

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
NATIONAL INSTITUTES OF HEALTH  
NATIONAL CANCER INSTITUTE**

**SPECIAL MEETING  
*of the*  
NATIONAL CANCER ADVISORY BOARD**

**Summary of Meeting  
27 March 2023**

**Virtual Meeting  
National Cancer Institute  
National Institutes of Health  
Bethesda, Maryland**

**NATIONAL CANCER ADVISORY BOARD SPECIAL MEETING  
BETHESDA, MARYLAND  
Summary of Meeting  
27 March 2023**

The National Cancer Advisory Board (NCAB) convened for a Virtual Special Meeting on 27 March 2023. The meeting was closed to the public on Tuesday, 27 March 2023 from 1:00 p.m. to 1:30 p.m. and open to the public from 1:45 p.m. to 2:15 p.m. The NCAB Chair, Dr. John D. Carpten, Professor and Chair, Department of Translational Genomics, Royce and Mary Trotter Chair in Cancer Research, Keck School of Medicine, University of Southern California, presided during both the open and closed sessions.

**NCAB Members**

Dr. John D. Carpten (Chair)  
Dr. Francis Ali-Osman  
Dr. Nilofer S. Azad (absent)  
Dr. Anna D. Barker  
Dr. Luis Alberto Diaz, Jr. (absent)  
Dr. Howard J. Fingert  
Dr. Christopher R. Friese  
Mr. Lawrence O. Gostin (absent)  
Dr. Andrea A. Hayes Dixon  
Dr. Amy B. Heimberger  
Dr. Scott W. Hiebert  
Dr. Nikan Khatibi  
Dr. Electra D. Paskett (absent)  
Dr. Nancy J. Raab-Traub  
Dr. Margaret R. Spitz  
Dr. Susan Thomas Vadaparampil (absent)  
Dr. Ashani T. Weeraratna  
Dr. Karen M. Winkfield

**President's Cancer Panel**

Dr. Elizabeth M. Jaffee (Chair)  
Dr. Mitchel S. Berger (absent)  
Dr. Carol L. Brown (absent)

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**TUESDAY, 27 MARCH 2023**

**I. NATIONAL CANCER ADVISORY BOARD (NCAB) CLOSED SESSION—DR. JOHN D. CARPTEN**

*This portion of the meeting was closed to the public in accordance with the determination that it was concerned with matters exempt from mandatory disclosure under section 552b(c)(6), Title 5 U.S.C., and section 1009(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. §§ 1001-1014).*

*There was a review of ongoing intramural research efforts and a discussion of personnel and proprietary issues. Members absented themselves from the meeting during discussions for which there was potential conflict of interest, real or apparent.*

**II. ADJOURNMENT OF CLOSED SESSION —DR. JOHN D. CARPTEN**

Dr. John D. Carpten adjourned the NCAB Closed Session at 1:30 p.m.

**TUESDAY, 27 MARCH 2023**

**NATIONAL CANCER ADVISORY BOARD (NCAB) OPEN SESSION**

**III. CALL TO ORDER AND OPENING REMARKS—DR. JOHN D. CARPTEN**

Dr. Carpten called to order the Virtual Special NCAB meeting. He welcomed members of the Board, Chair of the President’s Cancer Panel, staff, and guests. Members of the public were welcomed and invited to submit to Dr. Paulette S. Gray, Director, Division of Extramural Activities (DEA), National Cancer Institute (NCI), in writing and within 10 days, any comments regarding items discussed during the meeting. Dr. Carpten reviewed the confidentiality and conflict-of-interest practices required of Board members in their deliberations.

**IV. NCI DIRECTOR’S REPORT: OVERVIEW OF THE NATIONAL CANCER PLAN (NCP)—DR. MONICA M. BERTAGNOLLI**

Dr. Monica M. Bertagnolli, Director, NCI, welcomed NCAB members and attendees to the special meeting and provided an overview of the National Cancer Plan (NCP, the Plan) and how the public can engage and participate. She acknowledged Dr. Elizabeth Jaffee, The Dana and Albert “Cubby” Broccoli Professor of Oncology, Deputy Director, Sidney Kimmel Cancer Center, Co-Director, Gastrointestinal Cancers Program, Johns Hopkins University, and Chair of the President’s Cancer Panel, who along with the other Panel members will be partnering with the NCI for future execution of the NCP.

Dr. Bertagnolli noted that the purpose of this meeting is to discuss the new Plan and to obtain the NCAB’s recommendation in preparation for its public release. The NCAB plays an important role providing objective and expert advice to the NCI on its scientific priorities, programs, and research, and the NCI is looking forward to the Board’s valuable input on the Plan. Dr. Bertagnolli explained that President Joseph R. Biden has signaled his intent to “go big” and aim high for cancer progress and has announced an all-of-government and all-of-society approach to working together to end cancer as we know it for all people. To achieve these goals, the NCI developed the Plan to build on its response to the National Cancer Act of 1971, which charged the NCI Director to plan and develop a National Cancer Program. The Program includes the NCI, other research institutes, and other federal and nonfederal programs.

The Plan is the culmination NCI's work over the past several months to gather input from researchers within and outside the NCI, NIH, and U.S. Department of Health and Human Services. The aim is to contemplate what ultimately needs to be accomplished to achieve President Biden's goals. The Plan provides a framework for opening a new national conversation about how to achieve shared goals. The NCI envisions the Plan to be a living document that will be revised over time as new opportunities and needs arise. Dr. Bertagnolli noted that the hope is that once the Plan is launched, people across society will participate and contribute to it. This cooperation is expected to reveal how the Plan should evolve.

The NCP provides a long-term vision that will align broad societal engagement and focus on critical needs to achieve the fastest possible results to help people live full and active lives free from cancer's harmful effects. This encompasses everyone with cancer and every type of cancer. The Plan outlines opportunities and realities existing today across all of cancer research and care. An aim is to complete the "last mile," intervening in ways that have the potential to make life better for all people, thus achieving the widespread adoption and implementation that allows benefits to be realized. The Plan embraces the idea that everyone has a role to play in completing this last mile and crossing the finish line. No one organization can accomplish these goals alone. Achieving the fastest possible results that benefit all people will require the whole of government and beyond, federal agencies, industry, academia, advocacy groups, nonprofit foundations, caregivers, patients, family members, and friends, to support the goals of the Plan.

NCI's intent is that any organization or person who reviews the Plan will understand where they fit as a contributor to progress. The Plan was designed to engage people at the individual level so that they can better understand the overall goals and how these goals will benefit them and their loved ones, as well as what actions they can take to contribute. The Plan will help all society to see the full range of what is necessary and to strategize and work together to accelerate progress. Through the Plan's framework for collaboration, the NCI and its partners will be able to coordinate activities that touch people's lives and influence their cancer health outcomes. The Plan also provides a platform for guiding policy discussions and developments that are directed toward health and well-being and are critical to progress.

The Plan has eight major goals, which Dr. Bertagnolli summarized.

- Prevent Cancer
- Detect Cancers Early
- Develop Effective Treatments
- Eliminate Inequities
- Deliver Optimal Care
- Engage Every Person
- Maximize Data Utility
- Optimize the Workforce

Each goal describes what success is envisioned, that is, what must be done to achieve the President's call to end cancer as we know it and addresses the most significant challenges, including health inequities and empowering and engaging a more diverse workforce. Each goal provides a targeted description of the NCI's contribution to the success of that goal, as well as strategies and a societal call to action.

**Public Engagement and Participation in the NCP.** Dr. Bertagnolli next described what the NCI wants people throughout society to do with the Plan in the coming months and years, across national, state, community, and individual levels. The cancer community is being asked to help champion the Plan to increase awareness across all levels so that it becomes part of decision-making. Many efforts to address cancer are ongoing, but some of these efforts occur in silos and could achieve greater impact if this were

not the case. The Plan is a call to action to better understand their connections and align efforts both within and between levels.

The Plan and its benefits must reach the community, as well as the individual, with special attention to underserved communities (e.g., rural areas, Tribal nations, inner cities). For a variety of scientific and societal reasons, many barriers still persist in care. The NCP is designed to provide the necessary framework to overcome these barriers, allowing the NCI and its partners to better serve all populations. The NCI will need to understand what its partners, especially at the individual and community levels, are contributing to the progress of the Plan and know where the nation is succeeding and where adjustments must be made, as well as actions that must be taken to close gaps. The President's Cancer Panel (PCP), chaired by Dr. Jaffee, will assist the NCI in achieving these goals. In general, the Panel's role is to monitor the National Cancer Program's progress and identify barriers to that progress. The NCI encourages everyone from all areas of society to embrace this bold call for action and contribute the best that they can.

**Launch and Outreach Timeline.** Dr. Bertagnolli reviewed the launch and outreach timeline that will occur over the next few weeks and coming months. Soon, the NCI will release the Plan to the public - outreach will include emails, a new NCP website, and social media promotion, all aimed at soliciting the public's response to the Plan. Over time, the NCI will build in additional outreach activities with specific steps that the community can pursue. When the NCP has been released, the NCI will offer a number of ways that the public can be involved online and will encourage everyone to read the Plan, follow the taglines @theNCI and @NCIDirector on social media, and subscribe to email updates. Immediately after the public launch, the NCI will move to the execution phase of the Plan.

Dr. Bertagnolli closed her report by noting that progress in cancer research and treatment is still very far from where it needs to be for the people who are counting on the NCI and its partners. She expressed her excitement about the steps being taken to lead and align the broad cancer community in achieving the end of cancer as we know it. The NCP provides a framework for what needs to be done, with everyone working together across all of society, to reach the ultimate goal of ending cancer for all people.

## Questions and Answers

The NCAB members commended the NCI for developing the NCP as a living document and a Plan that can be updated over time.

NCAB Chair Dr. Carpten asked about next steps to incorporate more details on the role of basic science. Dr. Bertagnolli commented that basic science is the engine that provides new discoveries, which then need to be advanced to benefit the people. By design, each goal emphasizes the need for fundamental science. The execution phase of the Plan will provide an opportunity for input on this topic from the broader scientific community.

Dr. Anna D. Barker, Chief Strategy Officer, Ellison Institute for Transformative Medicine, University of Southern California, noted the need to prioritize across the eight goals what the cancer research community can do with a sense of urgency that makes a difference for patients. Dr. Bertagnolli noted two activities that will occur in the Plan's execution phase: (1) identifying how to engage the people who need to be involved, from basic science to cancer care delivery, and (2) strategizing where the NCI will focus to achieve these goals. The activities of the NCP align with and will leverage those of the Cancer Moonshot<sup>SM</sup>, which is a resource for reviewing cancer research priorities.

Dr. Karen M. Winkfield, Executive Director, Meharry-Vanderbilt Alliance, Ingram Professor of Cancer Research, Professor of Radiation Oncology, Vanderbilt University School of Medicine, agreed with the critical need to recognize that ending cancer for all people is a societal issue. She commented

that cancer will quickly become the leading cause of death in the United States and that researchers, care deliverers, providers, insurers, pharmaceutical companies, and other stakeholders have the opportunity to be engaged in this Plan. Dr. Winkfield hopes that communities, individuals, and families will take advantage of the open comment platform to convey to the NCI what they need to become part of this initiative. She emphasized that the Plan engages individual stakeholders, solicits ideas on ways to support communities, and focuses on policy and what would be implementable at the state, institutional, and national levels.

Dr. Francis Ali-Osman, Margaret Harris and David Silverman Distinguished Professor of Neuro-Oncology, Professor Emeritus of Neurosurgery, Duke University Medical Center, asked about the impact of the Plan on how the NCI currently conducts business. Dr. Bertagnolli noted two critical priorities that are the core of NCI's NCP: (1) research that reaches everyone and (2) strategies, approaches, and treatments that benefit people. The NCI will be ensuring that everyone has the opportunity to participate and that all people receive the benefits of the research.

**V. ONGOING AND NEW BUSINESS—DR. JOHN D. CARPTEN**

**NCAB's Consideration of the NCP.** Dr. Carpten noted the next order of business is for the Board to vote on the NCI National Cancer Plan, of which a detailed report was provided in the Board materials.

**Motion.** A motion to accept the NCI National Cancer Plan was approved unanimously.

**Other Business.** Dr. Carpten reminded the Board that, as Special Government Employees, if contacted by anyone asking for comments on the President's budget or this Plan, Board members should not participate or answer questions as an NCAB member. As far as participating or answering as a private citizen, to preclude members from being placed in a precarious situation, he suggested contacting Dr. Gray, or the NCI Ethics Office for advice before answering any questions related to these discussions.

Dr. Gray confirmed that the next NCAB meeting will be a joint meeting with the Board of Scientific Advisors (BSA), scheduled for 13–15 June 2023. Members were informed that the meeting will be held in person with remote participation available.

**Future Agenda Items:** Dr. Christopher R. Friese, Elizabeth Tone Hosmer Professor of Nursing, Director, Center for Improving Patient and Population Sciences, Associate Director for Cancer Control and Population Sciences, University of Michigan Rogel Cancer Center, University of Michigan, requested a presentation on the evaluation of the impact of the NCI National Cancer Plan on cancer research.

The NCAB members were asked to forward any further suggestions for potential future agenda items to Drs. Carpten and Gray.

**VI. ADJOURNMENT OF OPEN SESSION —DR. JOHN D. CARPTEN**

Dr. Carpten thanked all the Board members, as well as the visitors and observers, for attending. There being no further business, the virtual special meeting of the NCAB was adjourned at 2:15 p.m. on Tuesday, 27 March 2023.

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Date

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John D. Carpten, Ph.D., Chair, NCAB

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Date

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Paulette S. Gray, Ph.D., Executive Secretary