

**US ARMY MEDICAL RESEARCH AND DEVELOPMENT COMMAND (USAMRDC)
CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)
FISCAL YEAR 2022 (FY22) PROSTATE CANCER RESEARCH PROGRAM (PCRP)**

DESCRIPTION OF REVIEW PROCEDURES

The programmatic strategy implemented by the FY22 PCRP called for applications in response to program announcements (PAs) for three award mechanisms released in April 2022:

- Health Disparity Research Award (HDRA)
- Translational Science Award (TSA)
- Data Science Award (DSA)

For the HDRA, TSA, and DSA, Principal Investigators (PIs) were asked to submit a letter of intent to submit a full application. Applications were received for these three PAs in August 2022 and peer reviewed in November 2022. Programmatic review was conducted in January 2023.

In response to the HDRA PA, 40 compliant applications were received and 7 (17.5%) were recommended for funding for a total of \$9.4 million (M).

In response to the TSA PA, 38 compliant applications representing 54 potential awards were received and 8 (representing 10 awards, 21.1%) were recommended for funding for a total of \$11.2M.

In response to the DSA PA, 26 compliant applications representing 43 potential awards were received and 3 (representing 6 awards, 11.5%) were recommended for funding for a total of \$5.0M.

Submission and award data for the FY22 PCRP are summarized in the table(s) below.

Table 1. Submission/Award Data for the FY22 PCRP*

Award Mechanism	Compliant Applications	Applications Recommended for Funding (%)	Recommended Budget
HDRA	40	7 (17.5%)	\$9.4M
TSA [†]	38	8 (21.1%)	\$11.2M
DSA [‡]	26	3 (11.5%)	\$5.0M
Total	104	18 (17.3%)	\$25.6M

*These data reflect funding recommendations only. Pending FY22 award negotiations, final numbers will be available after September 30, 2023.

[†]38 applications representing 54 potential awards; 8 applications recommended for funding representing 10 awards.

[‡]26 applications representing 43 potential awards; 3 applications recommended for funding representing 6 awards.

THE TWO-TIER REVIEW SYSTEM

The USAMRDC developed a review model based on recommendations of the 1993 Institute of Medicine (IOM) (now called the National Academy of Medicine) 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

HDRA, TSA, and DSA applications were peer reviewed in November 2022 by seven panel(s) of researchers, clinicians, biostatisticians, and consumer advocates based on the evaluation criteria specified in the PAs.

Peer review was conducted via teleconference for the HDRA by three panels, for the TSA by two, and for the DSA by two panels. Each peer review panel included a Chair, an average of 6 scientific reviewers, an average of 2 biostatisticians, an average of 2 consumer reviewers, and a nonvoting Scientific Review Officer. The primary responsibility of the panelists was to review the technical merit of each application based on the evaluation criteria specified in the relevant PA.

Individual Peer Review Panels

The Chair for each panel presided over the deliberations. Applications were discussed individually. The Chair called on the assigned reviewers for an assessment of the merits of each application using the evaluation criteria published in the appropriate PA. Following a panel discussion, the Chair summarized the strengths and weaknesses of each application, and the panel members then rated the applications confidentially.

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 evaluation criteria and overall scores, peer reviewers' written comments, and 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 USAMRDC 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 January 2023 by the FY22 Programmatic Panel, which is comprised of a diverse group of basic and clinical scientists and consumer advocates, each contributing special expertise or interest in prostate cancer. 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 were 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; adherence to the intent of the award mechanism; program portfolio composition; programmatic relevance to FY22 PCRP Overarching Challenges; and relative impact. After programmatic review, the applications recommended for funding were sent to the Commanding General, USAMRDC, for approval.