Developing the FY 2021-2025 NIH-Wide Strategic Plan

JAMES M. ANDERSON, MD PHD

DIRECTOR, DPCPSI

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NIH National Institutes of Health
Division of Program Coordination, Planning, and Strategic Initiatives

Time to Update the NIH-Wide Strategic Plan

NIH-Wide Strategic Plan

Fiscal Years 2016-2020

Turning Discovery Into Health

21ˢᵗ Century Cures Act

➢ **P.L. 114-255**
  - Signed into law Dec 13, 2016

➢ **Requirements**
  - NIH-Wide Strategic Plan to be developed a minimum of every 6 years
  - IC strategic plans to be informed by the NIH-Wide Strategic Plan
  - Use of a Common Template to harmonize strategic plans across NIH
  - Others

Goals of the FY 2021-2025 NIH-Wide Strategic Plan

The Plan **WILL**:

➤ Clearly articulate the highest priorities of the NIH overall

➤ Describe how the NIH will achieve the highest priorities

➤ Represent an update on the last Plan – including accomplishments under last plan and new initiatives across NIH

The Plan **WILL NOT**:

➤ Describe all the many important things that NIH does and will do in the future

➤ Address priorities of the individual Institutes, Centers, and Offices (ICOs) since each of the ICOs has their own strategic plan

➤ Be a complete overhaul of the last Plan

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Process and Timeline for Development of FY 2021-2025 NIH-Wide Strategic Plan

Sep. – Dec. 2019

Phase 1: NIH Input & Develop Strategic Plan Outline

Dec. 2019 – May 2020

Phase 2: Public Input & Draft Strategic Plan

June – Nov. 2020

Phase 3: Approval Process (including return to the ACD)

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FY 2016-2020 NIH-Wide Strategic Plan Outline

➤ **Overview**

➤ **NIH's Strategy**

- **Objective 1**: Advance Opportunities in Biomedical Research
  - *Fundamental Science*
  - *Treatments and Cures*
  - *Health Promotion and Disease Prevention*
- **Objective 2**: Foster Innovation by Setting Priorities
- **Objective 3**: Enhance Scientific Stewardship
- **Objective 4**: Excel as a Federal Science Agency by Managing for Results

➤ **A Few Bold Predictions for America's Future**

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FY 2021-2025 NIH-Wide Strategic Plan Outline

➢ **Overview**

➢ **NIH's Strategy**
- **Objective 1**: Advancing Biomedical and Behavioral Sciences
- **Objective 2**: Developing, Maintaining, and Renewing Scientific Research Capacity
- **Objective 3**: Exemplifying and Promoting the Highest Level of Scientific Integrity, Public Accountability, and Social Responsibility in the Conduct of Science

➢ **A Few Bold Predictions for America's Future**

➢ **Appendix**
- Common Fund Strategic Priorities

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Objective 1: Advancing Biomedical and Behavioral Sciences

Driving Foundational Science	Preventing Disease and Promoting Health	Developing Treatments, Interventions, and Cures
➤ Basic research	➤ Translational research	➤ Translational research
➤ Animal models	➤ Clinical research	➤ Clinical research
➤ Population science/ Epidemiology	➤ Implementation/ Dissemination research	➤ Implementation/ Dissemination research
	➤ Population Science/ Epidemiology	➤ Population Science/ Epidemiology

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Objective 2: Developing, Maintaining, and Renewing Scientific Research Capacity

Cultivating the Biomedical Research Workforce

➢ Overarching goals of training and career development programs

➢ Examples

- ▪ Diversity programs
- ▪ Clinician-Scientist Training Programs

Supporting Research Resources and Infrastructure

➢ Overarching goals of research resources and infrastructure support activities

➢ Examples

- ▪ Comprehensive Cancer Centers
- ▪ Data sharing platforms

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Objective 3: Exemplifying and Promoting the Highest Level of Scientific Integrity, Public Accountability, and Social Responsibility in the Conduct of Science

Fostering a Culture of Good Scientific Stewardship
- Setting priorities
- Monitoring progress
- Others

Leveraging Partnerships
- Universities and research institutions
- Public engagement
- Others

Ensuring Accountability and Confidence in Biomedical and Behavioral Sciences
- Ethical and equitable conduct of research
- Enhancing workforce
- Others

Optimizing Operations
- Increasing efficiency and effectiveness
- Improving NIH operations, business processes and coordination
- Others

Overview: Cross Cutting Themes

- ➤ Increasing/Enhancing Diversity

- ➤ Optimizing Data Science

- ➤ Promoting Collaborative Science

- ➤ Addressing Public Health Challenges Across the Lifespan

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FY 2016 – 2020 Bold Predictions

➢A candidate vaccine that induces a broad antibody-binding response to multiple strains of the influenza virus will be in clinical trials—a critical step towards a universal flu vaccine.

- 4 candidate vaccines in different stages of clinical trials
- 1 manuscript in preparation and results from 2 studies expected in 2020

➢Application of certain mobile health (mHealth) technologies will provide rigorous evidence for their use in enhancing health promotion and disease prevention.

- Five mHealth technologies are beneficial in screening for anemia, developmental delays, cervical cancer, and depression

FY 2016 – 2020 Bold Predictions

➢ Radical new methods for structural biology will revolutionize drug screening and optimization.

- Cryo-EM enabled understanding of the structure of proteins that are attractive targets for drug development in glioblastoma and other cancers
- Cryo-EM also elucidated the structural basis of the mechanism of action of a drug (ISRIB, an eIF2B activator) that has relevance in brain injury

➢ NIH-supported research will directly contribute to FDA-approved therapies for at least a dozen rare diseases.

- FDA approved therapies for at least 8 rare diseases with NIH support through basic and translational research, partnerships to accelerate approvals, and clinical research consortia

FY 2016 – 2020 Bold Predictions

➢ NIH-supported research will develop effective, tailored behavioral and social interventions to promote health and prevent illness in populations that experience health disparities.

- Created research framework to guide researchers and developed NIH Minority Health and Health Disparities Strategic Plan with focus on interventions
- Implemented 6 behavioral and social interventions in populations that experience health disparities

➢ NIH-supported clinical trials will show that at least a half-dozen interventions thought to be clinically beneficial actually have no value.

- Comparison studies showed that 6 interventions in different healthcare environments (such as hospital care and home care) and across the healthcare spectrum (from preventive care to treatments) are ineffective as compared to controls

Thank you