

EVALUATION OF THE CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS REVIEW PROCESS

November 2016

The second largest government funder of the billions of dollars spent on medical research in the United States each year is the Department of Defense (DoD), through its Congressionally Directed Medical Research Programs (CDMRP). In 2016, CDMRP received Congressional appropriations of almost \$1.5 billion to support 29 individual research programs, ranging from breast cancer to military burns, that fund projects relevant to the health of members of the military and their families, and to the general public.

With support from the DoD, an expert, ad hoc committee of the National Academies of Sciences, Engineering, and Medicine conducted an evaluation of the processes used by CDMRP to select applications for funding by the research programs—specifically, those programs that receive funding only from Congressional appropriations. (The committee was not asked to assess the outcomes, effectiveness, or impact of any research programs, or the management of awards after the application review process is complete.)

On the basis of information from a variety of sources, the committee concludes that, in general, the CDMRP review process is effective in dispensing research funding across its programs and is not in need of extensive revisions. However, the committee also identified four interconnected areas with opportunities for improvement of the review process:

- development of a strategic plan for each research program,
- more formal coordination between CDMRP and the National Institutes of Health (NIH) and the U.S. Department of Veterans Affairs (VA),
- greater transparency of the CDMRP review process, and
- improved standardization of CDMRP's business practices.

STRATEGIC PLANS

All CDMRP research programs receive 1-year funding, with no guarantee that Congress will appropriate money for any program in any given year. Nevertheless, most of the research programs, once established, are funded each year at a relatively consistent level, supporting the need for a strategic plan for each program that establishes long-term research goals and promotes coordinated research efforts with other organizations. For this reason, the committee recommends a strategic plan that would identify and evaluate programmatic research priorities for the next 3–5 years; specify the research initiatives, including award mechanisms, that are expected to achieve those long-term goals; provide flexible approaches to build on past successes and address failures and gaps; and describe the resources (e.g., human, institutional, technological, and financial) needed to implement the initiatives.

COORDINATION OF RESEARCH PRIORITIES

The coordination of medical research priorities and funding among federal agencies and with nongovernmental agencies can help ensure that research dollars are going to fund critical research within an organization's area of expertise or focus, reduce administrative costs, and avoid unnecessary duplicative research. Coordination is best accomplished when all the involved organizations work together. While CDMRP may attempt to coordinate its research priorities with NIH and the VA, there is currently no requirement or incentive for those organizations to coordinate their research priorities with CDMRP. For this reason, the committee recommends that where there is a commonality in substantial research efforts by other organizations, whether federal or nongovernmental, CDMRP should have a formal mechanism to coordinate with these entities in a predictable, consistent, and standardized manner each year to learn of ongoing and new research areas for the health condition being funded or considered for funding by those other organizations.

TRANSPARENCY

CDMRP has made many aspects of its review process publicly available on its website. Yet there are four notable areas of the CDMRP review process for which transparency is lacking: stakeholders meetings, contractor support activities and policies, the use of ad hoc and specialty reviewers, and feedback from programmatic reviewers. Improving transparency in these areas would help engage the best scientists, researchers, and consumers and improve CDMRP’s selection process for reviewers, and thus the applications that those reviewers recommend for funding. For the full text of the committee’s recommendations, including those in each of these areas, please refer to the Recommendations document.

STANDARDIZATION

CDMRP has made an attempt to standardize many of its processes across its research programs, such as introducing the use of consistent terminology and formats for program announcements, standardized application submission instructions, and a searchable database of funded applicants. The committee finds two areas—scoring criteria and term limits—where CDMRP might further improve transparency and standardization. Specifically, CDMRP should consider updating and standardizing its scoring system to reflect current review practices and to reduce confusion among reviewers and applicants. Also, to introduce new perspectives, knowledge, and diversity that would improve the review process, CDMRP should have standardized limits on both the terms of service and the number of consecutive terms that peer and programmatic panel members, including chairs, may serve.

CONCLUSION

The committee’s interconnected recommendations provide a path to help further align the program with NIH and others, helping to improve this well-established medical research funding organization that covers the many health conditions of concern to members of the military and veterans, their families, and the public as a whole.♦♦

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by Department of Defense Congressionally Directed
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