory Illnesses Data Channel that includes a weekly national summary and “community snapshots” for respiratory illness activity in flu, COVID-19, and RSV, as well as wastewater viral activity and emergency department visits.

CDC understands that the agency needs to meet people where they are finding content, which is why it launched regular in-person and digital connections with the public. These efforts include a video series called “Check-in with CDC Director Cohen,” which provides key public health updates in plain language, and a blog series designed to give the public real-time information about the latest respiratory virus developments in language everyone can understand. Finally, the Director is traveling regularly to states and local communities to talk about the importance of vaccination with the public and local leaders.

Sustained Resources and Authorities for Core Capabilities:

Another important lesson learned is the need for sustained and increased resources and authorities to strengthen public health core capabilities.

Supplemental funding in an emergency is always critical for responding to urgent needs but is emblematic of the historic trend to fund public health needs only when there are dire, high-profile challenges. This boom-or-bust cycle creates steep fiscal cliffs that require jurisdictions to dismantle programs like wastewater surveillance the public has come to expect, only to then scramble to restart them for the next emergency. Notably, continuity of investment in public health extends beyond CDC as it is just as vital for state and local jurisdictions. Approximately 80 percent of CDC’s domestic funding goes to state and local health departments. CDC learned that the lack of sustained investments for laboratory, workforce, and data left CDC and state, Tribal, local, and territory partners vulnerable during the early days of the pandemic. CDC is

already seeing a desire to pull back funding for some of these capabilities which will leave us less prepared for the next threat. To sustain these core capabilities, CDC also needs adequate authorities. These include the need to update the public health data policy framework to enable real-time situational awareness; providing flexibility for the ability to surge and sustain a robust public health workforce; and creating an adult vaccine infrastructure to be better prepared for the next potential public health threat.

CDC looks forward to the opportunity to work with Congress to address the remaining gaps that will require congressional action to improve the agency's response readiness.

U.S. Food and Drug Administration (FDA):

Improving Our Medical Product Supply Chain Resilience:

Public health emergencies, including the COVID-19 pandemic, exposed supply chain vulnerabilities, including a lack of resiliency, the capability to withstand or mitigate disruptions, and redundancy, impacting the availability of multiple medical products. There is a need for greater transparency into medical product supply chains to improve resiliency in manufacturing, which will help to ensure continued access to critical products, including drug products, during emergencies when supply chains might be disrupted. Looking to future preparedness, and in accordance with the National Strategy for a Resilient Public Health Supply Chain, it is critical for the U.S. government to have visibility into the end-to-end supply chain data. The Fiscal Year 2025 President's Budget includes several critical legislative proposals intended to promote FDA's efforts to bolster supply chains and address current vulnerabilities.

Streamlining and Accelerating Product Reviews Without Compromising Safety:

FDA learned that ongoing formal and informal communication between sponsors and manufacturers of medical products with FDA was important and beneficial. For example, early in the COVID-19 pandemic response, FDA promptly issued guidance to industry to provide clear recommendations regarding data to satisfy applicable requirements to advance the most promising candidate medical countermeasures, including vaccines, as well as diagnostics as quickly as possible. This is one of the ways that FDA helped make COVID-19 vaccines available swiftly while upholding its rigorous scientific and regulatory standards by prioritizing and streamlining reviews. FDA is leveraging lessons learned from the COVID-19 response in our everyday reviews of medical products, including in reviews of rare disease therapies and in facilitating the availability of diagnostic tests as the United States experiences other outbreaks, such as mpox and Highly Pathogenic Avian Influenza-specific tests.

National Institutes of Health (NIH):

Prioritizing Transparency and Communication by Ensuring Consistent Messaging on Resources, Policies, and Public Health Measures to Enhance Coordination and Ensure Public Trust:

Since 1918, no one in the medical and research communities nor the public had experienced a pandemic the magnitude of COVID-19. The nature of a pandemic virus, like much of scientific inquiry, includes a period of discovery and adaptation in creating medical countermeasures. Scientific discovery is inherently iterative. And this was dramatically amplified by the rapid changes to the virus. These changes required constant modification of approaches and strategies to control the pandemic and mitigate the effects of infection. We learned about how best to communicate to the public that a science-based approach to a pandemic response is naturally evolving and self-corrects as more is learned about the virus in order to build and sustain public trust. We recognize the need for strong community engagement through trusted members of the community and that developing new and clearer methods and approaches to communicate to the public are essential going forward to regaining trust of the public.

Building and Sustaining Collaborations and Partnerships:

The COVID-19 pandemic highlighted the critical importance of collaboration and partnerships across sectors to address complex public health challenges, including future pandemics. One of the most valuable lessons learned was the need to foster strong partnerships – both with industry and within the research community – well in advance of a crisis to form cohesive and coordinated responses. Building these relationships early not only enhances NIH’s ability to respond effectively to future health challenges but also serves as a cornerstone for fostering public trust. Transparent and collaborative efforts demonstrate accountability and a shared commitment to public welfare, which are essential to maintaining confidence in public health.

Strategic industry partnerships, like the Accelerating Medicines Partnership (AMP) program and Operation Warp Speed (OWS), allowed NIH to ensure a more rapid mobilization of resources, knowledge, and innovation. Moving forward, expanding, and growing the AMP program will be crucial for continuing to leverage these relationships to address emerging health challenges and accelerate the development of innovative solutions. NIH has also learned the extent to which better coordination and integration of clinical trials is another component of strengthening key collaborations. Leveraging NIH’s established clinical trial networks early on would provide a more coordinated approach. Additionally, the COVID-19 pandemic emphasized the need to ensure comparability and findability between different studies and resources. NIH has addressed this with the implementation of the NIH Data Management and Sharing Policy, which establishes the expectations that data sharing is a fundamental component of the research process and maximizes the public’s access to research results that arise from NIH-funded research.

Throughout the pandemic, NIH conducted and funded research and led partnerships that supported breakthroughs in the understanding, diagnosis, and treatment of COVID-19 to address the crisis. The pandemic demonstrated that NIH must continue to build on the successes of the initiatives, partnerships, and collaborations across government and the private sector to create a more resilient and agile public health response system, better equipped to tackle the challenges

of future pandemics. Only through sustained, collaborative efforts can we ensure we are prepared for future health challenges.