

05/13/2010

Research Development Committee Report

The communication on the committee roster was received in February 2010 and therefore we have been able only to meet two times. In these two meeting the committee has focused its effort on two topics:

- a) Challenges encountered by faculty in the clinical departments to initiate and perform research
- b) Identification of faculty capable to mentor junior faculty and how to reward mentoring activities.

The committee is still working on both issue and we are planning to develop specific surveys to identify the major challenges for the development of clinical research and to identify available mentors.

Since the committee met only two times the attendance was low. Enclosed are the minutes and the names of the faculty that attended the meetings.

Sincerely,

Gianluca Tosini, PhD
Chair RDC committee

**Minutes of the
Research Development Committee
February 17, 2010
3:00 p.m.**

Members in Attendance: Leonard Anderson, Rita Finley (Secretary), James Griffin, Lilly Immergluck, Ward Kirlin, Ketema Paul, Veena Rao (by teleconference), Gianluca Tosini (Chair), Xuebiao Yao

- The minutes of the March 18, 2009 and April 15, 2009 meetings were approved without corrections.
- Beatrice Gee, Associate Professor from the Department of Pediatrics delivered an overview of ongoing research activities in the department including active research studies, resources, challenges facing the department and departmental initiatives. Among the challenges reported by Gee were insufficient and/or inexperienced staff that support a number of projects, lack of biostatistician availability, ill-timed disbursement of grant funds, pilot grants not coming with indirect costs to the institution and inefficient institutional financial processes that support research (e.g. opening of accounts, hiring, purchasing and consultant contracts). In terms of administrative support, Leonard Anderson asked if it was cost effective to assign FTE individuals to clinical research based on the amount of work that is done. Should FTEs be tied to a dollar amount? Chairman Tosini remarked that the institution needs to make some commitment. Pilot grants do not come with indirect costs. After some discussion, Tosini suggested that Gee take a more comprehensive survey of the needs of all clinical department investigators to review common problems that may exist and seek to work toward the improvement of all clinical research issues. Gee was asked to return to the RDCs March meeting to present collective issues of clinical investigators.
- Paula Pullen, Research Instructor from the Department of Physiology and CVRI presented information on the eagle-i Consortium. Begun in September, 2009 collaborators from Dartmouth College, Harvard Medical School (lead institution), Jackson State University, Morehouse School of Medicine, Montana State University, Oregon Health and Science University, the University of Alaska, the University of Hawaii, and the University of Puerto Rico began to build a national research resource discovery network during a two-year project that will allow biomedical scientists to quickly find valuable research resources (e.g. technologies, animal models, equipment, cell and tissue banks, training opportunities). At first this network will only access the initial nine sites, but eventually any institution in the US will be able to participate. This new consortium was founded with a \$15 million ARRA grant from NCCR and supports an NCCR goal to establish a national network for research resource discovery. Gary Gibbons and Leonard Anderson are co-PIs for this project at MSM. Adam Davis serves as a collaborator/consultant. Pullen is the resource navigator and contact person. Rita

Finley asked Pullen how different this inventory management system is from the eBIRT system. Pullen replied that eBIRT is local and that it would become a part of the eagle-i network. Each institute will control and store its own information. The benefits of participation will be the opportunity to enhance researcher's tools, internal communication, networking with query systems, etc. Lilly Immergluck inquired if the process maintains the rights on intellectual property. Pullen indicated that the investigator would have control on the release of information. Pullen was asked how you handle discoverability of information. She responded that the IRB office may facilitate these interactions. Ketema Paul asked what the benefit was to MSM investigators. Why not go directly to the individual who has the resource you need? What does this system provide that cannot be obtained directly by the investigator? Pullen replied that right now investigator's that don't want to register could benefit from the participation of others at the institution without registering themselves, but eventually an investigator's participation would be necessary if they wanted to obtain information from the system. Pullen indicated that she would get brochures of the project circulated when they have been completed.

The meeting was adjourned at 4:02 p.m.

Respectfully submitted,

Rita Finley, Ph.D.
Secretary

**Minutes of the
Research Development Committee
March 17, 2010
3:05 p.m.**

Members in Attendance: DiAnne Bradford, Rita Finley (Secretary), Ketema Paul, Priscilla Pemu, Gianluca Tosini (Chair)

- The minutes of the February 17, 2010 meeting was approved without corrections.

- DiAnne Bradford commented about the Mentorship Program. She indicated that following the dissemination of surveys, the response was low. Some of the questions on the survey dealt with the characteristics of mentors and mentees. Dean Higginbotham was supposed to be on board with supporting individuals for mentoring, however, the program has not proven successful. Chair Gianluca Tosini indicated that we need an ally for the program. Mentoring involves teaching and research and, therefore, more pressure should be placed on the administration to consider supporting this program. Priscilla Pemu inquired how mentoring was rewarded at other institutions. Bradford indicated that at the Medical College of Georgia (MCG), grants from the dean are available for mentoring. Ketema Paul added that some grants allow you to place a percent effort toward mentorship. Two and one-half percent is covered at MCG. Tosini commented that the Research Development Committee can stress that mentoring is an important activity and individuals should be rewarded for mentoring. If you mentor an individual, the mentor who spends a certain number of hours teaching their mentee grant writing, etc. should be able to include that in the FAR under “% teaching”. Tosini asked, “If mentoring is teaching, how would you assess success?” Bradford answered that outcomes such as publications and grant applications could be used. There would be a different weight attributed to grants that were awarded versus grant applications. Tosini remarked that these ideas should be presented to the Dean and that mentoring could not only be applied between faculty members, but also between PIs and postdoctoral scientists. In short, this should be presented to the Dean as a mentoring package, revising last year’s mentoring package which should include a description of a good trainee.

- Pemu indicated that when a grant application is written, there is an RVU (Relative Value Unit – the nonmonetary numeric value of the services a practice provides) designated for the length of time spent with each patient. We are still working out how many RVUs this is worth. What does a clinician put on their FAR in this case? Bradford asked if Medicine has any protective time for research. Immergluck is currently in a situation where she has lots of data, but no time to write it up. Why is there a disparity among clinical departments for support to do research? What happens when clinicians get a pilot project? It is a struggle to get support from the departments. The institution needs to develop its clinical research program. An R25 would support 20% time of 3 faculty members for 3-4 years. There is a problem taking on faculty members in Psychiatry and getting their time protected.

- Tosini indicated that we understand the benefits of research money—it is an investment. How does mentoring benefit the institution? Should you say investing in teaching/mentoring “this much” = an outcome in dollars yielded? We need evidence to provide this data. The problem is this issue needs to be prioritized at a higher level than exists now. This committee will not see an immediate change, but it can bring the issue to the attention of the Dean and the President. The RDC should make this our project for the academic year 2010-2011. We should (1) summarize mentoring characteristics and outcomes and develop a mission statement that mentoring is teaching and is an activity that should be rewarded. There should also be (2) an assessment of clinical research—what are the challenges? A representative from each clinical department should be designated to assess their department’s issues. Community research and clinical research should be separated. (3) Additional questions should be added to the existing mentoring survey and it should be disseminated again. The President’s office had said they would do this. A committee report is due in April to the Dean.
- It was announced that two new biostatisticians have been hired at the junior and senior level for clinical research.

The meeting was adjourned at 4:10 p.m.

Respectfully submitted,

Rita Finley, Ph.D.
Secretary