

The seal of the Defense Health Board is a circular emblem. It features a central globe with a microscope superimposed over it. The globe is light blue and green, while the microscope is dark grey. The words "DEFENSE" and "HEALTH BOARD" are written in a serif font around the top and bottom of the globe, respectively. Two small stars are positioned on the left and right sides of the globe. The entire seal is rendered in a light, semi-transparent blue color.

Public Health Subcommittee

Improving Defense Health Program Medical Research Processes

**Defense Health Board
November 1, 2016**



Overview

- Membership
- Tasking
- Meetings
- Areas of Interest
- Way Ahead



Membership

Public Health Subcommittee

- The Public Health Subcommittee has 10 members, with one member as chair.



Tasking

(1 of 3)

“I request that the Defense Health Board (DHB). . . provide recommendations to the Department regarding approaches that would optimally support military medical professionals who oversee and conduct DHP medical research.”

- Acting Under Secretary of Defense (Personnel & Readiness) (USD(P&R)) Memo dated September 30, 2015



Tasking

(2 of 3)

Request that the Defense Health Board address and develop findings and recommendations on the following:

- Determine how DoD may improve visibility on Defense Health Program (DHP) medical research supported through separate funding sources (RDT&E and O&M) to enhance coordination of effort, oversight, and collaboration.
- Determine the major challenges that DoD investigators face in initiating, funding, conducting, and publishing DHP medical research.
- Determine how DoD may facilitate more efficient initiation and conduct of high-quality DHP medical research without compromising safety or data protection standards.



Tasking

(3 of 3)

Request that the Defense Health Board address and develop findings and recommendations on the following:

- Determine how DoD may improve Institutional Review Board processes to facilitate more efficient approval of multicenter studies and clinical trials.
- Determine cost-effective mechanisms to encourage more professionals to become engaged in medical research.
- Determine mechanisms to improve acknowledgement in public communications by other government agencies and industry of DoD's contributions to products it has funded or partially developed and subsequently handed off.



Meetings Since Previous Board Meeting

- August 17, 2016
 - Review of draft report materials
- September 14-15, 2016
 - Roundtable discussions with Military Health System (MHS) medical research leadership and Defense Health Agency, as well as budget personnel, on DHP research challenges/opportunities
- October 12, 2016
 - Review of draft report materials



Areas of Interest

(1 of 3)

- There are two main elements of the DoD medical research enterprise funded through the DHP: RDT&E medical research and Clinical Investigation Programs (CIP) at the MTFs.
- DoD Instruction (DoDI) 6000.08 states, “DHP-funded medical research and CIP are essential missions of the MHS.”
- Despite this level of clarity, DoD inconsistently provides the infrastructure necessary to support research.
- While there are ample recruitment opportunities at the junior levels for researchers, there are no clear career paths for researchers. This leads to a lack of continuity in research and a shortage of mid- and senior-level researchers (and mentors).



Areas of Interest

(2 of 3)

- Relative Value Units (RVUs) are not usually assigned to research activities at the MTFs. As a result, investigators at the MTFs often end up doing research in their “spare time,” lack support, and receive no consideration for research during promotion.
- There is no clear command accountability for the research conducted at the MTFs.
- There is no centralized reporting of DoD medical research activities, making it difficult to have a clear idea of the overall portfolio and how well it matches the strategic priorities and program budgets.



Areas of Interest

(3 of 3)

- DoD policies have restricted the ability of investigators to attend professional conferences, leading to a limited presence of DoD investigators in these important meetings, reduced visibility and sharing of DoD medical research, and reduced opportunities to network and create research partnerships.
- Greater opportunities are needed for targeted and advanced education to develop research expertise within the MTFs.
- These areas of interest are consistent with the findings and recommendations of other committees/teams tasked to address the same issues in the past.



Way Ahead

- Continue monthly teleconferences/meetings
- Continue deliberation of findings and recommendations through 2016
- Draft report for February 2017 DHB meeting