

HOUSE JOINT RESOLUTION NO. 584

Continuing the Joint Subcommittee to Study Medical, Ethical, and Scientific Issues Relating to Stem Cell Research Conducted in the Commonwealth. Report.

Agreed to by the House of Delegates, February 2, 2007

Agreed to by the Senate, February 21, 2007

WHEREAS, House Joint Resolution No. 588 (2005) established the Joint Subcommittee to Study Medical, Ethical, and Scientific Issues Relating to Stem Cell Research Conducted in the Commonwealth; and

WHEREAS, House Joint Resolution No. 48 (2006) last continued the study to review new developments in stem cell research and treatment and seeks to fulfill its recommendation to establish an umbilical cord blood bank initiative in the Commonwealth; and

WHEREAS, House Bill No. 413 (2006) and Senate Bill No. 370 (2006) established the Virginia Cord Blood Bank Initiative that charged the State Health Commissioner with developing a collaborative consortium to assist in the realization of a cord blood bank in Virginia; and

WHEREAS, the joint subcommittee has met four times during the 2006 interim and heard about the Virginia Department of Health's progress in convening a consortium of interested parties; and

WHEREAS, according to the Virginia Department of Health there may be various federal grants available to initiatives such as the Virginia Cord Blood Bank Initiative; and

WHEREAS, upon seeking input from the Virginia Department of Health, the joint subcommittee was told that being able to reference the joint subcommittee on grant applications could be a strong factor in obtaining favorable decisions on grant applications; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee to Study Medical, Ethical, and Scientific Issues Relating to Stem Cell Research Conducted in the Commonwealth be continued. The joint subcommittee shall have a total membership of 15 members that shall consist of five members of the House of Delegates appointed by the Speaker of the House of Delegates in accordance with the principles of proportional representation contained in the Rules of the House of Delegates; three members of the Senate to be appointed by the Senate Committee on Rules; one representative each of the University of Virginia School of Medicine and the Eastern Virginia Medical School and two nonlegislative citizen members at-large to be appointed by the Speaker of the House of Delegates; and one representative of the Virginia Commonwealth University School of Medicine and two nonlegislative citizen members at-large to be appointed by the Senate Committee on Rules. Nonlegislative citizen members of the joint subcommittee shall be citizens of the Commonwealth of Virginia. The current members appointed by the Speaker of the House of Delegates shall be subject to reappointment. The current members appointed by the Senate Committee on Rules shall continue to serve until replaced. Vacancies shall be filled by the original appointing authority. Unless otherwise approved in writing by the chairman of the joint subcommittee and the respective Clerk, nonlegislative citizen members shall only be reimbursed for travel originating and ending within the Commonwealth of Virginia for the purpose of attending meetings. If a companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall be required. The joint subcommittee shall elect a chairman and vice-chairman from among its membership, who shall be members of the General Assembly.

In conducting its study, the joint subcommittee shall (i) continue to monitor the progress of the Virginia Cord Blood Bank Initiative, including various ways the bank could be utilized, such as treating first responders to a terrorist attack; and (ii) continue to review new and emerging issues in stem cell research and treatment.

Administrative staff support shall continue to be provided by the Office of the Clerk of the House of Delegates. Legal, research, policy analysis, and other services as requested by the joint subcommittee shall continue to be provided by the Division of Legislative Services. Technical assistance shall continue to be provided by the Virginia Department of Health. All agencies of the Commonwealth shall provide assistance to the joint subcommittee for this study, upon request.

The joint subcommittee shall be limited to two meetings for the 2007 interim, and the direct costs of this study shall not exceed \$5,400 without approval as set out in this resolution. Of this amount an estimated \$2,000 is allocated for speakers, materials, and other resources. Approval for unbudgeted nonmember-related expenses shall require the written authorization of the chairman of the joint subcommittee and the respective Clerk. If a companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall be required.

No recommendation of the joint subcommittee shall be adopted if a majority of the House members

or a majority of the Senate members appointed to the joint subcommittee (i) vote against the recommendation and (ii) vote for the recommendation to fail notwithstanding the majority vote of the joint subcommittee.

The joint subcommittee shall complete its meetings by November 30, 2007, and the chairman shall submit to the Division of Legislative Automated Systems an executive summary of its findings and recommendations no later than the first day of the 2008 Regular Session of the General Assembly. The executive summary shall state whether the joint subcommittee intends to submit to the General Assembly and the Governor a report of its findings and recommendations for publication as a House or Senate document. The executive summary and report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or delay the period for the conduct of the study, or authorize additional meetings during the 2007 interim.