

March 7, 2017
2:00 PM to 3:00 PM



Conference call # (888) 670-3525
Conference code 5311418626

Biomedical Research Advisory Council
Meeting Minutes

Board Members Present:

Daniel Armstrong (Chair)
Richard Nowakowski (Vice Chair)
Charles Evans Wood
John Wingard
David Decker
Allison Eng-Perez
Stephen Gardell

Board Members not in Attendance:

Susan Vadaparampil
Barbara Centeno
Abubakr Bajwa

Department of Health Staff:

Teresa Mathew, MSW, MPA, Advisory Council Liaison, Biomedical Research Section
Kaitlyn Barningham, MPH Candidate, Biomedical Research Zika Program Specialist

Special Guest:

Janet Kile, Senior Project Management Specialist, Oak Ridge Associated Universities
Rober Angel, Section Manager, Oak Ridge Affiliated Universities

A quorum was present. The meeting was called to order at 2:00 p.m. Board members received all pertinent meeting materials. Board members participated in-person and via conference call and could actively and equally participate in the discussion.

I. Meeting Minute Approval

Dr. Armstrong called for a vote on the prior meeting minutes. Dr. Nowakowski made the motion to approve the January 12, 2017 minutes. Dr. Wood seconded the motion. Total votes for approval: (Total members voting: 7) Affirmative: 7, Negative: 0, Recusal: 0

II. Introductions and Meeting Overview

Dr. Armstrong provided an overview of the changes to the meeting agenda. The focus of the meeting was changed from a discussion of lessons learned during the past funding cycle to center on possible changes to the peer review process. The contract with the peer review vendor will be renewed this fiscal year, and peer review panels will replace the current process of three individual reviews per application. The Department needs the BRAC's input so that any changes to the process reflect the BRAC's wishes.

III. Discussion of Potential Peer Review Models

Janet Kile presented the Council with several review options that would potentially increase the difference in scores for applications that rank closely together. Ms. Kile presented options for changing the reviewer form as well as several potential models for changes to the peer review process. Members discussed the possible pros and cons of each option and had the opportunity to ask Janet for clarification of specific points. Members also received a copy of a sample score report that Janet prepared using the review scores from the FY 2016-2017 funding cycle. This score report showed how the proposal rankings would change if ORAU used the average of all the criteria scores. Because some members were not able to attend this conference call, Dr. Armstrong decided that it would be beneficial to wait to vote on any changes until the Council has received feedback on these options from the members who were absent. For the next conference call, Ms. Kile will take the feedback received during this call and develop detailed outlines of three different peer review models for the BRAC's consideration.

IV. Discussion of Maximum Dollar Amounts Awarded for Each Grant Mechanism

Dr. Nowakowski said that the Discovery Science mechanism could be cut to more closely reflect NIH funding levels. Dr. Wood and Dr. Wingard also expressed support for reducing the maximum award amounts for Clinical Research grants. Members discussed cutting Discovery Science grants to a maximum total award amount of \$900,000 and Clinical Research grants to a maximum award amount of \$1,500,000. Dr. Armstrong suggested that the Research Infrastructure and Bridge grants remain at their current funding levels. Members will vote on this issue at the next meeting. Dr. Nowakowski also suggested including a new category that would be at a smaller award level than the Bridge grant. Department staff will provide a proposal with possible maximum award amounts for the BRAC's consideration. Funding smaller grants would allow for a larger number of grants to be funded during a funding cycle.

V. Cancer Centers of Excellence Update

Dr. Armstrong provided an update on the changes to the Cancer Centers of Excellence designation requirements. CCRAB members made edits to the research requirements for the CCE designation. These requirements were paired down to make it easier community based cancer centers to qualify.

VI. Feedback Regarding the Acceptability of BRAC Members Contacting Members of the Legislature

During the January in-person meeting BRAC members raised the question of whether or not they may contact legislators. The Department's legal counsel stated that as an appointee to an advisory council, BRAC members are public officials. In their role as a public official, BRAC members may not contact members of the legislature. They may do so as private citizens, or the BRAC as a whole could draft a letter for the State Surgeon General to present to the legislature, but individual BRAC members may not contact legislators in their capacity as public officials. Dr. Armstrong asked that this be added to the BRAC policy. Teresa will add this to the policy and send updated copies to all members for their records.

VII. Public Comment

None.

The meeting was adjourned at 3:00 p.m.