

Thursday, June 20, 2019
4:00 to 5:00 pm
CINJ Boardroom 2003

Attendees:

Eileen White, Howard Hochster, Elisa Bandera, Cristine Delnevo (called in), Zhiyuan Shen, Chang Chan, Linda Tanzer, Sharon Manne, Edmund Lattime, Tracie Saunders, X.F. Steven Zheng, Stephen Burley, Anita Kinney, Yibin Kang (called in)

Agenda

1. Updates about Consortium Steering Committee membership
 - It was reported that CPC member Janet Currie declined serving on the Consortium Steering Committee.
 - There was agreement that further engagement work is needed for Princeton University faculty who would be appropriate for CPC Program membership.
 - Yibin Kang and Sharon Manne affirmed that they would be creating a separate committee specifically to engage Population Science-relevant faculty within the Consortium.
2. Transition of Population Science Shared Resource Directorship
 - It was reported that Elliot Coups had recently submitted his resignation, such that Sharon Manne was named as Interim Director of the Population Science Shared Resource. Efforts would begin to seek a replacement Director.
3. Updates about OHRS and clinical trials throughout the CINJ/RWJBH landscape
 - It was reported that the RWJBH system recently sent out a memo that, as of May 20th, Rutgers Cancer Institute must oversee all clinical research in oncology.
 - o All cancer clinical trials must go through the Disease Specific Group (DSG), SRB, and PRMC process.
 - While the process has been occurring for a while, the agreement has finally been reached. Trials can now be instituted and prioritized at the cancer institute.
 - o 188 clinical trials are now being managed by OHRS, due to involvement with the RWJBH system. Last year, there were only 100 trials.
 - o They are mostly NCTN trials, but there are also Rad/Onc registry trials.
 - Population Science trials will currently require collaborators. However, it should become easier to offer them as the health system builds its capacity.
 - o Sharon Manne noted that some pending R01 grants should be able to facilitate building the capacity.
 - The question was asked of whether IRB approval would be needed for every site.
 - o Howard Hochster is currently in communication with Rutgers Office of Risk Management, to see about Rutgers University always providing the IRB.
 - o There are currently agreements where the Rutgers University IRB oversees the hospitals' trials.
 - o There are efforts being made to have the hospitals use WIRB. However, there are costs associated with using WIRB, while there are no costs for using Rutgers University for the central IRB.
 - It was agreed that there need to be incentives for the hospitals to enroll patients onto trials.

- However, union regulations and other employment arrangements complicate matters, such that RVU cannot cover such incentivization.
 - A point system is an alternative incentive plan being considered.
 - It was reported that there are still several legal issues surrounding data sharing and other aspects of collaboration between Rutgers Cancer Institute and RWJBH.
 - All research is being paid by the Oncology Service line.
 - Trials are approved to open throughout the health system. It is hoped that they will open soon.
 - Edmund Lattime's research protocol with Parker Institute for Cancer Immunotherapy was reported as close to opening.
 - Another trial will open at the RWJBH site in Livingston, which will require travel from New Brunswick to Livingston until the research infrastructure is established at the site.
 - Since the RWJBH hospitals do not currently have an IBC, the Rutgers IBC might be used. Alternatively, the WIRB's IBC could be used, as doing so might be simpler than using the Rutgers IBC.
 - There is hope that the goal of 1000 per year in therapeutic accruals will be reached by the next CCSG site visit.
 - Eileen White raised the topic of seeing who within the RWJBH system could be leveraged to help with translational research, especially as that will be needed to get SPOREs.
 - Howard Hochster noted that there were individuals who could possibly be engaged in breast cancer prevention and primary care trials.
4. Policy on assignment of percent cancer relevance to grant support within the Programs
- Linda Tanzer asked the council members to see what trends are occurring at other site visits, regarding policies on assigning cancer relevance to grant support.
 - For now, the policy will remain for the Program Leaders to justify the cancer relevance for each grant over the next few years.
 - The policy will be reexamined at the time of the next year of record.
 - It was noted that the fixation over the cancer relevance of some members' funding that occurred at the recent CCSG site visit could have been a fluke.
 - Eileen White stated that the climate is changing, in that there are fewer Basic Research scientists on review panels, and so less acceptance of work with model organisms.
 - It was noted that one of the data tables in the last CCSG application did not include a column that explained the cancer relevance of each grant. The Program Leaders had instead justified grants whose cancer relevance was not clear.
 - It was agreed that mentioning the non-peer reviewed funding in the beginning of the CCSG application was probably not the best course of action.
 - Stephen Burley stated that he and X.F. Steven Zheng would meet with the CP Program members, to guide them on how to structure their abstracts, grants, etc. to show cancer relevance. He also added that it would be important to incentivize collaborative projects, whether they apply for NCI funding or funding from another NIH section. The pay lines of the NCI disincentivize CP program members from applying to the NCI for funding.
 - Another potential incentive could be additional discounts on using the Shared Resources.
 - There was a lot of support from the council for further discounts to use the Shared Resources.
 - However, the question was raised of how much of an additional discount could be offered. It was noted that there is also the matter of needing to

assess the current Shared Resources fee schedules overall. The suggestion was made to have a differing set of discounts to members, based on whether or not their research project had a cancer focus.

- Stephen Burley stated that they needed to get the CP Program members more engaged, or cull their membership.
- Eileen White advised that the CP Program Leaders should determine which incentive will be most appealing to their members.
- The Program Leaders were encouraged to think about how to incentivize collaborative research projects.
- The question was raised of whether there would be a way to do a keyword check across Rutgers University, to find out who was submitting abstracts relevant to cancer.

Next Meeting

Thursday, September 12, 2019 (4:00 pm to 5:00 pm, CINJ Boardroom 2003)