Purpose of meeting: to gather feedback from faculty on development of basic science priorities for next 5 years.

Issue: CWRU SOM relies heavily on federal funding (specifically NIH funding) for revenue – over 75%. Not enough coming from philanthropy or industry partnerships.

Introduction
- Med school capital campaign starts June 2012. They are looking for $350M. What will be the ask for basic sciences? What will we do with the money?
- Goals of the SOM
  - Be an environment that attracts and trains the best students
  - Move the needle on translating research from discovery to cures
  - Impact the care and health of the community
- Key Disciplines: all faculty should be able to find a home in one or more of the key disciplines
- If the Strategic Plan does not help faculty become better, move forward, then it is a failure
- Would like to have a specific designated amount of money set aside for Basic Sciences
- The money will come from all these sources:
  - Continued operating funds
  - SOM Capital Campaign funding
  - Any additional investments we can procure through the Development Office
- The Development Office has already designated a professional to work exclusively with Basic Sciences.
- Basic science investment strategy: Invest some of the $ in funding faculty/chair proposals
  - Open competition for the money
  - Accept proposals from any faculty or faculty group
  - Proposals would weigh heavily towards recruitments
  - Other options are available – discuss today
- Not all money would go towards this, and this strategy could be supported from other sources as well as the initial ask
- This proposal strategy is important – it provides an outlet for innovation from faculty

Question and Answer Session

Question: What is the process by which Basic Sciences can be linked to life expectancy and urban health? This has traditionally been difficult to do, we end up in silos without connections.

Answer: We make it a priority. True, not all researchers are looking at preventative medicine, but some are. The CTSC is doing it. Today we are focused on what the Basic Sciences can do to move the needle.

Question: The diagram is missing Pediatrics on the clinical pillars and there is no mention of developmental biology in the basic science disciplines.

Answer: We might change that, Pediatrics is indeed a pillar of our clinical strengths. However, Peds does integrate throughout all clinical work, it is woven throughout the diagram.

Question: Bench to bedside – CTSC restricts its pilot grants to clinical science only (human studies). Is there any chance they will expand that so people working on animal models can get pilot funding?

Answer: There is more flexibility than that, it’s not restricted to human studies. They are open to animal studies, but it needs to be a clear animal model of disease. They are likely to fund if the animal model is more mechanistic, can be more discovery oriented if the work is done in humans.
**Kingman Strohl, head of Pilot Program in CTSC: Core Utilization grants have NO restrictions**

**Question:** What should the money be used for? Only recruits?
**Answer:** Not necessarily, but we are not going to fund in an R01 manner. We are looking for creative ways to encourage collaboration.

**Question:** What about the sustainability of the funding?
**Answer:** Remember we will be looking for funding not just from the SOM Capital Campaign. We will be working with the Development Office to bring in more directed funding related to specific disciplines. We are hoping to allow every discipline to get at least some recruits every year. And yes, we also want more for endowments and pilot grant projects.

We are looking at this on a proposal by proposal basis. If this program is successful, we would hope to cut back on chair commitments and offer a slightly smaller package, with the understanding that they have an opportunity to propose more for their department.

**Question:** How do we prioritize recruits?
**Answer:** That would be proposal-driven. We would have an external peer review, then a committee of faculty and chairs would make a recommendation to the dean, who would make the final decision. We will need to develop an internal strategy, so we can defend our choices. It will be a learning process.

**Question:** Are we wrong in setting a dollar amount to our ask from the fundraising campaign? There are some in the NIH who reject that because it limits innovative thinking.
**Answer:** We have done that in the past, this time we would like to have an amount on paper. But we are not limiting it to that, that amount will be our minimum. We expect to continue raising funds for Basic Science research beyond that amount.

**Question:** Recruiting is expensive, wouldn’t it be cheaper to revitalize the faculty already here? Couldn’t we use some of the recruit money to pay for more pilot projects that could result in a new grant?
**Answer:** We already have those programs, funded and running in the CTSC Pilot Grant Program. In my presentation I mention that some disciplines are lacking a critical mass to do good science. Bringing in mid-level recruits will also help the current faculty by providing that critical mass. Additionally, bridge funding is already in place to help bridge the gap between grant renewals.

**Question:** Do you have a vision for technology? There are lots of technology upgrades that would make a big difference for cores and research projects.
**Answer:** That is a good idea, and could be addressed in a proposal. Additionally, recruits often get start-up funding to purchase equipment.

**Question:** Informatics support needs to be built up. It is seriously lacking, and it is a critical area for basic research.
**Answer:** Yes. There is a separate fundraising campaign starting in collaboration with UH, we are hoping to start bringing in money soon. The ability to create and analyze data is powerful, so it is a key issue.

**Question:** Can we work with our affiliates to attract funding for combined programs?
**Answer:** Absolutely. We hope to do that quite a bit.