

MINUTES

Research Strategic Advisory Council

Thursday, October 9, 2014

3:00pm – 4:00pm

AAB 302, President's Conference Room

Members Present: Andrea Giuffrida, Michael Beckstead, Carrie Jo Braden, Robert Clark, Christopher Green, Erzsebet Kokovay, Paula Shireman, Rajeshwar Tekmal, Paul Fitzpatrick, Ian Thompson and Kyumin Whang

Members Absent: Reto Asmis, Thomas Oates, Alexander Pertsemidid, and Maureen Simmonds

A Research Strategic Advisory Council (RSAC) weblink has been created. This includes a brief description of the Advisory Council, the Council roster and meeting minutes, which will be posted upon completion after each meeting. On 9/25/14, an email announcement was sent to all the HSC researchers providing the weblink and general information about RSAC. A RSAC data repository has been also created and folder access is available to the committee members.

Overview of Strategic Plans across schools

Dr. Giuffrida stated that the goal for today's meeting is to identify the research strengths of the Institution and analyze the individual research strategies/goals across the HSC Schools as well as the research dollars brought in. The Institutional Strategic Research Plan identifies the following areas as strengths: *adult/children cancer, aging, diabetes, health disparities, and neurosciences*. New areas of significant research strengths include *early cognitive development, obesity and nutrition, stem cells, women's/children health and others*. The Plan recommends to enhance medical bioinformatics, as well as leverage collaborations within the HSC and across the UT System.

Under the School of Medicine Strategic Research Plan, research themes included: *reduce health disparities, promote transdisciplinary science* and collaborate with community, academic, and biotechnology partners. Dr. Shireman noted that additional areas of strengths included in the plan are *cancer, neuroscience, aging from conception to end of life, diabetes, metabolomics, and military health*.

The Dental School Strategic Research Plan stressed the importance of *building a prominent new clinical research unit*.

Under the School of Nursing Strategic Research Plan, strengths/themes included: *neurosciences, metabolic diseases, aging, cancer, health care delivery, women and children health promotion and bioinformatics*. Additional themes were: *maximize and establish collaborations from the HSC and UT System in various areas such as aging, health sciences research, clinical safety and effectiveness research*.

The School of Health Professions Strategic Research Plan focused on *identifying and prioritizing key research initiatives as well as enhancing research collaborations*.

The Office of the Vice President for Research Plan included: *aging, neurosciences, develop the IIMS and CTSA, enhance research strengths aligned with regional healthcare problems; enhance medial informatics/bioinformatics as well as increase collaboration with in the HSC and across the UT System*.

The research strengths/themes that are common to all strategic plans include: *neuroscience, cancer, aging, diabetes/metabolic disorders and health disparities*. The council also suggested including *military health*. Emerging areas - which are not receiving significant funding at this time - include *Medical informatics/bioinformatics, Patient-Centered Outcome Research, Health Care Research and Quality, Stem Cells/Regenerative Medicine, and Women's health*. Dr. Giuffrida defined the goals of PCORI, which is

helping people make informed healthcare decisions, and improving healthcare delivery/outcomes by producing and promoting evidence-based information coming from research guided by patients, caregivers, and the broader healthcare community. Dr. Shireman noted that the HSC has 2 primary PCORI grants (PIs: Dr. Barbara Turner and Dr. Dawn Velligan) and 1 flow-through (Greater Plains Collaborative, which is housed at the University of Kansas Medical Center and the HSC is one of the sites). Dr. Giuffrida added that the use of *mixed methods* is becoming increasingly popular in nursing and healthcare research.

Dr. Fitzpatrick noted that the HSC research strengths should not be restricted to neuroscience, cancer, aging and diabetes, and that the institution should invest in infrastructure and common research methods (i.e., imaging, x-ray crystallography, etc) that cut across multiple disciplines, such as bioinformatics, military health, women's health, neuroscience, etc.

As requested by RSAC Committee at the previous council meeting, Chris Green provided data on the HSC's funding by NIH Institutes. Dr. Giuffrida reviewed the alignment of the HSC's NIH funding with the defined research strengths. As expected, the committee found that research in Aging, Cancer, Drug Abuse, Diabetes, Digestive/Kidney diseases, Mental Health/Neurology/Neuroscience bring in most of the NIH dollars at HSC. Other areas receiving significant funding (\$ 4-6M) include *Allergies/Infectious diseases* and *Translational Science* (CTSA), which therefore should be also considered "areas of research strengths".

Dr. Whang asked if "research strength" is defined based on the funding brought into the HSC or on the national/international recognition that the institution has in that specific area. Dr. Giuffrida confirmed that the areas of research strength identified in the institutional research plan bring in the largest amount of dollars; nevertheless, there are other components that play a role, including national recognition, emerging areas/new trends, as well as areas of great potentials given our demographics (i.e., health disparities, military health).

So far, only the Medical and Dental Schools have received funding from the DoD. DoD-funded research areas include: *PTSD, Trauma, Microbiology/Parasitology, Cancer, and Immunology*. The council noted that DoD funding has remained stable for the Medical School (around \$10M) but has declined for the Dental School in FY 13 and FY14.

Dr. Giuffrida also reviewed the VA annual sponsored funding (received by HSC joint appointed VA faculty only), which showed a decline over the past years (from FY10 to FY13). Data for FY14 were not shown (as they are still pending), but it appears that the VA funding has increased to approximately \$10M total. Dr. Shireman noted that VA funds are shifting more toward the needs of the Veterans (traumatic brain injury, PTSD, polytrauma, etc) rather than the traditional needs (aging, cancer, etc).

Dr. Giuffrida noted that one of the charges of the RSAC Council is to review the strategic plans and make recommendations to the Administration on a yearly basis to identify the research areas in which the HSC needs to invest in the future. Dr. Thompson noted that the strategic plan should include prioritization and consideration of the *research infrastructure* since this that would lend itself to larger multi-investigator research grants for the HSC that cut across various strengths or promising areas. The council agreed that another area to consider - in addition to structural and system biology as discussed previously - is *infectious diseases*.

Dr. Thompson added that perhaps the most powerful infrastructure for multi-investigator grant applications are *large cohorts*. You can use their study-specific endpoints and then layer other correlative studies on them (for example, link cancer risk and outcomes with other diseases like obesity and diabetes in our region). It might be a good idea to assemble all the cohorts currently studied and have a retreat to see what multi-investigator studies could be spun off.

Another good opportunity is to inventory the biorepository roster to see what they might generate as well.

Dr. Fitzpatrick noted that rather than just suggesting support for something general like neuroscience, as an example, a more effective approach would be to identify clusters of 2-5 successful researchers working on related problems. We would then ask whether targeted resources, such as research support or an additional hire, would lead to a cluster of excellence that could take that area of research to a point where it would bring international prominence and be in a position to apply for a program project grant. There are likely such groups in cancer, neuroscience, aging, the dental school and infectious diseases. In some cases there are multiple PI grants or U/P grants in place already. Dr. Fitzpatrick also reiterated his argument for

investments in infrastructure/methods that underpin all of the research areas we intend to target (the most obvious to him are bioinformatics and structural biology). There may be areas that could be supported with resources or new hires and that would boost multiple research programs.

The council asked all members from each School to identify other additional strengths that were not included in their original strategic plan and to share this information with the council at the next meeting.

Meeting adjourned at 4:10pm.