

Associate Directors Meeting MINUTES

MEETING DATE/TIME	August 9 th , 2021 / 1:00 – 2:00 pm				
EXECUTIVE OWNER	Eileen White/Anita Kinney				
EXECUTIVE NOTE TAKER	Gina Londino-Greenberg				
ATTENDEES		Present		Present	
	David August	X	Edmund Lattime	Х	
	Adam Berger	X	Gina Londino-Greenberg	X	
	Andrew Evens		Linda Tanzer		
	Shridar Ganesan	X	Allison Warzala		
	Howard Hochster	Х	Eileen White	Х	
	Yibin Kang				
	Anita Kinney	Х			

AGENDA TOPICS				
TOPIC	DISCUSSION/CONCLUSION	RECOMMENDATION /ACTION		
Urgent Issues (Team)				
Deputy Director's Report (White)				
Catchment Area Updates	A Catchment Area Dashboard is being started, which will provide information including maps, statistics, and biospecimen data (including race/ethnicity data of the biospecimens). A. Kinney's team is waiting on final confirmation of when the dashboard can go live. Once the dashboard becomes available, she and D. Pearson will give presentations on it at an AD meeting and RLC meeting, and arrange to present at Research Program meetings too. The Catchment Area Program Liaisons should be asked to attend the RLC meeting where A. Kinney presents on the dashboard. The available biospecimen data does not have all of the samples clinically annotated, yet the data is still a useful resource. These samples were obtained through Protocol 1209. Because the sample supply is limited, a process is in place to assess whether a study should have access to them. Protocol 1209 is getting opened at network hospitals (e.g., Jersey City Medical Center), such that diversity within the biospecimens is expected to increase. It was noted that several of the network hospitals have also begun participating in the Molecular Tumor Board. While it would be helpful to generate some standing sequence data from the biospecimens, Protocol 1209's current permissions require secondary consent for data sharing. Consequently, new PIs must be added onto the protocol in order to access the data. F. DiClemente (who supports the Molecular Tumor Board) is working on a project to show summary data from Foundation Medicine. However, dedicated programmers are needed for this project. A request for these additional staff has been placed with S. Libutti by S. Ganesan. A. Kinney is working with S. Pine to set baseline data on how many projects within each Research Program is catchment area relevant. They are also assessing how much catchment area relevance there currently is within the Research Programs' projects, and most Programs have shown increases. A process is also still being developed to ensure that the Program Leaders are reviewing studies for catchmen	G. Londino-Greenberg will work with A. Kinney and D. Pearson to arrange presentations at the AD and RLC meetings, and to have the Catchment Area Program Liaisons attend the RLC meeting where she will present.		

Policy Review: Assigning Cancer Relevance to Funding	Please see attached PowerPoint presentation. There was agreement that the relevant policies need to be made more accessible to leadership and members. Guidelines need to be generated to help the Program Leaders assign cancer relevance to grants and publications. There was discussion around what topics could be considered cancer-relevant. It was agreed that grants should be assigned 100% cancer relevance as much as possible. Research grants should not be assigned a cancer relevance lower than 50%, except in unique circumstances that should be assessed by the ADs. Training grants could have cancer relevance as low as 25%. Whenever these new guidelines (or any new policy or process) are implemented, the results/impact will need to be assessed. The External Advisory Board (EAB) should be asked to review the data tables in advance of the next EAB meeting.	G. Londino-Greenberg will work with L. Tanzer on how to make policies more readily accessible. G. Londino-Greenberg will prepare the list of cancerrelevant topics given, and then send out to the ADs and the Program Leaders for review and discussion at the September RLC meeting.
Policy Review: Program Membership	Please see attached PowerPoint presentation. There was agreement that the membership application form should be updated to better guide the applicants on describing the cancer relevance of their current and future research. H. Hochster suggested offering Research Program membership to Clinical Research Affiliates (clinicians at network hospitals leading clinical trials). It was agreed that they could be offered a level of membership that would not be counted in the CCSG. The ADs approved of the revised process for "Fast-Tracking" applications for resident research faculty recruits, namely that Program Leaders and ADs will be involved in the interview process and confer about what membership will be offered to the recruit. The ADs approved of the presented process for inclusion of prior accomplishments for new CCSG Program members. Due to time constraints, the proposed process for Member Reassignment/Reclassification will be reviewed at a future AD meeting.	G. Londino-Greenberg will update the membership application form and send for review. H. Hochster will work with G. Londino-Greenberg on the appropriate description of membership for the Clinical Research Affiliates. G. Londino-Greenberg will communicate with Faculty Affairs about the revised fast-tracking membership process.
Policy Review: Developmental Funds (New Investigator Awards and Pilot Awards)	Due to time limits, this topic will be reviewed at a future AD meeting.	
Next Meeting	September 13 th at 1:00 pm	