## National Advisory Research Resources Council Letter to the NIH Scientific Management Review Board

30 November 2010

Mr. Norman Augustine Chair, Scientific Management Review Board, OD, NIH Building 1, Room 103 9000 Rockville Pike Bethesda, MD 20892

Francis S. Collins, M.D., Ph.D. Office of the Director, NIH Building 1 9000 Rockville Pike Bethesda, MD 20892 National Institutes of Health

RE: NARRC response to TMAT recommendations to SMRB

Dear Mr. Augustine and Dr. Collins,

We are writing on behalf of the National Advisory Research Resources Council (NARRC), an independent advisory body for the National Center for Research Resources (NCRR), with members appointed by the Secretary of HHS (<u>http://www.ncrr.nih.gov/about\_us/advisory\_council/roster.asp</u>). The NARRC has a clear understanding of the NCRR portfolio, and we have now reviewed the recent (11/10/2010) recommendations of the SMRB's Translational Medicine and Therapeutics (TMAT) working group. The primary TMAT recommendation, to be presented to the SMRB at its upcoming meeting (12/7/2010), is creation of a new NIH IC for Translational Medicine and Therapeutics. The principal component of the new IC would be the NCRR's Clinical and Translational Science Awards (CTSAs), initiated by the NCRR in 2006 (FY2010 \$464.8M). The continuation or dissolution of the NCRR itself is not clearly addressed, leaving open many related questions concerning possible elimination or reassignment of other programs in the current NCRR portfolio.

The mission of the NCRR is unique at the NIH, providing flexibility and independence not easily available in categorical ICs. Aside from clinical projects such as CTSAs, NCRR divisions include: Research Infrastructure (\$306.3M); Comparative Medicine (\$196.9M); Biomedical Technology (FY2010 \$181M); Small Business Grants (\$33.6M); and Science Education Partnership Awards (\$18.6M). The combined non-CTSA NCRR budget thus amounts to roughly \$736M, larger than the budgets for half of the other NIH ICs. Furthermore, the NCRR is uniquely responsible for funding and managing extramural construction, currently more than \$1B.

In view of these issues, the NARRC strongly urges the SMRB and Office of the Director to delay any decisions based on TMAT recommendations that affect NCRR programs. Possible changes to existing NCRR programs must involve further open discussion with the scientific community, as well as the other NIH ICs. Strong consideration should be given to continuation of the NCRR as a free standing center. Regardless, additional discussion is essential for deliberate and transparent consideration of the NCRR and all components of its existing portfolio.

Sincerely, Members of the NARRC,

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## **Signatories**

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cc: Barbara M. Alving, MD, Director, NCRR