

**Florida Biomedical Research Advisory  
Council (Council)  
Meeting Minutes**

**January 30, 2009  
8:00 a.m. – 4:30 p.m.  
Department of Health  
4030 Esplanade Way  
Conference Room 301  
Tallahassee, FL 32399**

**Council Members Present:**

Dr. Veena Antony (by phone)  
Dr. Richard Bookman, Chair  
Dr. Randal Henderson  
Dr. Myra Hurt  
Mr. Albert Latimer  
Dr. Daniel Morris  
Dr. Sigurd Normann  
Dr. Penny Ralston  
Dr. Mary Lou Sole  
Dr. Herbert Weissbach, Vice-Chair

**Council Members Absent:**

Dr. Nikolaus Gravenstein

**Program Staff Members Present:**

Ms. Kristin Gandy – DOH, OPHR  
Ms. Tasha Griffis – DOH, OPHR  
Ms. Sherrie Hajek – DOH, OPHR  
Dr. Robert Hood – DOH, OPHR  
Dr. Susan Phillips – DOH, OPHR  
Ms. Peggy Shults – Lytmos Group  
Ms. Cynthia Ulysse – DOH, OPHR  
Mr. Chuck Wells – DOH, OPHR

**Guests in Attendance:**

Mr. Manny Arisso - DOH  
Mr. John Benton - Florida State Board of Administration  
Deputy Secretary Kim Berfield - DOH  
Dr. Margaret Byrne - University of Miami  
Dr. Samuel P. Grant - Florida State University  
Mr. Paul Hull - American Cancer Society  
Dr. Teng Ma - Florida State University  
Dr. Karen Moffitt – University of South Florida  
Mr. James Mosteller - American Heart Association  
Mr. Eric Prutsman - Orlando Regional Healthcare/ M.D. Anderson Cancer Center  
Orlando

**I. Call to Order:**

Dr. Bookman welcomed Council members and acknowledged the guests present.

**II. Approval of Minutes:**

Minutes of the August 26, 2008 Council meeting were presented. Dr. Weissbach moved that *the minutes be approved as presented*. This motion was seconded and passed unanimously.

**III.b. Introduction of New Staff:**

Ms. Hajek introduced three new Office of Public Health Research (OPHR) staff members, each of whom is working half-time: Ms. Griffis, who is supporting FLCURED and the King and Bankhead-Coley programs, and Ms. Gandy and Ms. Ulysse, who are assisting with program evaluation and performance measurement. Ms. Gandy and Ms. Ulysse are MPH students.

**III.c. Public Comments:**

Dr. Bookman invited comments from members of the public, but there were none.

#### **IV. Operations Report:**

Ms. Shults summarized 62 active James & Esther King grants and 39 active Bankhead-Coley grants by initial year and grant type. The primary activities for the most recent quarter were developing and releasing the FY2009-2010 Calls for Grant Applications and creating the 2008 Annual Reports. Major activities for the coming quarter are accepting and reviewing new applications due February 13, 2009, reviewing grantee progress reports, and processing requests to continue multi-year grants. The Program has cancelled all remaining grantee site visits this year due to recent budget cuts. Dr. Phillips stated her intent to make up these visits in FY2009-2010 if the budget permits.

##### **IV.a. Status of Competition:**

Ms. Shults reported fewer application registrations for the current competition compared to the same period last year. Council members suggested that a potential reduction in the number of Bridge grant registrations may indicate an absolute reduction in the number of qualifying federal proposals. Several members also noted that their institutions have suspended searches for new investigators for budgetary reasons, which will lead to fewer eligible applicants for New Investigator Research Grants. Dr. Bookman said these are important numbers to keep tracking in the state's best interest since they may be leading indicators for bad news to come.

##### **IV.b. Presentation of Annual Reports:**

Ms. Shults presented print copies of the 2008 Annual Reports to the Council and noted their availability at [www.floridabiomed.com](http://www.floridabiomed.com). Dr. Phillips commended Lytmos for the exceptional quality of these reports, especially the King report's presentation of cumulative outcome measures, and noted the importance and value of sharing them with the Governor and Legislature as they weigh priorities in determining the FY2009-2010 budget. Dr. Bookman offered appreciation on behalf of the Council.

#### **V. OPHR Report:**

Mr. Wells informed the Council that the Program recently issued an amendment to the current Calls for Grant Applications in anticipation of cuts in current year appropriations. The amendments allow the Program to consider in the pool of applications responding to these Calls for Applications the original applications and respective peer review merit scores of any grantees funded in response to FY2008-2009 Calls for Grant Applications whose grants were prematurely terminated due to the state budget deficit.

##### **V.a. Council Re-Appointments:**

Six Council members' first terms expire this year: gubernatorial appointees Dr. Weissbach, Dr. Hurt, Dr. Gravenstein, and Mr. Latimer; and Senate appointees Dr. Morris and Dr. Ralston. Dr. Gravenstein will not seek a second term. Mr. Wells clarified that all current appointees will continue to serve until new appointees are named. The State Surgeon General supported the reappointment of incumbents in a letter to Governor Crist. The Governor's office is accepting applications for these vacancies until February 12, 2009. Mr. Wells passed out copies of an announcement of the opportunity prepared by the Department, drew attention to the preferred experience, and asked the Council to encourage qualified candidates to apply. The Department will send a letter to Senate President Atwater in May supporting those incumbents whose terms

end in July, and suggested that they communicate with Senator Atwater as well.

**V.b. Peer Review Process Update:**

During the August meeting, Dr. Bookman asked DOH and Lytmos to explore the workload, time, and cost, and other implications of publicly noticing peer reviews. Dr. Phillips agreed to discuss this option once more with the DOH attorney, to consult with Lytmos regarding the extra costs associated with such changes, and to report back to the Council. After consulting Department counsel, staff confirmed there is no process through which to allow reviewers to see each other's comments and/or scores and then change their own scores without making those interactions open to the public or changing statute. Mr. Wells provided results of a small survey of Lytmos reviewers in which six of 16 respondents said they would be less likely to serve if peer review meetings were open to the public via teleconference or web conference and negative comments tended to be strongly opposed. Dr. Bookman inquired whether the reviewers were asked if the addition of a second look would produce a better quality evaluation. Ms. Shults said they were not; however, reviewer comments indicated several believed this would be the case. [After the meeting, Ms. Shults clarified that her recollection was based not on this survey, but on a 2007-2008 survey regarding the second look approach, as reported at the May 2007 Council meeting.] Mr. Wells stated that the Department's position is not to pursue this at this time because open review panel meetings would cause disruption to Lytmos in recruiting and retaining qualified reviewers, raise reviewer honoraria expenses, and result in additional system configuration costs imprudent under the current fiscal conditions. Instead, the Program will use the past peer review process in the current competition, averaging reviewer merit scores after dropping the high and low. Dr. Bookman said he continues to believe the peer review process can be enhanced. Mr. Latimer recommended talking with the Chair of the Committee on Open Government about the possibility of obtaining approval for a peer review process that allows reviewers to examine compiled comments of each participating reviewer and possibly change their scores and comments based on this information. Dr. Bookman endorsed this recommendation. He also shared that the Legislature looks to First Amendment Foundation on all open government legislation, so we would want to seek their approval in advance of any legislative efforts. Mr. Latimer moved that *the Council wishes to go on record as favoring improvements in the peer review process that enable reviewers to share their written reports [with each other], and such a process necessitates an exception to [the] public meetings [requirements]. Council wishes to explore ways to achieve this improvement in the peer review process.* The motion was seconded and passed unanimously.

**V.c. FL CURED Update:**

Mr. Wells reported that the 2008 FL CURED Annual Report is in production. The thrust of the report is the topic of the June 27<sup>th</sup> Summit, open innovation. He informed the Council that a DVD will be affixed to the inside jacket of the annual report, containing past annual reports, video recordings of Summit sessions, and pre-reading materials. The Council commended him for this approach and recommended making these recordings available online as well.

In the year since John Wilbanks first met with the Council, the Program has issued open innovation statements in the Calls for Applications encouraging publication of research findings in PubMed (now required of all grantees) and the sharing of data and materials obtained under our grants. Mr. Wells drew attention to a graphic that will appear in the annual report illustrating the hallmarks of open innovation: legal agreements and licenses, database standards, ecommerce sites, encoding of human readable text, collaborative research platforms, open access to research results, and voluntary participation by scientists. He challenged the Council to think about future policies to enact along these lines. Mr. Wells said plans for a future summit

will depend on what happens with next year's state budget. Dr. Bookman said a conference call is planned within the next month among Florida's major university technology transfer officials and Mr. Wilbanks to discuss concerns about how open innovation affects their areas. Mr. Wells sits on the Task Force for Biotechnology Competitiveness chaired by Senator Ring. At its last meeting, Mr. Wells suggested that the task force consider open innovation as an economic development tool and consult Mr. Wilbanks for more information. Senator Ring was very enthusiastic and asked for and received Mr. Wilbanks' contact information.

## **II. Department Welcome:**

Deputy Secretary Kim Berfield arrived, accompanied by Mr. Manny Arisso, Director of DOH Office of Legislative Affairs. She welcomed everyone to the Department's central office. She expressed regrets from the Surgeon General for her inability to attend due to another commitment. On behalf of DOH, the Deputy Secretary thanked the Council for their time, effort, and dedication to the King and Bankhead-Coley programs. She recognized Dr. Phillips and her team, saying they do an incredible job. She acknowledged the difficulty presented by the recent \$3.75 million cut to the programs during the recent special legislative session, but warned that several more budget-cutting exercises are coming up due to a projected \$4 billion shortfall in next year's state budget. Dr. Bookman said that the collaborative relationship between the Department and the Council is extraordinary among executive agency councils, working to everyone's mutual benefit. Ms. Berfield agreed, noting that the administration elements of Amendment Four (Tobacco Protection) were patterned after this program. When asked to clarify her responsibilities, she stated that she oversees legislative affairs, tobacco prevention, and administration (including budgeting). She expects to know more very soon about opportunities that the federal stimulus package may present. Dr. Bookman pointed out that universities lose money on every biomedical research grant. They make up this gap from two sources: clinical reimbursements, and philanthropy. He asked her to help this Council with its mission by working to keep Medicaid reimbursement rates sufficient to help pay for the institutional side of biomedical research when they receive our grants. Recent economic events have had a significant, adverse effect on philanthropic contributions. In addition, demand for elective, higher-margin procedures has dropped. Consequently, the state's academic medical centers are suffering.

Council members emphasized that many jobs are being lost due to the grant reductions and terminations decided upon at this meeting to achieve the \$3.75 million budget reduction. There is also an opportunity cost of foregone federal grants and future costs to prevent, diagnose, and treat disease. Speaking for the Council, Mr. Wells noted frustration over the fact that the Legislature chose to put biomedical research in the Department of Health out of convenience, but it is not one of the 10 essential functions of public health. Consequently, it is offered up unfairly by the Department when cuts are sought. Deputy Secretary Berfield expressed her belief that Senator Alexander will honor his recent commitment to Senator King to try to protect this program from further budget cuts and to restore full funding, if at all possible. She said she and Mr. Arisso will do everything in their power to advocate for the Council and the Program.

## **VI. 2009 Legislative Sessions – Special and Regular:**

Mr. Arisso reported on the Department's three legislative proposals for the upcoming regular session: 1) to create a 501(c)3 to allow the agency to access more funding for work within its core functions; 2) medical quality assurance; 3) rewrite Chapter 385 to deal with the inter-relatedness and broader impact of chronic diseases. Dr. Bookman requested that DOH notify the Council when text is available from bill drafting for review. Mr. Wells encouraged Mr. Arisso to consult Dr. Ralston on issues related to workforce development and underserved populations,

and mentioned the shrinking number of healthcare practitioner-researchers (doctors, nurses, etc.). Mr. Arisso said DOH will take all precautions to protect the agency, but legislators face extremely difficult decisions. He is very confident that, if a federal stimulus package is passed that creates funding opportunities, legislative and executive offices will get good information flow. Dr. Bookman urged DOH to draw on Council members as resources in the area of biomedical research, working through Dr. Phillips and Mr. Wells. When asked about her position on an increase in cigarette tax, the Deputy Secretary said the Tobacco Advisory Council has sent a letter of support to House and Senate members and the Governor's Office. She said a tobacco user fee probably has the best chance it has ever had of passing. The Department does not take a stand on legislation that it doesn't propose, but it has provided a staff analysis of cigarette user fee bill(s). Dr. Phillips will obtain copies for distribution to the Council. Mr. Arisso reported that legislation favorable to USF has been introduced that changes the structure of the Johnnie Byrd Alzheimer's Center, although he does not believe it is likely to progress. Dr. Bookman said most Council members represent organizations with government relations offices, and encouraged the Department to capitalize on opportunities to collaborate on shared interests and mobilize resources toward reaching shared goals.

#### **V.d. SSTI Application Update:**

On behalf of the King Program, the Department submitted an application last May for a Technology Based Economic Development award from the State Science and Technology Institute (SSTI) in the category of Expanding the Research Infrastructure. Unfortunately, it didn't win (there was no award given in this category due to stiff competition). However, in a debriefing in December, an SSTI representative said the evaluation was so favorable that the Department can apply again next year free of charge (a savings of \$125). The cited strengths in our application:

- Florida is one of very few states actually using tobacco settlement money for its intended purpose
- there is a stable and well-documented peer review process that is highly transferrable to other programs
- there is good communication of outcomes to program stakeholders
- there is excellent state government support and leadership
- the program operates with low indirect costs
- there is a good continuous improvement process

The opportunities for improvement:

- the return on investment seemed low for the dollars invested
- the application didn't clearly explain the direct impacts of the program
- it needed to show partnering and linking with other technology-based organizations, entities, and programs
- metrics need to be aligned with long term statutory goals

Ms. Hajek said it was challenging to adequately present the program within the 5-page limit of the application, and this is all the judges see. However, much of the feedback is strong validation of the Program's recent efforts to address performance measurement, especially relating to long-term statutory goals. The next step is to apply again in May. Council members asked Ms. Hajek to provide a copy of the SSTI application. Dr. Bookman strongly encouraged Council members to go to [www.ssti.org](http://www.ssti.org) and subscribe to the free SSTI newsletter.

Mr. Wells and Ms. Hajek attended the annual SSTI conference in October and found it to be very informative regarding the commercialization pipeline. Lytmos created a poster on the Program that they presented at the conference, and Dr. Bookman recommended it as an effective tool for Council member use when asked about the Program.

#### **VII. Cigarette User Fee Legislation:**

Mr. Paul Hull of the American Cancer Society acknowledged the challenge presented by the recent \$3.75 million cut, but said the opportunities for the King and Bankhead-Coley programs to be stabilized with long-term funding have never been better. He said the stakes are huge in the upcoming legislative session, reporting a massive effort to raise the state cigarette tax, creating the perfect nexus between cigarette tax proceeds and biomedical research in cancer and other tobacco-related diseases. At 33.9 cents, Florida has one of lowest cigarette taxes in the country (46<sup>th</sup> of 50 states), and after 19 years without an increase it is finally getting traction in the Legislature. Countering the common argument that a cigarette tax increase will produce diminishing returns, Mr. Hull cited data from Texas, where a \$1 tax increase expected to produce \$1.3 billion in additional revenue actually generated \$1.7 billion. A number of Florida polls show broad public support. Senator Atwater has said cigarette tax revenue will be part of the state's budget balancing equation. On February 18<sup>th</sup> the American Cancer Society and other advocates will spend the day visiting legislators. Representative Waldman has filed bills each of the last three years to implement a \$1 increase, and Senator Deutch is preparing a related bill. Representative Zapata filed a bill during special session that proposed raising the cigarette tax by 65.1 cents, and he is now working on a similar package for the upcoming session. Mr. Hull believes this bill has a slightly higher chance of getting through the House. There is a third scenario in the House in which a committee or council will be given the task of drafting a bill, most likely Representative Cannon's Council on Finance and Tax. In addition to sizeable funding for indigent care, Senator Deutch's bill will generate approximately \$40 million for the King and Bankhead-Coley programs. Half of this would go to peer-reviewed competitive research, with the other half intended for infrastructure such as capital improvement, equipment, and a pool of money to attract research talent, all under the direction of the Department and Council. Representative Zapata's bill produces a lower revenue stream, but still allocates approximately \$24 million for the King and Bankhead-Coley programs and splits the intended use between competitive research and infrastructure at 75%/25%, respectively. Assuming one of these bills passes, Mr. Hull expects the Program would see its first dollars early in 2010. Dr. Bookman asked how the Council can help. Mr. Hull suggested that Council members work their delegations and reinforce the importance of this issue with government relations staff at their respective institutions. Mr. Mosteller (American Heart Association) said the American Heart Association is working with the other voluntary health organizations on this matter, and is contacting volunteers across the state. He encouraged everyone to draw on their relationships with lawmakers to ask for their support.

#### **VIII. Lawton Chiles Endowment Update:**

Mr. John Benton, State Board of Administration, reported that Florida will draw \$700 million from the Biomedical Trust Fund in June. Normally, long-term investment should produce returns of approximately 8%, but tapping the fund for sizeable withdrawals to balance the state's budget makes it extremely difficult to invest well for the long-term. The federal stimulus program may prohibit repayment of trust funds. Mr. Hull stated that both the Deutch and Zapata cigarette user fee bills contain provisions for repaying the Lawton Chiles Endowment. Mr. Benton described the provision in Senate Bill 4(a) for fund repayment and presented four scenarios. Under any scenario, the King program will receive approximately \$3.9 million in FY2009-10. However,

payouts are forecast to decrease significantly over the next five years unless there is a full payback to the Trust Fund within five years. When asked how the \$700 million withdrawal would affect the biomedical set-aside, Mr. Benton said it may be pro-rated, but that has not yet been determined.

#### **IX. Budget Reduction Recommendations:**

Dr. Phillips said prior year grantees are not affected by the \$3.75 million cut to the current year's (FY08-09) budget. Bankhead-Coley grantees will be affected more dramatically because all of that Program's funding comes from general revenue, while the King Program's additional \$3.9 million in interest from the Lawton Chiles Endowment is not affected by the cut. This means that the Bankhead-Coley Program took a \$2.25 million cut, while the King Program was reduced by \$1.5 million. In addition, lower administration expense caps (10% of the annual appropriation) for the Bankhead-Coley Program leaves less room to make administrative sacrifices than is possible for the King Program (15% of the total annual appropriation). Dr. Phillips explained the Department-wide reductions in administrative expenses, including cutting all further staff travel, training, and equipment purchases. After all the cuts, the Program has about \$1,500 discretionary funds remaining for FY08-09. In addition, the Lytmos contract was reduced by \$47,700 in exchange for eliminating all remaining grantee site visits planned for this fiscal year as well as reducing the number of Lytmos reviewers who will examine Bridge grant applications in the upcoming competition, which comes out of this year's budget.

Dr. Phillips presented a document detailing four reduction scenarios for each of the two programs, along with staff recommendations and rationale. For the King program, the recommendation (Option 1) was to reduce all NIR, SBTT, and Bridge grants by 9.25%, and reduce TSP grants by 5.5% (TSP awards are already at 95% of the requested amount). In considering this recommendation, Council members asked Dr. Phillips to confirm that it is not possible to spread the reduction to prior year grants. She placed a call to Department counsel, who confirmed that the Department does not have budgetary authority to go back and tap obligated funds. Several Council members expressed a desire to protect new investigators as much as possible, reporting that startup packages have been reduced or hiring freezes are in place at their own institutions. All acknowledged that new investigators are facing increasing difficulty in getting federal awards. Dr. Sole moved that *the Council adopt Option 1 for the King program, as recommended by the Department*. The motion was seconded and passed unanimously.

The staff recommendation for the Bankhead-Coley program was to end the lowest ranked (by scientific merit score as assessed at the time of application) four New Investigator Research (NIR) Grants, effective 3/1/09, and reduce the remaining NIRs by 2.9%. The Council considered several variations on this scenario. Dr. Sole moved that *the Program terminate three NIR Grants with the lowest peer review scores, reduce the remaining NIRs by 9.25%, SPORE Planning (SPORE) Grants by 3%, and Bridge Grants by 4.5%*. SPORE Grants were reduced by 3% when awards were given. There was a prolonged discussion during which several options were investigated and several Council members voiced dismay at having to end any grants. During this discussion, Dr. Normann suggested ending the NIR grants at the end of the first year, rather than in 30 days, thereby giving those grantees as much planning time as possible. In addition, per the FY2009-2010 Amendment to the Call for Applications, they would be eligible for funding consideration in the current competition, although the Council agreed that they should only receive two more years of funding, if they were funded. As a replacement motion, Dr. Normann moved that *the program end the four lowest ranking NIR grants as of 6/30/09 and reduce the remaining NIRs by 9.25%, SPORE grants by 3.05%, and Bridge grants by 2.0%*. This motion

was seconded and passed unanimously.

Dr. Bookman said he wasn't sure the Council could have done much better with this very difficult exercise, and thanked his colleagues for their thoughtful approach.

#### **XI. Special Recognition:**

Dr. Phillips recognized and thanked Dr. Weissbach, Dr. Hurt, and Mr. Latimer for three years of service on the Council, and presented each with an award as a sign of appreciation. Although he was absent, she also acknowledged Dr. Gravenstein's three years of service; his plaque will be mailed. She offered special gratitude to Drs. Normann and Bookman for their service to the Program from its very beginning, noting how fortunate the State of Florida has been to have their capable support.

#### **X. Lunch Presentation by Collexis:**

The purpose of this presentation was to evaluate the potential for using online tools to encourage/measure collaboration among Florida biomedical researchers, within the context of open innovation. Ms. Martha Golubock and Mr. Steven Leicht of Collexis Holdings, Inc. provided a brief demonstration via web conference of the company's knowledge management capabilities in the form of case/use studies. Mr. Wells thanked the Collexis representatives and ended the web conference. He asked the Council for thoughts on whether or not they saw value in tools like these to match/facilitate collaborations that could lead to unknown synergies and subsequent advances in our research objectives within the tobacco-related disease research space. Dr. Bookman reported that the University of Miami (UM) has begun using the Collexis system as an experiment to see whether it is more usable and utilized to link its researchers than other available resources. It is still in development. Author disambiguation (that is, differentiating among authors with the same name) is a huge problem. UM has committed about \$125,000 for this project, not including the time for UM staff to support the implementation. They have entered about 1,500 names; there are about 3,000 investigators in Florida, and UM's effort would not have to be duplicated if other entities in Florida collaborated with UM. Council agreed to monitor the progress of the UM experiment and revisit the usefulness of this approach at a future meeting.

Ms. Hajek left the meeting.

#### **XII.a. Special Emphasis Project Presentation – Dr. Margaret Byrne, *Understanding Disparities and Barriers to Participation in Cancer Clinical Trials Among Floridians*:**

Dr. Byrne provided a brief presentation of her findings against each of the objectives from her current Bankhead-Coley grant. While she has encountered major challenges in obtaining certain data, her pilot data has led her to conclude that, from the patients' perspectives, there is a lack of information, lack of insurance coverage for participation, and not enough communication with healthcare teams about clinical trials. From the provider view, eligibility restrictions and patient refusal to participate appear to be barriers. During the remainder of her grant, she will finish her survey and analyze patient and provider data to prove or disprove her preliminary conclusions.

Feedback from Council members included a suggestion that she consider taking a more focused approach in future studies, such as Miami-Dade African-American women with breast cancer; a recommendation to use Florida Cancer Trials as a source of available trials; and a suggestion that she consider breaking out data by clinical trial phase.

**XII.b. Special Emphasis Project Presentation – Dr. Karen Moffitt, Florida Cancer Council Trial Physician/Patient Information and Education Program:**

Dr. Moffitt briefly presented information produced during the course of her work sponsored by a Bankhead-Coley grant. She cited patient-focused barriers to be: a) lack of awareness of clinical trial options, b) searching when ineligible or too late, c) assuming their physician will recommend clinical trials if appropriate, d) having a negative or inaccurate perception of cancer clinical trials, or e) speaking a primary language other than English. She has found physicians to: a) be hesitant to refer patients to other institutions or doctors; b) be unlikely to present clinical trial options if they themselves don't support clinical trials; c) have limited time in an appointment to discuss clinical trials, d) may forget to offer a clinical trial; or e) have not adopted software-based matching tools that require data entry. Finally, she said center-focused barriers are: a) patients are referred to cancer centers too late to enroll; b) diagnostic/clinical teams must coordinate tightly with research teams to identify potential volunteers within eligible timeframes; and c) no centralized tool to manage trial education and patient recruitment throughout the institution. She described three interventions currently being tested by her project: 1) a customized clinical trial matching service branded for individual Florida cancer centers; 2) a new patient education service that provides phone-based education before or after a first cancer center visit; and 3) a health professional matching and enrollment tracker that allows health professionals to quickly match new patients to a center's open trials. Her plans are to expand the number of Florida cancer centers using these new interventions.

When asked by Council members if this model could be adapted for multiple diseases, she said it could. Dr. Bookman suggested it may be possible to support this work through King program grants for other diseases.

**XIV. Review Data Analysis Discussion:**

Dr. Clyde McCoy, ex-officio Council member, phoned into the meeting to recommend that the Council commission a study of the Program's peer review empirical database, looking at how merit scores and proposal rankings would be affected by keeping the high and low scores, dropping only the low, or dropping only the high. He offered the services of his statistician for no compensation. The Council agreed to go forward with the study, and asked Ms. Shults to work with Dr. McCoy to provide past peer review data.

**XIII. Performance Measurement and Program Evaluation:**

Mr. Wells said he expected to be contacted by legislative staff this summer for the beginning of the program evaluation required in both the King and Bankhead-Coley statutes. Program staff have looked at each of the Program goals to identify leading and lagging indicators of performance. They have mapped the various grant mechanisms as a strategy for achieving these goals. While each mechanism helps achieve one or more goals, each has its own success measures. Performance measurement asks "did you achieve what you said you were going to achieve?" Ultimately, we buy research so that our efforts might reduce human suffering, disability and death. Within our stated goals, there are gaps, particularly with goal three, "Improve the quality of the state's academic health centers by bringing the advances of biomedical research into the training of physicians and other health care providers." Dr. Normann suggested that a proxy measure for this goal is the documentation of pre- and post-doctoral employment associated with each grant, since these are essentially training opportunities. Dr. Bookman and Dr. Hurt offered the services of their institutions' reference librarians in counting citations of publications from previously funded investigators. OPHR is

preparing an internal evaluation, and Mr. Wells proposed focusing on strategic planning during the May Council meeting, with a serious eye towards how we want the program to mature, perhaps even creating a targeted research agenda. Future mechanisms to consider could include competitive continuation funding for past grant recipients, searching for ways that start-up companies can be eligible recipients, and opening the clinical trials planning grants to independent investigators. Next steps for open innovation should be discussed as well. He agreed to email a copy of his presentation on performance measurement and program evaluation to Council members.


Drs. Ralston and Henderson left the meeting.

**XV. Open Discussion and Closing:**

Dr. Hurt reported that, prior to her earlier departure, Dr. Ralston expressed great concern about how the affected researchers would receive the news of termination of their grants. Dr. Normann recommended not ending these grants, but instead funding them out of next year's budget. He stressed the importance of making every effort to honor our commitment to these researchers. Regarding the four ended Bankhead-Coley grants, Dr. Morris moved that *the Program will make every effort to restore funding for the 2nd and 3rd years from next year's funds*. This motion was seconded and passed unanimously.

Dr. Hurt moved that *the meeting be adjourned*. The motion was seconded and passed unanimously. The meeting adjourned at 4:40 p.m.

Respectfully submitted on behalf of Dr. Richard Bookman, Chair

 5-11-09

Chuck Wells, Assistant Director  
Office of Public Health Research