Strategic Planning Processes in DPCPSI Offices

PHASE 1 Strategic Planning

COMMON FUND

Concept Clearance by the CoC: What **broad scientific areas** should the Common Fund support?

PHASE 2 Strategic Planning

Program 1   Program 2
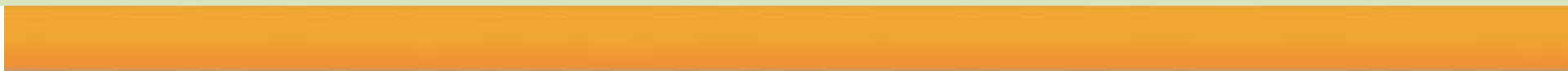
Init 1   Init 2   Init 3
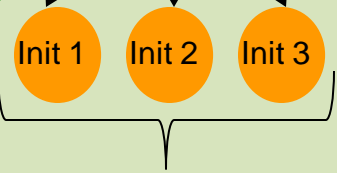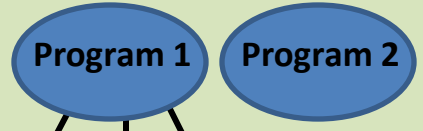
Managed by ICs

Concept Clearance by **CoC**: What **initiatives** should ORIP support?

ORIP

Init 1   Init 2   Init 3
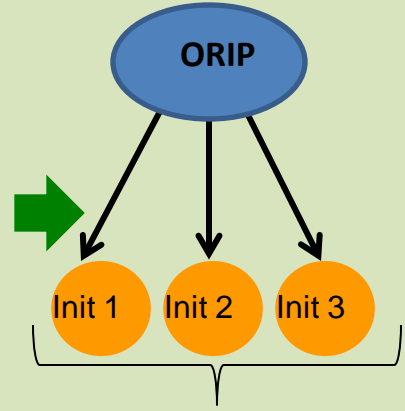
Managed by ORIP

Common Fund Concept Clearance

- Does a given concept address an area of science that should be a focus for the CF?

- Are the challenges significant for a broad section of health research, and are there opportunities for the CF to have a transformative impact?

Common Fund Concept Clearance: 4 Steps

Step1: Concepts have been submitted

Step 2: Electronic review/discussion/voting

Step 3: Tallying Votes -- Concept Clearance

Step 4: After concept clearance

Concept Clearance: Step 1

Step 1: Concepts have been submitted

- IC Directors and external participants have submitted concepts for possible new CF programs
    - Strategic Planning Meetings held in Chicago, San Francisco, and Bethesda
    - Participants included scientists nominated by IC Directors as well as self-nominees
    - IC Directors worked with their staffs to provide up to 3 concepts per IC
    - Similar concepts were combined
    - DPCPSI provided an initial triage, removing concepts that were highly related to ongoing or prior CF programs

Concept Clearance Step 2

Step 2: Electronic Review and Comment

• CoC is asked to review the broad goals of the programs and determine whether they are appropriate for the Common Fund. Council is asked to comment on the vision that has been developed to date to help with further refinement/modification.

• Because of the large number of concepts that are to be reviewed, the CoC clearance process will occur electronically.

• Concepts are presented as 1-page documents which address:
  -- Scientific needs or opportunities
  -- Overall goals for the program
  -- Specific initiatives that could be developed to collectively achieve the overall goal
  -- Potential impact of the program

• Concepts could be implemented in FY13 or FY14, depending on how well the concept is currently defined.

• CoC members are asked to assess responsiveness to the CF criteria for each concept. A link to access a social media site for online discussion will be emailed to all Council members today.

CoC Social Media Site

1. Access the site via this link:
   http://www.commonfund.nih.gov/COC/

2. Select a concept you would like to comment on:

The NIH Common Fund
Office of Strategic Coordination *WE ACCELERATE DISCOVERY.*

COMMON FUND PROGRAMS   RESEARCH FUNDING   NEWS & EVENTS   HIGHLIGHTS   ABOUT   CONTACTS

NIH Common F

Council of

**Council of
programs**

3. Log on with username/passcode provided:
- Same for all CoC members
- Will be emailed today

For each idea, we are a~~sking you to vote on how responsive the idea is to the~~ Common Fund criteria by indicating "Yes" (comp ~~~~ "No" (not responsive). If you indicate "Maybe," plea ~~~~ ecome responsive to the Common Fund criteria ~~~~ nge of scientific disciplines, if the goals are refined t~~~~ . You may also use the comment box to provid

Please click on the ide

User Name: [   ]

Password: [   ]

[Login]

Careers in the Biomedical Workforce
Coordinated Approaches to Big Data
Increasing Diversity in the Biomedical Research Workforce
A Virtual Biorepository
Publicly Available siRNA Libraries for the Unrestricted Release of Screening Data and Corresponding
Sequence Information
Rescue of abandoned clinical candidates
Management of Chronic Diseases in Clinical Trials

Click the concept to open the comment box

4. Read about the concept, leave a comment, read others' comments

Management of Chronic Diseases in Clinical Trials
By Admin   1 June 2012 09:10

Title of proposed program: Management of Chronic Diseases in Clinical Trials

Submitting Source: NIH

What is the major obstacle/challenge
goals of the program be?
Clinical trials require carefully selec
typically present with more than one
and in another is considered to be a
decreases in treatment, and inferior
underserved populations. Common
clinical trials and subsequently appr
populations different from the clinic
identify chronic diseases and condit
practitioners to better understand b
diseases. Comorbidities that are tre
and those that may be long-term se
practicing physicians world-wide. Th
context of treatment including a lack
clinical trial designs with embedded
conditions, cultures, lifestyles, and
and genomic therapies are touted to
freedom from toxicities to the host a
goals of a program focusing on co-mo

Comments

Add comment
Responsiveness to Common Fund criteria (please select one):

☐ Yes ☐ Maybe ☐ No

| Comment | Preview | b i u quote

Contact Information:

Name: * [   ]

Institution: [   ]

Email: [   ]

☐ Notify me when new comments are added

[Save comment]

Concept Clearance Step 2 (cont'd)

Step 2 (cont'd) -- Voting:

• On the "Vote Sheet" tab of the Excel file sent on May 23, click the "Idea Title" to open a pdf version of the concept

• For each concept, please provide the following:

1) **Responsiveness:** Does the concept address an important, trans-NIH topic? If the program is developed and implemented successfully, will new paradigms be created in basic or clinical science, or will the conduct of research be transformed? Are goals achievable within a 5-10 year period? Please vote "Yes," "No," or "Maybe" as to whether the concept is responsive to the CF criteria.

2) **Comment (not required but helpful):** You may add a brief comment to explain your vote. This is particularly helpful for "Maybe" votes. For example, you may indicate that a subset of the concept would be responsive, that broadening/adjusting the concept would make it responsive, or that combining the concept with another concept would make it responsive. (If you have provided comments on the Social Media site, they do not need to be repeated here.)

Concept Clearance Steps 3 and 4

Step 3: Tallying Votes -- Concept Clearance

- <u>Your review of these concepts is requested by June 14.</u>

- Votes will be counted as follows:
  - Concepts for which a majority of voters vote either "Yes" or "Maybe" will be deemed cleared.
  - "Comments" provided by Council members will be used to guide the further development of the concepts.
  - The public will also have the opportunity to provide comment (but not vote).
    - Concepts are available here: http://www.dpcpsi.nih.gov/council/ideas_newcfp.aspx
    - Comments can be emailed to: askDPCPSI@od.nih.gov

Step 4: After Concept Clearance
- Ideas that have been cleared by the CoC will be discussed by NIH leadership.
- Working Groups of NIH staff will be formed to refine the concepts and develop the initiatives.
- NIH and DPCPSI Directors will review the proposals resulting from each new Working Group and allocate budgets accordingly.
- Each project will be managed by several ICs with the Advisory Council of a single IC asked to perform second level reviews.

Questions or Comments?