U.S. ARMY MEDICAL RESEARCH AND MATERIEL COMMAND (USAMRMC)
CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)
FISCAL YEAR 2016 (FY16) PEER REVIEWED CANCER RESEARCH PROGRAM (PRCRP)

DESCRIPTION OF REVIEW PROCEDURES

The programmatic strategy implemented by the FY16 PRCRP called for applications in response to the Horizon Award Program Announcement (PA) released in June 2016.

In response to the Horizon Award PA, 55 compliant applications were received in September 2016 and peer-reviewed in November 2016. Programmatic review was conducted in February 2017.

Submission and award data for the FY16 PRCRP are summarized in the tables below.

Table 1. Submission/Award Data for the FY16 PRCRP*

Mechanism	Compliant Applications Received	Applications Recommended for Funding (%)	Total Funds
Horizon Award	55	14 (25%)	$3.36M

* These data reflect funding recommendations only. Pending FY16 award negotiations, final numbers will be available after September 30, 2017.

Table 2. FY16 PRCRP Application Data by Topic Area

Topic Area	Compliant Applications Received	Applications Recommended for Funding per Topic Area (%)	Total Funds
Bladder Cancer	5	1 (20%)	$257,100
Colorectal Cancer	4	2 (50%)	$440,466
Immunotherapy	11	2 (18%)	$468,283
Kidney Cancer	0	0 (0%)	$0
Listeria Vaccine for Cancer	0	0 (0%)	$0
Liver Cancer	6	1 (17%)	$237,313
Lymphoma	4	1 (25%)	$228,546
Melanoma and Other Skin Cancers	4	1 (25%)	$235,500
Mesothelioma	0	0 (0%)	$0
Neuroblastoma	2	1 (50%)	$257,100
Pancreatic Cancer	9	2 (22%)	$472,350
Pediatric Brain Tumors	8	1 (12%)	$262,500
Stomach Cancer	2	2 (100%)	$502,499
Totals	**55**	**14 (25%)**	**$3,361,657**

THE TWO-TIER REVIEW SYSTEM

The USAMRMC developed a review model based on recommendations of the 1993 Institute of Medicine (IOM) of the National Academy of Sciences report, *Strategies for Managing the Breast Cancer Research Program: A Report to the Army Medical Research and Development Command*. The IOM report recommended a two-tier review process and concluded that the best course would be to establish a peer review system that reflects not only the traditional strengths of existing peer review systems, but also is tailored to accommodate program goals. The Command has adhered to this proven approach for evaluating competitive applications. An application must be favorably reviewed by both levels of the two-tier review system to be funded.

THE FIRST TIER—Scientific Peer Review

Horizon Award applications were peer-reviewed in November 2016 by six panels of researchers, clinicians, and consumer advocates, based on the evaluation criteria specified in the PA.

Online Review Panels

The Horizon Award scientific peer review panel was conducted online. Moderated online discussions took place following individual reviewer score input if there was a discrepancy in the scoring range of more than two adjectival scores (e.g., Outstanding score [1.0–1.5] and Fair [2.6–3.5]).

Application Scoring

Evaluation Criteria Scores: Panel members were asked to rate each peer review evaluation criterion as published in the appropriate PA. A scale of 1 to 10 was used, with 1 representing the lowest merit and 10 the highest merit, using whole numbers only. The main reasons for obtaining the criteria ratings were to (1) place emphasis on the published evaluation criteria and provide guidance to reviewers in determining an appropriate overall score, and (2) provide the applicant, the Programmatic Panel, and the Command with an informed measure of the quality regarding the strengths and weaknesses of each application. The evaluation criteria scores were not averaged or mathematically manipulated in any manner to connect them to the global or percentile scores.

Overall Score: To obtain an overall score, a range of 1.0 to 5.0 was used (1.0 representing the highest merit and 5.0 the lowest merit). Reviewer scoring was permitted in 0.1 increments. Panel member scores were averaged and rounded to arrive at a two-digit number (1.2, 1.9, 2.7, etc.). The following adjectival equivalents were used to guide reviewers: Outstanding (1.0–1.5), Excellent (1.6–2.0), Good (2.1–2.5), Fair (2.6–3.5), and Deficient (3.6–5.0).

Summary Statements: The Scientific Review Officer on each panel was responsible for preparing a Summary Statement reporting the results of the peer review for each application. The Summary Statements included the applicants' abstracts, the evaluation criteria and overall scores, peer reviewers' written comments, and the essence of the panel discussions. This document was used to report the peer review results to the Programmatic Panel. It is the policy

of the USAMRMC to make Summary Statements available to each applicant when the review process has been completed.

THE SECOND TIER—Programmatic Review

Programmatic review was conducted in February 2017 by the FY16 Programmatic Panel, which is comprised of a diverse group of basic and clinical scientists and consumer advocates, each contributing special expertise or interest in cancer research, as well as ad hoc reviewers. Programmatic review is a comparison-based process that considers scientific evaluations across all disciplines and specialty areas. Programmatic Panel members do not automatically recommend funding applications that are highly rated in the technical merit review process; rather, they carefully scrutinize applications to allocate the limited funds available to support each of the award mechanisms as wisely as possible. The programmatic review criteria published in the PAs were as follows: ratings and evaluations of the scientific peer review panels; relative impact; program portfolio composition; and adherence to the intent of the award mechanism. After programmatic review, the Commanding General, USAMRMC, and the Director of the Defense Health Agency Research and Development Directorate approved funding for the applications recommended during the programmatic review.