

School of Medicine Research Coordinating Council (RCC)

Minutes for Monday, December 19, 2005

10:15 am-12:15 pm, 251 BRB II/III

Present: Gaulton, Strom, Kaestner, Lazar, Metlay, Rader, Sehgal, Gur, Schnall, Winston, Johnson, Gocke

Absent: Drebin, Simon

Agenda

1. Review and Discussion of Existing Research Strategic Plan
2. Presentation by Dr. Garret FitzGerald--Update and Vision for the ITMAT

Review and Discussion of Existing Research Strategic Plan

Dr. Gaulton introduced Dr. Philip Johnson and welcomed him as a new member of the RCC. Dr. Gaulton noted that the RCC web site is live, and includes information regarding RCC members, agenda and minutes for RCC meetings. Also noted was the distribution of a faculty announcement to all SOM faculty describing the reconstitution of the RCC, and ways to contact RCC members with questions, comments, and concerns.

Drs. Strom and Gaulton began the review of the existing research Strategic Plan for the School of Medicine. Beginning on page 18 of the Strategic Plan, RCC members discussed the responses of faculty identifying primary research interests; Penn Medicine's current (2002) leading research areas; and emerging research areas. RCC members questioned what faculty were really saying at that time about emerging research areas, and questioned the way the question was asked and how the responses were measured. Several RCC members asked what people outside Penn thought were Penn's research strengths. Dr. Strom noted that the former RCC specifically targeted these questions to the existing faculty to maximize inclusion in the strategic planning process. The questions were asked in a manner to be as open-ended as possible, rather than forcing a structure onto the answers. In discussing how to proceed when identifying research strengths, several members questioned whether Penn should increase its current research strengths, develop emerging research, or utilize a combination of approaches, and in the process, face a possible dilution of research strength in specific areas. For example, on page 26, there was considered to be a gap in stem cell research between current leading Penn research areas and emerging future areas, i.e., an area considered to be important, but few Penn faculty conducting this research. Page 27 provided data in areas where Penn was already considered to be well-represented. The review of the Strategic Plan will continue at the next meeting.

Prior to Dr. Garret FitzGerald's presentation regarding the update and vision for the ITMAT, the RCC members reviewed pages 89-99 of the research strategic plan focusing on a broad definition of clinical research (page 90). It was stated that Penn Medicine can now claim a huge strength in patient data, noting over 5 million patient visits within HUP, CHOP, and the VA Hospital. Dr. Strom will provide an overview of Biomedical Informatics at a subsequent meeting.

Dr. Winston noted her concern regarding a weakness in making new research findings immediately available to clinicians. She also noted the need for qualitative research strength, e.g., the need for patients and clinicians to discuss what it is like to have diabetes, and how to market specific types of care.

The question of research strategic planning, and who directs this planning, was discussed further. Was and/or should the research planning and vision be driven by the Dean or by the faculty? When reviewing the recommendations listed on pages 95-97, it was noted that many of these

initiatives had either been completed or were progressing well since the strategic plan. Discussion continued regarding how to improve support for clinical research faculty to promote outstanding research and create new knowledge.

Presentation by Dr. Garret FitzGerald--Update and Vision for the ITMAT

Dr. Garret FitzGerald presented an update on the Institute for Translational Medicine and Therapeutics (ITMAT), and an overview of the ITMAT web site. (Slides are attached). He noted that the ITMAT objectives included increasing the number of researchers who operate in the translational space by direct and aided recruitment and by education, and to diminish the hurdles faced by researchers operating in the translational space. Dr. FitzGerald noted that the ITMAT's intent is to be seen as a catalyst for promoting and encouraging inter-disciplinary research. The ITMAT operates outside of a specific disease or discipline, and will not duplicate or conflict with other centers or institutes. Rather the ITMAT will utilize disease-based themes, in concert with other Center/Institutes, to coalesce basic and clinical researchers. Multiple suggestions for growing this space (such as in autism, diabetes ...) were provided by the Committee.

Dr. FitzGerald noted that the ITMAT space (1 floor in BRB, formerly CET space) has been critically important to this institute, as it helped build the culture that has defined the programmatic initiatives, and has helped to foster recruitment and retention.

Dr. FitzGerald stated that the ITMAT has created an "affiliates program", which has also been developed at MIT, generating translational research relationships between Penn and regional and national industry. Although additional wet bench space was not provided in creation of the ITMAT, an increase in space for the GCRC (in HUP and at Presbyterian Medical Center) and dry space for POR in Maloney has been allocated. Additional wet-bench space to house an increased number of "role models" in translational science (a la the CEEB model) will be provided when the new research building opens.

Finally, Dr. FitzGerald also noted that the ITMAT was well-positioned in relation to the upcoming CTSA application, as the ITMAT has already addressed some of the significant submission hurdles.

The RCC discussion regarding the ITMAT will be placed on January's agenda.

Respectfully submitted,

Joan Gocke

The next RCC meeting will be held on Thursday, January 12, 2006 in 301 BRB II/III from 7:30am-9:00 am.