RUTGERS

Cancer Institute
of New Jersey
RUTGERS HEALTH

RESEARCH LEADERSHIP COUNCIL



Thursday, June 18, 2020 4:00 to 5:00 pm WebEx

Attendees:

Elisa Bandera, Willetta Boswell, Stephen Burley, Chang Chan, Carolyn Heckman, Howard Hochster, Anita Kinney, Edmund Lattime, Linda Tanzer, Paul Novembre, Sarah Scharf, Zhiyuan Shen, Ioannis Stasinopoulos, Eileen White

Agenda

- 1. EAB Preparations
 - There was concern about the lack of conformity across slide sets. The Program Leaders appeared to be presenting their data differently. It was agreed that there should be a standard way of presenting the data across the Research Programs.
 - One administrator would generate all of the graphs, in order to assure uniformity of colors, axes, etc. and then the Program Leaders would just insert these graphs directly into their slide sets.
 - Linda Tanzer and Paul Novembre would discuss with Dr. Libutti about how to present the data in terms of exact metrics and format.
 - It was agreed that there should be a standard slide set to be used for EAB meetings, for which the Program Leaders would need to update each year.
- 2. Selection of Top 8 cancer site priorities for strategic planning and EAB meeting (Kinney)
 - Anita Kinney asked for comments and suggestions for the criteria used to guide Rutgers Cancer Institute's prioritization of Cancer Control activities and research.
 - She observed that other cancer centers identify up to eight cancer priorities for their strategic planning. Having nine (the number currently prioritized by Rutgers Cancer Institute) does not seem to be done at other cancer centers.
 - It was agreed that a prioritization criterion could be the Research Program Members'
 expertise. If necessary, priorities could be adjusted as members left, though there usually is
 more than one member working on a disease.
 - Discussion next ensued about the overall process for determining the priorities.
 - Based on data presented Anita Kinney (e.g. New Jersey having the highest rates in the United States), it was agreed that prostate cancer should be named as a priority.
 - The question was raised of whether any of the Basic Research Programs had prostate cancer research in their EAB meeting slide sets.
 - It seemed that only the CIPT Research Program currently had prostate cancer research occurring.
 - The suggestion was made of having information on New Jersey's cancer incidence and cancer burden be made readily available to the Program Leaders, so that they could see whose work would be applicable to the catchment area.
 - While the members could not be told to change their research, it would be possible to see whether any of the priorities related to their work.
 - It was agreed that Anita Kinney's slide set would be sent to the Program Leaders and the Catchment Area Program Liaisons, and their administrative support staff, to keep on file.

- The suggestion was made for developmental funds to be strategically allocated toward catchment area priorities.
- Cancer mortality rates were looked at along with cancer incidence rates to inform the catchment area priorities.
 - It was agreed that, lung, pancreas, colorectal, and breast cancer were obvious priorities, due to their rates supporting epidemiological research.
 - Discussion around research being done by resident faculty supported prioritizing ovarian, skin, liver, thyroid, and prostate cancer.
 - The decision was made to have 9 catchment area research priorities and address any EAB critiques.
- Anita Kinney requested that COE be kept involved in Strategic Planning. She further would like to see members of other Research Programs apply to the Center for Cancer Health Equity's Disparities Pilot Award Program (so long as the program budget is still available).
- Anita Kinney also notes how pharmaceutical companies can be another avenue for obtaining funding for catchment area-relevant research.
 - o She may be introducing some of the Program Leaders to potential funders.
- It was noted that research on modifiable risk factors does not need to be directly related to the prioritized cancers.