Update for Defense Health Board:
“Improving Defense Health Program Medical Research Processes”

6 August 2019

“Medically Ready Force...Ready Medical Force”
In 2016, Acting USD(P&R) tasked the Defense Health Board (DHB) to provide recommendations to optimally support military medical professionals who oversee and conduct Defense Health Program (DHP) medical research. Specifically requested the DHB to:

- Determine the major challenges that DoD investigators face in initiating, funding, attaining approval, conducting, and publishing DHP medical research; and
- Determine cost-effective mechanisms to encourage more professionals to become engaged in research.
Major Changes:
Military Health System and Defense Health Agency

- NDAA 2017, Directs DHA to assume Authority, Direction and Control of MTFs
  - Includes Clinical Investigations Programs (CIP) and the Human Research Protection Programs (HRPP)
- NDAA 2019, Strengthens DHA’s role in the Military Health System
  - Section 711 (e) directs the establishment of new R&D organization within the DHA

“Medically Ready Force...Ready Medical Force”
Defense Health Agency (DHA): Organization Chart

As of March 14, 2019

“Medically Ready Force...Ready Medical Force”
DHA Research & Development (J-9): Organizational Chart

Deputy Assistant Director
Research and Development (J-9)

Deputy Director

Chief of Staff

Business Support Office
Communications
Knowledge Translation

Research Program Administration
National Museum of Health and Medicine
Defense HIV/AIDS Prevention Program
Hearing Center of Excellence
Defense & Veterans Brain Injury Center
Psychological Health Center of Excellence
Vision Center of Excellence

Key
J-9 Senior Leaders
HQ Staff
Research Portfolio Administration
National Museum of Health and Medicine
Defense HIV/AIDS Prevention Program
Centers of Excellence

“Medically Ready Force...Ready Medical Force”
DHA Research & Development (J-9): Current Vision and Mission

**Vision**

Bridging the future of military health and readiness

**Mission**

J-9 leads the discovery, development, and delivery of enhanced pathways to military health and readiness.

"Medically Ready Force...Ready Medical Force"
DHA Research & Development (J-9): Current Divisions

- **Defense HIV/AIDS Prevention Program**: Build capable military partners through military-specific, culturally focused HIV/AIDS cooperation and assistance.

- **Hearing Center of Excellence**: Optimize operational performance, heighten medical readiness, and enhance quality of life through collaborative leadership and advocacy for hearing and balance health initiatives.

- **National Museum of Health and Medicine**: Promote the science and history of military medicine—through innovative exhibits; educational programs; and scientific, historical, and medical research.

- **Psychological Health Center of Excellence**: Improve the lives of our nation’s military beneficiaries by advancing excellence in psychological health care, readiness, and prevention of psychological health disorders.

- **Research Program Administration**: Champion innovative military medical research and development to meet the highest priority needs across the MHS.

- **Defense and Veterans Brain Injury Center**: Promotes innovative care from point of injury to reintegration for Service members, veterans, and their families to prevent and mitigate consequences of mild to severe traumatic brain injury.

- **Vision Center of Excellence**: Addresses the full scope of vision care including prevention, diagnosis, mitigation, treatment, research and rehabilitation of military eye injuries and diseases including visual dysfunctions related to traumatic brain injury (TBI).

**“Medically Ready Force...Ready Medical Force”**
UNCLASSIFIED

Research & Development Reform: Defense Health Agency

- NDAA 2017 & 2019
- Impact of DHB report
  - This report, along with the DHA’s maturation as an organization, has resulted in a series of efforts to institute changes and process improvement.
Concurred or partially concurred with several of the recommendations

Overall, concur the current state for managing and funding DHP should be improved

For findings two and five, and their subsequent recommendations, we provided a non-concur since these actions do not fall under our purview
### Defense Health Board Report: Status of Recommendations

<table>
<thead>
<tr>
<th>RECOMMENDATION</th>
<th>CONCURRENCE</th>
<th>STATUS</th>
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</table>
| DHB 1(a)       | Concur      | • NDAA FY17 Section 702, CIP and HRPP  
                 |             | • NDAA FY19 Section 711 (e), Consolidation of DoD Medical Research  
                 |             | • NDAA FY19 Section 736, Strategic Medical Research Plan |
| DHB 1(b)       | Concur      | • Not completed |
| DHB 1(c)       | Concur      | • NDAA FY19 Section 736, Strategic Medical Research Plan  
                 |             | • Traumatic Brain Injury Strategy Plan  
                 |             | • DHA Research & Development Procedural Instruction |
| DHB 1(d)       | Concur      | • Not completed |
## Defense Health Board Report: Status of Recommendations

### RECOMMENDATION

<table>
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<tr>
<th>RECOMMENDATION</th>
<th>CONCURRENCE</th>
<th>STATUS</th>
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</table>
| DHB 1(e) J-9 ensure all non-classified DHP RDT&E funded research entered into Federal RePORTER. | Concur              | • Enterprise portfolio solution  
• Increased financial visibility  
• Project level information |
| DHB 1(f) J-9 ensure all DHP medical research clinical trials are listed in ClinicalTrials.gov. | Concur              | • Completed                                                      |
| DHB 1(g) J-9 create a database provides visibility of all DHP medical research but, not limited to DHP-funded research, line funded research and other DoD-funded research. | Partially Concur    | • Enterprise portfolio solution  
• Increased financial visibility  
• Project level information  
• Common financial system for DHA & Army |
# Defense Health Board Report: Status of Recommendations

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<tr>
<th>RECOMMENDATION</th>
<th>CONCURRENCE</th>
<th>STATUS</th>
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<tbody>
<tr>
<td>DHB 2(a)</td>
<td>Non-Concur</td>
<td>• No action</td>
</tr>
<tr>
<td>DHB 2(b)</td>
<td>Partially Concur</td>
<td>• No action</td>
</tr>
<tr>
<td>DHB 2(c)</td>
<td>Non-Concur</td>
<td>• No action</td>
</tr>
<tr>
<td>DHB 2(d)</td>
<td>Concur</td>
<td>• NDAA FY17 Section 702, CIP&lt;br&gt;• Evaluating a Regional Model</td>
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## “Medically Ready Force...Ready Medical Force”

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### Defense Health Board Report: Status of Recommendations

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<tr>
<th>RECOMMENDATION</th>
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<th>STATUS</th>
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</table>
| DHB 3(a) | Partially Concur | • NDAA FY17 Section 702, CIP  
• Evaluating a Regional Model |
| DHB 3(b) | Concur | • T2 Office established  
• T2 PI published on 20 JUN 2019. |
| DHB 4(a) | Partially Concur | • NDAA FY17 Section 702, HRRP  
• HRPP transferred to DHA J-9  
• 1 OCT 2019 IOC  
• 1 OCT 2020 FOC |
| DHB 4(b) | Concur | • After all the Service hospital IRBs are transferred to DHA in FY20, DHA will implement plans to establish a single IRB with 4 or 5 regional panels. |
| DHB 4(c) | Partially Concur | • Single IRB to be established NLT 1 OCT 2021 |
## Defense Health Board Report: Status of Recommendations

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<tr>
<td>DHB 4(d)</td>
<td>Partially Concur</td>
<td>• Developing a Component Management Plan</td>
</tr>
<tr>
<td>DHA 4(e)</td>
<td>Concur</td>
<td>• Completed</td>
</tr>
</tbody>
</table>
| DHB 5(a) | Concur | • NDAA FY17 Section 702, CIP  
• Evaluating a Regional Model  
• ASD(HA) should include medical research as part of future strategic plans for MHS |
| DHB 5(b) | Non-Concur | • No action |

**NOT STARTED**

**POTENTIAL RISKS**

**ON TRACK/COMPLETE**
## Defense Health Board Report: Status of Recommendations

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<tbody>
<tr>
<td>DHB 5(c)</td>
<td>Non-Concur</td>
<td>• No action</td>
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<tr>
<td></td>
<td></td>
<td>DoD pursue the authority to provide pay incentives for civilian health professionals engages in military medical research.</td>
</tr>
<tr>
<td>DHB 6(a)</td>
<td>Concur</td>
<td>• Not completed</td>
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<td></td>
<td></td>
<td>DoD ensure broad distribution of the biennial report discussed in Recommendation 1(b).</td>
</tr>
<tr>
<td>DHB 6(b)</td>
<td>Concur</td>
<td>• A section was added to MHSRS</td>
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<td></td>
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<td>• Public Affairs staff involved in the MHSRS</td>
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<tr>
<td></td>
<td></td>
<td>and in web-publishing of recent accomplishments.</td>
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<tr>
<td>DHB 6(c)</td>
<td>Partially Concur</td>
<td>• Ongoing</td>
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<td></td>
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<td>DoD allow, encourage, and fund investigators to present at meetings.</td>
</tr>
<tr>
<td>DHB 6(d)</td>
<td>Partially Concur</td>
<td>• J-9 includes language in the DHP RDT&amp;E</td>
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<td></td>
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<td>granting and contracting language</td>
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<td>DoD indicate investigators expected to publish their findings.</td>
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</table>
DHA J-9 will proceed to implement changes, as necessary, to improve the DHP medical research and CIP.

DHA J-9 continues to look ahead for additional opportunities to improve the operation of the DoD Medical R&D enterprise during this time of reform.
QUESTIONS?

“Medically Ready Force...Ready Medical Force”