

## Minutes

### **UW Medical School Medical Education and Research Committee 5:00 PM July 20, 2005 – Room 4201 Health Sciences Learning Center**

Members Present: Sanjay Asthana, Paul DeLuca, Dave DeMets, Norm Drinkwater, John Frey, Susan Goelzer, Jeff Grossman, Rick Moss, Javier Nieto, Greg Nycz, Gordon Ridley, Doug Smith, Jeff Stearns, George Wilding

Members Absent: Lynn Allen-Hoffmann, Maureen Durkin, Debra Hullett, Layton Ridders, Joan Schiller, Susan Skochelak

Guests: Philip Farrell, Patrick Boyle, Karla Thompson, Howard Bailey

Staff: Tracy Cabot, Tonya Paulson, Eileen Smith

The Committee was called to order by Vice Dean DeLuca at 5:10 p.m.

1. The minutes from the June 15 meeting were approved unanimously.
2. DeLuca reviewed the meeting agenda, and mentioned that there will be no August meeting.

Eileen Smith announced that WUHF will meet on Friday, July 22 at 9:00 at the Madison Concourse Hotel for discussion of the 2004 annual report. She encouraged all MERC members, especially the Focus Leaders, to attend.

Dean Farrell announced that he has received a Strategic Initiatives proposal from Sanjay Asthana regarding health disparities related to patients with dementia. This proposal is linked to another proposal that will be submitted to NIH by the Alzheimer's Center. Farrell said that he is studying the proposal.

3. Karla Thompson provided the monthly financial status report showing cumulative expenditures for all projects awarded through the end of June as well as the single month expenditures. The MOUs for the six New Investigator Program awards are being finalized. She noted that the end date for the planning grants has been extended through September.
4. Jeff Grossman gave a brief report on the "University in the Transformation of Healthcare" conference to be held November 17-18 at Monona Terrace. Grossman presented an outline for the conference, which includes goals of providing a platform for discussion of the state of our healthcare delivery system and the role UW can play in healthcare reform, creating a venue for academic, government, industry and community partnerships in healthcare reform, and providing a forum for UW faculty members from a

variety of disciplines to find common ground for work in healthcare transformation. Grossman asked for feedback on ways to enrich the program.

5. Javier Nieto asked for questions on the draft implementation proposal for the Survey of the Health of Wisconsin (SHOW).

DeLuca asked about the relationship between SHOW and WiCTNet. Nieto noted that there has been some difficulty coordinating between the two groups; however, he views the two projects as complementary. Clinics, data management, storage, sample repository, etc. could have overlap. DeLuca asked that these details be discussed in the full proposal when it comes to MERC.

Drinkwater commented that while he understood the rationale to contract out for sample collection he was surprised that survey support expertise did not exist on campus. Nieto explained that the UW Survey Center does not have survey sampling statistics abilities, and DeMets agreed.

Grossman mentioned that the Executive Committee had questioned the trajectory of the budget, and asked if there was expectation of outside funding. Nieto said that it is likely that there will be need to be ongoing core support from MERC; however, SHOW could be a magnet to attract other research grants. Also, it is possible that the biorepository could be a fee for service program.

Nycz asked about state budget funds for this project in the future. He said it would be important to show how this program is part of the State Health Plan 2010 goals for development of core infrastructure. George Wilding noted that the UW is receiving cancer control money from the state, so there is some precedent for the state using the university to reach its goals. DeMets stated that this survey will be a sample of the state, and it is not a simple cohort study, and, therefore, is of benefit to the state.

Wilding observed that all 3 planning grants have common threads involving samples and storage, statistics, and informatics. He challenged all 3 programs to develop shared infrastructures, to avoid duplication of effort and maximize expenditures. Grossman reminded the group that one of the features of the decision matrix was to work across the projects, and Wilding said it would be important to see the matrix implemented in the implementation proposals discussed in September.

John Frey asked how to get others engaged in the possibilities of the projects, for example, making connections to Gunderson, Marshfield, etc. Rick Moss suggested that a grants program in Emerging Opportunities would be a good way to engage faculty.

There being no further discussion, DeLuca stated that the Executive Committee will provide some feedback to Nieto at their August meeting.

6. Howard Bailey gave a progress report on the WiCTNet planning grant. The overall goal of this program is to create a statewide clinical trials network. This consists of

providing infrastructure and centralizing some aspects of the research to improve efficiency. Part of the rationale comes from the national recognition of the need for more evidence-based medicine. He stressed that each site's local population is not large enough nor diverse enough to meet the needs of many clinical trials. This program will provide statewide access to trials of new interventions, and will allow statewide practitioners (especially those not associated with large clinics or groups) to participate. WiCTNet will expand the capabilities of Wisconsin researchers by enabling more studies to be done faster and by improving funding opportunities.

Three large multidisciplinary healthcare groups are committed to WiCTNet: Aurora Health Care, Marshfield Clinic, and Gunderson Clinic have agreed to participate. Their participation has fueled the evolution of this program from clinical trials to a broader category of research to include health services and population health research. Bailey showed a map that indicates that most of the population of the state would have access to WICTNet through these three partners.

It has become clear that it will be necessary to provide pilot research support, because there are many good ideas for projects that do not have existing funding.

Bailey presented short term goals for the next 3 months, including a planning meeting on July 25 to finalize such issues as organization, infrastructure, and governance. Longer term goals include the implementation of the first studies, prudent site expansion, and continued collaboration with SHOW on such issues as sample acquisition and storage.

Bailey outlined potential budget items for the future, which include an initial phase-in startup budget, then maintenance costs going forward. About 30-40% of the budget would be UW expenses for central office, including personnel, data management, and biostatistics. Local site infrastructure would account for 40-50%, mostly for personnel. The remaining 15-30% is for such items as pilot study funding, and education of community-based health care providers.

Bailey described a number of measures of success, including global measures such as increased efficiency of research and enhanced healthcare, as well as specific measures like numbers of studies implemented or patients enrolled. One key measure of success will be the ability to obtain outside support for infrastructure.

DeMets added that he is pleased that Aurora, Marshfield and Gundersen are committed to this program. We can do this better together than we can individually, by pooling our talent and resources. Nycz noted that he had the opportunity to sit in on the Marshfield site visit. This is a great vision which is enriched by sharing with other organizations.

Grossman commented that it would be a great opportunity to include health services research by studying outcomes metrics, to learn how things we do are really affecting the population. Frey also noted that we could look at outcomes in terms of the State Health Plan especially with respect to disparities in the underserved, uninsured, minority, and rural communities.

Drinkwater asked if it would be possible to get the 3 large healthcare systems to participate in funding the pilot projects. Farrell noted all three of these organizations have foundations that support research.

DeLuca suggested that WiCTNet integrate with the Alzheimer's network. Bailey agreed that the program will build from existing strengths, such as cancer and Alzheimer's disease.

7. Moss presented the Human Proteomics Implementation proposal. He reiterated that the Human Proteomics program will use high-throughput studies of proteins to discover the changes in protein structure that lead to dysfunction or disease. Some of the potential impacts of this program are the discovery of targets for therapeutic interventions, the development of diagnostics for early detection of disease, and improvements in the safety and efficacy of drugs.

Moss stated that proposal will improve health by innovative, interdisciplinary approaches that will transform the Medical School research of human disease. Startup funding for Human Proteomics is not available elsewhere; however, once established, this facility will be in prime position to leverage extramural funding.

The planning process has included both clinical and translational foci and has benefited from input from basic, clinical and other campus faculty. A number of vendor presentations and consultant seminars have provided detailed information about equipment and other items necessary for this facility.

Moss outlined the proposal's main goal of development of unique research and diagnostic capabilities that are well integrated with existing campus facilities. Additionally, this program will provide staff for instruction and use of machines and will develop strategic partnerships. The first year will be devoted to establishing the Human Proteomics Program, which includes equipping and staffing the core facility, as well as short and long term planning and the development of a review process for setting research priorities.

Outcomes will be assessed by such measures as increased use of mass spectrometry in mechanistic research (such as the number of grant applications or publications using this technology), development of novel biomarkers, progress toward self sufficiency of the core facility, and user feedback.

Moss showed a full 5 year budget, including matching funds from strategic partners. The total request from MERC for 5 years is \$2M. Remodeling is not included in the budget. This facility may be initially located at CSC or Waisman, with the desired location being the IRC. It will be operated on a fee for service basis. Moss stated that the goal would be to start operations on October 1.

DeLuca observed that a large portion of the costs of this facility is the purchase of equipment, and asked about the possibility of leasing instead of buying these machines. Moss answered that the companies don't want to lease this type of equipment because it is rapidly evolving; they have promised 4 years of support. Nieto stated that it will be necessary to coordinate the timing of this program with the implementation of SHOW and WiCTNet. He also expressed concern about ethical issues and suggested adding a health services researcher to the advisory committee.

Nycz stated that the Human Proteomics program is much closer to bench research than to public health. While he believes in the necessity for a balanced portfolio, he questioned how MERC will be able to show the downstream impact on population health. Moss replied that this is a discovery process, and he has a list of the application of proteomics to existing clinical problems, which he offered to circulate. Farrell gave an example of North Carolina using proteomics to screen newborns for cystic fibrosis and other diseases. MCW has a project to use proteomics to test for bacteria causing pneumonia.

Jeff Stearns said that he was struggling with using the funds for discovery purposes, and advocated for more immediate application to human disease. Grossman noted that the Executive Subcommittee had discussed this point with respect to reviewing and scoring grants for the New Investigator Program. The discussion came down to length of time to affect the population versus potential impact on the population.

Drinkwater expressed concern about the integration of the Human Proteomics facility with existing campus facilities—and how to capitalize on investments such as the Biotech Center. He suggested the creation of a Medical School initiative like a cluster hire to build faculty with this expertise. Moss said that this facility will be key to recruiting new faculty.

8. DeLuca led a brief discussion of possible changes to the New Investigator Program. A list of suggestions from the Application Review Subcommittee was discussed by the Executive Subcommittee. There is reluctance to make substantial changes to the process while half-way through the first year. However, it may be acceptable to expand the eligibility criteria, for example. DeLuca asked if the group would be comfortable with empowering the Executive Subcommittee to vote on changes at their August meeting. Nycz asked that the list of suggestions be circulated to the MERC for comments, and Frey agreed. The MERC was asked to provide feedback to the Executive Subcommittee before their meeting on August 18.

9. DeLuca noted that the next MERC meeting will be on September 21, and will include an update on the Innovations in Medical Education Implementation Grant from Sue Skochelak and full proposals from Nieto on SHOW and from DeMets on WICTNet.

The meeting was adjourned at 7:27 p.m.

Respectfully submitted by:  
Tracy L. Cabot, Recorder