

**BETH C. DRAIN, CA CSR NO. 7152**

BEFORE THE  
APPLICATION REVIEW SUBCOMMITTEE OF THE  
INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE  
TO THE  
CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE  
ORGANIZED PURSUANT TO THE  
CALIFORNIA STEM CELL RESEARCH AND CURES ACT  
REGULAR MEETING

LOCATION: VIA ZOOM

DATE: OCTOBER 30, 2025  
8 A.M.

REPORTER: BETH C. DRAIN, CA CSR  
CSR. NO. 7152

FILE NO.: 2025-21

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**I N D E X**

<b>ITEM DESCRIPTION</b>	<b>PAGE NO.</b>
<b>OPEN SESSION</b>	
1. CALL TO ORDER	3
2. ROLL CALL	3
3. CONSIDERATION OF APPLICATIONS SUBMITTED IN RESPONSE TO INFRASTRUCTURE PROGRAM ANNOUNCEMENTS (INFR8)	5
<b>CLOSED SESSION</b>	<b>NONE</b>
4. DISCUSSION OF CONFIDENTIAL INTELLECTUAL PROPERTY OR WORK PRODUCT, PREPUBLICATION DATA, FINANCIAL INFORMATION, CONFIDENTIAL SCIENTIFIC RESEARCH OR DATA, AND OTHER PROPRIETARY INFORMATION RELATING TO APPLICATIONS SUBMITTED IN RESPONSE TO AGENDA ITEM 3 ABOVE. (HEALTH & SAFETY CODE 125290.30(F) (3) (B) AND (C)).	
<b>OPEN SESSION</b>	
5. GENERAL COMMENTS ON ARS PROCESS	NONE
6. PUBLIC COMMENT	NONE
7. ADJOURNMENT	23

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OCTOBER 30, 2025; 8 A.M.

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CHAIRMAN IMBASCIANI: SCOTT, DOES THAT  
MEAN WE HAVE QUORUM?

MR. TOCHER: WE DO.

CHAIRMAN IMBASCIANI: GREAT. OKAY.  
WE'LL -- SORRY, EVERYONE. I'M COMING TO YOU FROM A  
HOTEL ROOM VERY CLOSE TO THE OFFICES BECAUSE I'M  
INFECTIOUS AND DON'T WANT TO BRING THAT TO THE  
OFFICE.

WE CAN CONVENE THIS MEETING OF THE  
APPLICATION REVIEW SUBCOMMITTEE. THE FIRST ORDER OF  
BUSINESS, ROLL CALL.

MR. TOCHER: DAN BERNAL.

MR. BERNAL: PRESENT.

MR. TOCHER: MARIA BONNEVILLE.

VICE CHAIR BONNEVILLE: PRESENT.

MR. TOCHER: MARGUERITE CASILLAS.

MS. CASILLAS: PRESENT.

MR. TOCHER: JUDY CHOU.

DR. CHOU: PRESENT.

MR. TOCHER: LEONDRA CLARK-HARVEY.  
SHANNON DAHL.

DR. DAHL: PRESENT.

MR. TOCHER: ANNE-MARIE DULIEGE.

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1 DR. DULIEGE: PRESENT.  
2 MR. TOCHER: YSABEL DURON.  
3 MS. DURON: HERE.  
4 MR. TOCHER: MARK FISCHER-COLBRIE.  
5 MR. FISCHER-COLBRIE: HERE.  
6 MR. TOCHER: ELENA FLOWERS.  
7 DR. FLOWERS: PRESENT.  
8 MR. TOCHER: VITO IMBASCIANI.  
9 CHAIRMAN IMBASCIANI: HERE.  
10 MR. TOCHER: RICH LAJARA.  
11 MR. LAJARA: HERE.  
12 MR. TOCHER: CHRIS MIASKOWSKI. ADRIANA  
13 PADILLA.  
14 DR. PADILLA: HERE.  
15 MR. TOCHER: JOE PANETTA.  
16 MR. PANETTA: HERE.  
17 MR. TOCHER: MARV SOUTHARD.  
18 DR. SOUTHARD: HERE.  
19 MR. TOCHER: KAROL WATSON.  
20 DR. WATSON: HERE.  
21 MR. TOCHER: YAEL WYTE.  
22 MS. WYTE: HERE.  
23 MR. TOCHER: AND KEVIN XU.  
24 DR. XU: HERE.  
25 MR. TOCHER: THANK YOU VERY MUCH. MR.

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1 CHAIR, WE HAVE A QUORUM.

2 CHAIRMAN IMBASCIANI: EXCELLENT. THANK  
3 YOU, EVERYONE, FOR BEING HERE. IF YOU JUST PUT A  
4 SOUFFLE IN THE OVEN FOR 30 MINUTES, CHANCES ARE  
5 WE'LL BE DONE JUST IN TIME FOR YOU TO TAKE IT OUT.  
6 IT LOOKS LIKE A SHORT MEETING. AND I'M GOING TO  
7 START TRANSFERRING THE MICROPHONE TO GIL FOR HIS  
8 PRESENTATION. GIL, YOU'RE GOING TO ASSIGN IT TO  
9 SOMEONE. I'M SORRY.

10 DR. SAMBRANO: NO. I WILL BE DOING IT.  
11 THANK YOU --

12 CHAIRMAN IMBASCIANI: OKAY.

13 DR. SAMBRANO: -- VITO.

14 OKAY. SO THANK YOU VERY MUCH. GOOD  
15 MORNING TO MOST OF YOU AND GOOD EVENING TO SOME OF  
16 YOU. THANK YOU FOR JOINING TODAY.

17 SO I'M GOING TO PRESENT TO YOU THE  
18 RECOMMENDATIONS THAT ARE COMING FROM THE FACILITIES  
19 WORKING GROUP AND GRANTS WORKING GROUP RELATED TO  
20 THE COMMUNITY CARE CENTERS OF EXCELLENCE. IT'S AN  
21 INFRASTRUCTURE PROGRAM THAT WE ABBREVIATE INFR8.

22 WE START WITH, OF COURSE, OUR MISSION, TO  
23 ACCELERATE WORLD-CLASS SCIENCE TO DELIVER  
24 TRANSFORMATIVE REGENERATIVE MEDICINE TREATMENTS IN  
25 AN EQUITABLE MANNER TO A DIVERSE CALIFORNIA AND

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1 WORLD.

2 AS YOU KNOW, WE'VE DEVELOPED A STRATEGY  
3 THAT WE TERM THE SAF AND OUTLINED VERY SPECIFIC  
4 GOALS THAT ARE GOING TO MAXIMIZE OUR IMPACTS AND  
5 ALLOW US TO ACHIEVE THAT MISSION. AMONG THOSE GOALS  
6 ARE A COUPLE THAT THE COMMUNITY CARE CENTERS OF  
7 EXCELLENCE WILL HELP US ADDRESS. ONE OF THOSE IS TO  
8 ENSURE THAT EVERY PROGRAM THAT IS ESSENTIALLY AT THE  
9 CUSP OF BEING APPROVED HAS DEVELOPED A STRATEGY FOR  
10 ACCESS AND AFFORDABILITY. AND PART OF HELPING WITH  
11 THAT IS ENSURING THAT WE HAVE AN INFRASTRUCTURE THAT  
12 INCLUDES THINGS LIKE THE ALPHA CLINICS, THE PATIENT  
13 SUPPORT PROGRAM, THESE COMMUNITY CARE CENTERS OF  
14 EXCELLENCE THAT TOGETHER WILL FUNCTION AS A NETWORK  
15 TO ENSURE THAT WE HAVE APPROPRIATE REFERRAL,  
16 ENROLLMENT RETENTION OF CALIFORNIA PATIENTS INTO  
17 CLINICAL TRIALS THAT WE MAY BE FUNDING AND BEYOND.

18 ANOTHER GOAL IS TO BOLSTER CIRM'S  
19 WORKFORCE DEVELOPMENT PROGRAMS. AND SO AS A PART OF  
20 THE COMMUNITY CARE CENTERS OF EXCELLENCE ACTIVITIES,  
21 THE EXPECTATION IS THAT THESE PROGRAMS WILL HELP  
22 BOTH EDUCATE THE PUBLIC AS WELL AS HEALTHCARE  
23 WORKERS IN THE DELIVERY OF REGENERATIVE MEDICINE  
24 TREATMENTS.

25 AND SO THEN AS WE SEE THE OBJECTIVE OF

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1 THIS PROGRAM, IT IS CENTERED LARGELY AROUND THOSE  
2 TWO GOALS, THAT WE WILL CREATE CLINICAL RESEARCH  
3 CENTERS THAT ARE GOING TO EXPAND THE GEOGRAPHIC  
4 REACH OF CENTERS, THUS PROVIDING ADDITIONAL  
5 INFRASTRUCTURE IN THE DELIVERY OF CLINICAL TRIALS  
6 AND APPROVED THERAPIES AND ALSO DEVELOP A SKILLED  
7 WORKFORCE TO SUPPORT THE DELIVERY OF REGENERATIVE  
8 MEDICINE TREATMENTS AND ENSURE BROAD ACCESSIBILITY  
9 TO CALIFORNIA PATIENTS.

10 THE COMMUNITY CARE CENTERS OF EXCELLENCE  
11 PROGRAM IS REQUIRING THAT EACH OF THESE CENTERS  
12 PROVIDE A SERIES OF ACTIVITIES. AND SO, OF COURSE,  
13 THIS INCLUDES HELPING INITIATE CLINICAL TRIAL  
14 AGREEMENTS WITH SPONSORS TO OUR CONDUCTING OR  
15 TESTING A NEW THERAPEUTIC SO THAT THEY CAN  
16 ADMINISTER THOSE TREATMENTS LOCALLY AS WELL AS THE  
17 DELIVERY OF ANY APPROVED PRODUCTS THAT MAY EXIST.  
18 AND AS PART OF THAT, WE EXPECT THAT THEY'RE GOING TO  
19 DEVELOP OPERATIONS AND MANAGEMENT SYSTEMS THAT WILL  
20 ALLOW THEM TO DO THESE ACTIVITIES, INCLUDING  
21 POTENTIALLY MANUFACTURING, PROCESSING, AND, OF  
22 COURSE, THE DELIVERY OF THOSE THERAPIES.

23 WE EXPECT THAT THEY WILL HELP ENROLL AND  
24 PROVIDE COORDINATED CARE TO PATIENTS, HELP IDENTIFY  
25 COHORTS, PARTICIPATE IN OUTREACH AND ENGAGEMENT OF

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1 PATIENTS, PROVIDE PATIENT NAVIGATION, CLINICAL  
2 RESEARCH SUPPORT, CAREER DEVELOPMENT, AS MENTIONED,  
3 PARTICULARLY WITH HEALTHCARE WORKERS, WHO CAN TRAIN  
4 IN THE DELIVERY OF REGENERATIVE MEDICINE PRODUCTS.

5 THERE'S ALSO AN EXPECTATION IN THESE  
6 PROGRAMS THAT THEY WILL PARTNER WITH COMMUNITY-BASED  
7 ORGANIZATIONS. AND THERE'S ACTUALLY A MINIMUM  
8 DOLLAR AMOUNT THAT'S REQUIRED FOR THEM TO DO THIS  
9 OUTREACH TO DEVELOP PARTNERSHIPS AND COLLABORATE  
10 WITH THESE PARTNERS IN ORDER TO REDUCE DISPARITY AND  
11 SUPPORT BROAD REPRESENTATION IN TRIALS.

12 THERE ARE EXPECTATIONS OF KNOWLEDGE  
13 SHARING AMONG THE COMMUNITY CARE CENTERS OF  
14 EXCELLENCE AND WHERE REQUESTED WE'RE ALLOWING THE  
15 RENOVATION OF FACILITIES TO ALLOW THESE INSTITUTIONS  
16 TO HELP TAILOR THEIR PROGRAMS APPROPRIATELY TO WHAT  
17 WE ARE ASKING THEM TO DO.

18 ALL RIGHT. SO THIS IS JUST A SUMMARY  
19 TABLE OF THE PROGRAM OVERALL. THE SCOPE, AS  
20 MENTIONED, IS TO CONDUCT FDA-AUTHORIZED CLINICAL  
21 TRIALS THAT INVOLVE STEM-CELL BASED OR GENETIC  
22 REGENERATIVE MEDICINE THERAPIES AND TO DELIVER THOSE  
23 THERAPIES AS PART OF THE CLINICAL TRIAL OR AS  
24 APPROVED PRODUCTS IF THEY ARE APPROVED. THE  
25 OPPORTUNITY WAS AVAILABLE TO CALIFORNIA NON-PROFITS

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1 WHO COULD APPLY AND DEVELOP THESE PROGRAMS. FOR THE  
2 PROGRAM DIRECTOR THERE WAS A MINIMUM 30-PERCENT  
3 EFFORT COMMITMENT THAT WAS REQUIRED. WE HAVE AN  
4 ALLOCATION OF 36 MILLION FOR THIS PROGRAM AT THIS  
5 TIME WITH 9 MILLION MAXIMUM PER AWARD. AND THE  
6 DURATION OF THAT AWARD IS FIVE YEARS.

7 THIS IS AN OVERVIEW OF THE PROCESS THAT  
8 WAS USED TO ASSESS THESE APPLICATIONS. SO WE HAD  
9 APPLICATIONS THAT WERE SUBMITTED. THEY WENT THROUGH  
10 THE INITIAL ELIGIBILITY PROCESS TO ENSURE THAT THEY  
11 ARE ELIGIBLE. APPLICATIONS THAT WERE THEN ACCEPTED  
12 FOLLOWING ELIGIBILITY WENT ON TO THE MERIT REVIEW.  
13 AND THIS WAS SPLIT INTO TWO PHASES BECAUSE WE HAD  
14 SOME APPLICATIONS THAT PROPOSED FACILITIES  
15 COMPONENTS. AND SO THAT FACILITIES RENOVATION  
16 PROPOSAL WAS REVIEWED BY THE FACILITIES WORKING  
17 GROUP ON SEPTEMBER 4TH. AND THEN THE SCIENTIFIC  
18 PROPOSAL, THE MAIN CONTENT OF THE APPLICATIONS, WERE  
19 REVIEWED BY THE GRANTS WORKING GROUP ON SEPTEMBER  
20 10TH. AND THE OUTCOME OF THOSE REVIEWS IS THE  
21 RECOMMENDATION, THAT I WILL SHOW YOU IN JUST A  
22 SECOND, FROM THOSE WORKING GROUPS TO THE BOARD WHICH  
23 WILL MAKE THE FINAL FUNDING DECISION, WHICH WE ARE  
24 DOING TODAY.

25 THE SCORING SYSTEM THAT WAS USED FOR THIS

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1 PARTICULAR COMPETITION WAS ON A SCALE OF ONE TO A  
2 HUNDRED. SO REVIEWERS SCORED THESE APPLICATIONS  
3 BETWEEN ONE AND A HUNDRED WITH A MEDIAN SCORE OF 85  
4 TO A HUNDRED, MEANING THAT THE APPLICATION WAS  
5 DEEMED TO HAVE EXCEPTIONAL MERIT AND WARRANTS  
6 FUNDING. ANYTHING BELOW THAT MEANS THAT THE  
7 APPLICATION IS NOT RECOMMENDED FOR FUNDING.

8 THERE'S TWO SETS OF REVIEW CRITERIA, ONE  
9 FOR THE GRANTS WORKING GROUP AND ONE FOR THE  
10 FACILITIES WORKING GROUP. THE GRANTS WORKING GROUP  
11 REVIEW CRITERIA INCLUDE ASSESSING THE VALUE  
12 PROPOSITION, WHICH, OF COURSE, IS IMPORTANT. TO  
13 WHAT EXTENT DOES THIS PROPOSED CENTER OFFER  
14 IMPACTFUL AND PRACTICAL VALUE PROPOSITION FOR  
15 PATIENTS, TRIAL SPONSORS, AND HEALTHCARE PROVIDERS?  
16 OF COURSE, THEY NEED TO HAVE A GOOD PLAN AND DESIGN  
17 TO CARRY OUT THE CLINICAL OPERATIONS AND ACTIVITIES,  
18 HAVE A FEASIBLE PROJECT TO BE ABLE TO ACCOMPLISH ALL  
19 THAT THEY INTEND TO DO AND ALSO THAT IS REQUESTED,  
20 AND ENSURING THAT THEY'RE SERVING THE NEEDS OF  
21 CALIFORNIA PATIENTS AND AFFECTED COMMUNITIES. SO  
22 THAT WERE THE REVIEW CRITERIA UTILIZED BY THE GRANTS  
23 WORKING GROUP.

24 THE FACILITIES WORKING GROUP FOCUSED ON  
25 THE FACILITY RENOVATION ELEMENTS. AND SO THESE

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1 CRITERIA FOCUS ON THAT. LOOKING AT THE  
2 APPROPRIATENESS OF THE RENOVATION AND FACILITIES  
3 IMPROVEMENT TO SUPPORT THE ACTIVITIES THAT ARE  
4 PROPOSED. SO THEY LOOKED AT IT FROM THE PERSPECTIVE  
5 OF DO THEY HAVE THE APPROPRIATE SPACE AND ARE THE  
6 RENOVATIONS AND LAYOUT AND SO ON APPROPRIATE FOR  
7 WHAT THEY INTEND TO DO? THE FEASIBILITY OF MAKING  
8 THOSE RENOVATIONS AND IMPROVEMENTS, AND THE  
9 APPROPRIATENESS OF THE IMPROVEMENT COSTS, THAT THEY  
10 ARE APPROPRIATELY BUDGETED AND ARE WITHIN REASONABLE  
11 COST.

12 OKAY. SO WITH THAT, HERE IS A SUMMARY IN  
13 THE FORM OF A TABLE. YOU ALSO HAVE A TABLE ALONG  
14 WITH THE SUMMARIES THAT ARE AVAILABLE TO YOU FOR  
15 EACH OF THE APPLICATIONS. WE HAVE FOUR APPLICATIONS  
16 FOR CONSIDERATION. SO I'LL TAKE YOU THROUGH THIS  
17 TABLE JUST TO ORIENT YOU.

18 SO FIRST, IN THE BLUE COLUMNS, WE HAVE THE  
19 SCORE FROM THE GRANTS WORKING GROUP, WHICH  
20 REPRESENTS THE MEDIAN SCORE, AS WELL AS WHAT THE  
21 HIGHEST AND LOWEST SCORE BY THE GWG WERE. AND THEN  
22 UNDER THE 85 OR GREATER, IT SAYS YES OR NO. SO  
23 THOSE ARE THE NUMBER OF GRANTS WORKING GROUP MEMBERS  
24 THAT SCORED 85 OR ABOVE OR BELOW 85. SO IN THE  
25 FIRST ROW YOU HAVE 15 THAT SCORED 85 OR ABOVE AND

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1 NONE THAT SCORED BELOW.

2 NEXT TO THAT YOU HAVE IN THE ORANGE THE  
3 FACILITIES WORKING GROUP'S SCORES. SO YOU HAVE THE  
4 MEDIAN SCORE FROM THE FACILITIES WORKING GROUP,  
5 AGAIN, THE HIGHEST AND LOWEST SCORE BY THE GROUP,  
6 AND THEN THE NUMBER THAT SCORED 85 OR ABOVE OR BELOW  
7 THAT.

8 AND THEN IN THE LAST COLUMN WE HAVE THE  
9 CIRM RECOMMENDATION THAT FOR THE MOST PART ALIGNS  
10 WITH THE RECOMMENDATIONS FROM THE WORKING GROUPS.  
11 SO THE THREE APPLICATIONS THAT ARE SHOWN -- THESE  
12 ARE SHOWN IN RANK ORDER -- THE THREE TOP  
13 APPLICATIONS ALL RECEIVED A SCORE OF 85 OR GREATER  
14 FROM THE GRANTS WORKING GROUP AS WELL AS THE  
15 FACILITIES WORKING GROUP. THERE'S ONE APPLICATION  
16 THAT DID NOT REQUEST FACILITIES RENOVATIONS. SO  
17 THERE'S NO FACILITIES WORKING GROUP SCORE. SO THAT  
18 DOES NOT APPLY.

19 AND THEN, OF COURSE, WE HAVE ONE  
20 APPLICATION THAT DID NOT SCORE SUFFICIENTLY HIGH  
21 ENOUGH TO WARRANT A RECOMMENDATION. AND SO THAT  
22 APPLICATION DID NOT HAVE A FACILITIES WORKING GROUP  
23 SCORE EITHER BECAUSE IT DID NOT PROPOSE A FACILITY.  
24 CIRM TEAM RECOMMENDATION IS NOT TO FUND THIS  
25 APPLICATION.

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1           A REMINDER, AGAIN, WE HAVE AVAILABLE 36  
2           MILLION THAT WAS ALLOCATED TO THIS PROGRAM. THE  
3           AMOUNT THAT'S RECOMMENDED, IF WE ADD THE THREE  
4           APPLICATIONS UP, IS 26 -- WELL, ALMOST 27 MILLION.  
5           SO CERTAINLY WITHIN THE ALLOCATED AMOUNT.

6           ALL RIGHT. SO WITH THAT, I'M JUST GOING  
7           TO GO TO THIS SLIDE JUST TO REMIND FOLKS ABOUT WHO  
8           HAS A CONFLICT OF INTEREST. AND SCOTT AND CLAUDETTE  
9           CAN PROVIDE ANY ADDITIONAL DETAILS ON THESE  
10          CONFLICTS AND MAKE SURE THAT VOTING AND SPEAKING IS  
11          DONE IN ACCORDANCE WITH THAT.

12          SO, MR. CHAIRMAN, I'LL HAND THAT BACK TO  
13          YOU FOR ANY QUESTIONS.

14          CHAIRMAN IMBASCIANI: THANK YOU SO MUCH,  
15          GIL. THAT WAS A VERY SUCCINCT PRESENTATION. LOVE  
16          YOUR GRAPH. IT EXPLAINS A LOT.

17          THE CHAIR WOULD LIKE TO HAVE A MOTION  
18          PLEASE TO FUND THE RECOMMENDED APPLICATIONS FROM THE  
19          TEAM.

20          DR. DULIEGE: I MOVE.

21          CHAIRMAN IMBASCIANI: AND THAT WAS FROM,  
22          I'M SORRY?

23          DR. DULIEGE: ANNE-MARIE.

24          CHAIRMAN IMBASCIANI: ANNE-MARIE DULIEGE.  
25          THANK YOU, ANNE-MARIE. WE NEED A SECOND.

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1 MR. PANETTA: SECOND.

2 MR. TOCHER: I HEARD JOE.

3 MR. PANETTA: I'LL SECOND.

4 CHAIRMAN IMBASCIANI: I KNOW WE HAVE A LOT  
5 OF PEOPLE THAT ARE CONFLICTED ON THIS. SO THOSE OF  
6 YOU THAT ARE NOT ARE MORE IN THE HOT SEAT.

7 OKAY. SO WE HAVE A MOTION AND A SECOND.  
8 SO THIS IS OPEN FOR DISCUSSION BY BOARD MEMBERS.

9 MR. TOCHER: VITO, I'M SORRY. THIS IS  
10 SCOTT. CAN I GET CLARIFICATION? IS THE MOTION TO  
11 ACCEPT THE WORKING GROUP RECOMMENDATIONS --

12 CHAIRMAN IMBASCIANI: IT IS, YES.

13 MR. TOCHER: -- IN IT'S ENTIRETY?

14 CHAIRMAN IMBASCIANI: IN ITS ENTIRETY,  
15 RIGHT. THAT MEANS TO FUND THE ONES THAT WERE  
16 RECOMMENDED AND NOT TO FUND THE ONE THAT WAS NOT  
17 RECOMMENDED. SORRY IF I INVERTED THAT.

18 IS THERE ANY MEMBER OF THE GENERAL PUBLIC  
19 THAT HAS A COMMENT? I'M LOOKING FOR CLAUDETTE HERE  
20 NOW.

21 MS. MANDAC: NO HANDS RAISED.

22 CHAIRMAN IMBASCIANI: NO ONE HAS THEIR  
23 HAND RAISED. OKAY. ONE LAST CHANCE FROM BOARD  
24 MEMBERS, THE FEW OF YOU THAT ARE NOT IN CONFLICT.  
25 IF NOT, I HAVE A COMMENT AFTER THE VOTE THOUGH.

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1 DR. DULIEGE: MAYBE A QUICK QUESTION FOR  
2 ME.

3 CHAIRMAN IMBASCIANI: YES. GIL.

4 DR. DULIEGE: GIL, CAN YOU GIVE US A SENSE  
5 OF FOR THOSE APPLICATIONS HOW LONG IT'S GOING TO  
6 TAKE FOR THEM TO PUT IN PLACE THEIR PROGRAM? AND  
7 WHEN WILL THEY BE EFFECTIVE? DO WE HAVE A SENSE OF  
8 TIMELINESS HERE?

9 DR. SAMBRANO: WE DO. SO OUR EXPECTATION  
10 IS THAT THEY WILL, INCLUDING THOSE THAT HAVE  
11 FACILITIES, WILL DO THAT WITHIN THE FIRST SIX  
12 MONTHS. SO ONCE THE AWARD LAUNCH, WITHIN SIX MONTHS  
13 THEY CAN HAVE THEIR FACILITIES IN PLACE. EVEN IF IT  
14 TAKES A LITTLE LONGER, THEY'LL HAVE OVER FOUR YEARS  
15 OF ABILITY TO DELIVER ON THOSE ACTIVITIES THAT THEY  
16 ARE PROPOSING TO DO.

17 DR. DULIEGE: GREAT. THANK YOU. AND WILL  
18 THERE BE AN INVOLVEMENT OF CIRM OVER TIME TO SUPPORT  
19 THEIR PROGRAM, TO SUPPORT AND PROVIDE OVERSIGHT OF  
20 THEIR PROGRAM AND DELIVERABLES?

21 DR. SAMBRANO: YES. ABSOLUTELY. SO IT'S  
22 GOING TO BE OVERSIGHT ON THE PROGRAM AS WELL AS WHAT  
23 WE TEND TO DO WITH A LOT OF OUR PROGRAM IS BRING THE  
24 PROGRAM DIRECTORS TOGETHER TO TALK ABOUT WAYS IN  
25 WHICH THEY CAN COLLABORATE, CREATE EFFICIENCIES, AND

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1 ALSO BRINGING THEM TOGETHER WITH THE ALPHA CLINICS  
2 BECAUSE THAT'S AN IMPORTANT PARTNERSHIP THAT THEY  
3 HAVE, ALONG WITH OTHER COMMUNITY-BASED  
4 ORGANIZATIONS, MANY OF WHICH ARE PROPOSED BY EACH OF  
5 THESE PROGRAMS. BUT ALSO WHERE WE CAN HELP  
6 FACILITATE SOME OF THOSE PARTNERSHIPS, WE WILL HELP  
7 WITH THAT AS WELL.

8 DR. DULIEGE: GREAT. THANK YOU.

9 MS. DURON: AM I ALLOWED TO ASK A  
10 QUESTION?

11 CHAIRMAN IMBASCIANI: YES. YES. WAIT,  
12 YSABEL.

13 MS. DURON: NO?

14 MR. TOCHER: NO.

15 MS. DURON: NO. OKAY.

16 CHAIRMAN IMBASCIANI: OKAY.

17 MS. DURON: THAT'S WHY I ASKED IF I COULD  
18 ASK.

19 CHAIRMAN IMBASCIANI: GOOD. THANK YOU SO  
20 MUCH FOR ADHERING.

21 IF THERE ARE NO OTHER QUESTIONS OR  
22 COMMENTS, I'M GOING TO ASK SCOTT TO CALL THE ROLL  
23 THEN, THE VOTE.

24 MR. TOCHER: AND WHEN I CALL THE NAMES OF  
25 THOSE INDIVIDUALS WHO HAVE A CONFLICT, PLEASE STATE

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1 YOUR VOTE AND ADD THE TYPICAL LANGUAGE OF EXCEPT FOR  
2 THOSE WITH WHICH I AM IN CONFLICT.

3 DAN BERNAL.

4 MR. BERNAL: AYE, EXCEPT FOR THOSE WITH  
5 WHICH I'M IN CONFLICT.

6 MR. TOCHER: MARIA BONNEVILLE.

7 VICE CHAIR BONNEVILLE: YES, EXCEPT FOR  
8 THOSE WITH WHICH I HAVE A CONFLICT.

9 MR. TOCHER: MARGUERITE CASILLAS.

10 MS. CASILLAS: YES.

11 MR. TOCHER: JUDY CHOU.

12 DR. CHOU: YES.

13 MR. TOCHER: SHANNON DAHL.

14 DR. DAHL: YES.

15 MR. TOCHER: ANNE-MARIE DULIEGE.

16 DR. DULIEGE: YES.

17 MR. TOCHER: YSABEL DURON.

18 MS. DURON: YES, EXCEPT FOR THOSE WITH  
19 WHICH I AM IN CONFLICT.

20 MR. TOCHER: MARK FISCHER-COLBRIE.

21 MR. FISCHER-COLBRIE: YES, EXCEPT FOR  
22 THOSE WITH WHICH I HAVE A CONFLICT.

23 MR. TOCHER: ELENA FLOWERS.

24 DR. FLOWERS: YES, EXCEPT FOR THOSE WITH  
25 WHICH I HAVE A CONFLICT.

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1 MR. TOCHER: VITO IMBASCIANI.

2 CHAIRMAN IMBASCIANI: YES.

3 MR. TOCHER: RICH LAJARA.

4 MR. LAJARA: YES.

5 MR. TOCHER: ADRIANA PADILLA.

6 DR. PADILLA: YES, EXCEPT FOR THOSE WITH  
7 WHICH I HAVE A CONFLICT.

8 MR. TOCHER: JOE PANETTA.

9 MR. PANETTA: YES.

10 MR. TOCHER: MARV SOUTHARD.

11 DR. SOUTHARD: YES.

12 MR. TOCHER: KAROL WATSON.

13 DR. WATSON: YES, EXCEPT FOR THOSE WITH  
14 WHICH I HAVE A CONFLICT.

15 MR. TOCHER: YAEL WYTE.

16 MS. WYTE: YES.

17 MR. TOCHER: KEVIN XU.

18 DR. XU: YES.

19 MR. TOCHER: THANK YOU. THE MOTION  
20 CARRIES, MR. CHAIR.

21 CHAIRMAN IMBASCIANI: THANK YOU VERY MUCH,  
22 SCOTT.

23 I WANT TO MAKE AN EDITORIAL COMMENT HERE  
24 FOR THE SAKE OF THE BOARD. I'M VERY HAPPY WITH THE  
25 CHOICES WE'VE MADE TODAY ON THE BASIS OF MERIT. THE

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1 APPLICATIONS THAT WERE SUCCESSFUL MERITED THEIR  
2 SUCCESS. BUT WHEN IT BECOMES APPARENT TO YOU WHERE  
3 THE INSTITUTIONS ARE LOCATED THAT HAVE BEEN  
4 SUCCESSFUL, YOU WILL SEE, ONCE AGAIN, THAT LARGE  
5 SWATHS OF CALIFORNIA WILL REMAIN UNDERSERVED BY  
6 CIRM'S ACTIVITIES.

7 MOST OF CIRM'S CLINICS AND UNIVERSITIES,  
8 WITH THE EXCEPTION OF TWO MAJOR UNIVERSITIES, ONE IN  
9 THE CAPITAL AND ONE IN THE CENTRAL VALLEY, MOST OF  
10 THE ACTIVITIES ARE ON THE COAST. AND I'M VERY  
11 CONCERNED THAT EVEN HERE AT THE FIRST OF OUR FURTHER  
12 EXPANSIONS OF OUR ALPHA CLINICS AND THE CENTERS OF  
13 EXCELLENCE THAT WE ARE LEAVING FULLY HALF OF THE  
14 COUNTIES OF CALIFORNIA, AND THAT INCLUDES HIGH  
15 DESERT, HIGH ALPINE, FULLY HALF OF THE 118 FEDERALLY  
16 RECOGNIZED INDIAN TRIBES IN THE STATE WITH NO EASY  
17 ACCESS.

18 AND I HAVE PERSONAL EXPERIENCE. I'VE BEEN  
19 TO ALL THOSE COUNTIES A FEW YEARS BACK IN AN ATTEMPT  
20 TO CONNECT VETERANS TO THEIR BENEFITS, HOUSING,  
21 EDUCATION, HEALTH, AND JOB EMPLOYMENT. IT'S VERY,  
22 VERY DIFFICULT.

23 SO THIS IS A HEALTH-RELATED INITIATIVE.  
24 AND SO I'M GOING TO ASK THE CIRM TEAM ON BEHALF OF  
25 THE BOARD, AND SCOTT WILL CORRECT ME IF I DON'T HAVE

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1 THE ABILITY TO DO THIS, TO GO BACK AND CONSIDER AND  
2 PLEASE REPORT BACK TO THE ICOC HOW WE CAN ADDRESS IN  
3 A SUBSEQUENT ROUND, BECAUSE WE ONLY EXPENDED 27  
4 MILLION OF OUR 36. I THINK THAT LEAVES ANOTHER 9  
5 MILLION, INVESTIGATE THE STILL UNDERSERVED PARTS OF  
6 CALIFORNIA AND REPORT BACK TO THIS BOARD WITH ANY  
7 PROPOSED REMEDIES.

8 DR. THOMAS: IF I MAY, THANK YOU FOR YOUR  
9 COMMENT. WE HAVE HAD A LOT OF DISCUSSION ON THIS  
10 TOPIC IN-HOUSE HERE, AND WE'LL BE LOOKING TO REPORT  
11 BACK TO THE BOARD IN DECEMBER ON CONSIDERATIONS  
12 FURTHER TO YOUR SUGGESTION. WE'RE AWARE OF THE  
13 ISSUE, OF COURSE, OF GEOGRAPHICAL DIVERSITY WITH  
14 RESPECT TO THIS PARTICULAR PROGRAM. SO WE WILL BE  
15 BACK TO TALK TO YOU AND GIVE YOU OUR BEST INFORMED  
16 THINKING AT THIS POINT. THANK YOU.

17 MS. DURON: CAN I TALK NOW, SCOTT?

18 MR. TOCHER: YOU MAY.

19 MS. DURON: THANKS. I THINK, FIRST OF  
20 ALL, IT WOULD BE REALLY CRITICAL TO KNOW WHO EXACTLY  
21 HAS BEEN AWARDED AND WE KNOW, SECONDLY, WHAT THEIR  
22 PLAN IS PERHAPS TO REACH OUT FURTHER GEOGRAPHICALLY  
23 TO SOME OF THESE UNDERSERVED AREAS THAT YOU'RE  
24 TALKING ABOUT, VITO. AND I THINK, THIRDLY, PERHAPS,  
25 DEPENDING ON WHO THEY ARRANGE OR HAVE RELATIONSHIPS

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1 WITH IN TERMS OF THOSE COMMUNITY-BASED  
2 ORGANIZATIONS, THAT MIGHT HELP CREATE SOME BRIDGES.  
3 BUT I THINK, THEREFORE, IT BECOMES VERY, VERY, VERY  
4 CRITICAL TO MAKE SURE THAT WE'RE WORKING WITH SOME  
5 OF THOSE COMMUNITY-BASED ORGANIZATIONS, FINDING THEM  
6 IN THOSE AREAS SO THAT SOMEHOW THEY CAN FIGURE OUT  
7 PLANS IN WHICH TO DECREASE THAT DISPARITY.

8 CHAIRMAN IMBASCIANI: THANK YOU, YSABEL.  
9 WITHOUT SPILLING ANY BEANS, I CAN TELL YOU THAT,  
10 WHILE THE MAP EXPANDS IN CERTAIN DIRECTIONS, IT  
11 STILL LEAVES PRACTICALLY THE WHOLE NORTH HALF OF THE  
12 STATE AND OUR MOST EASTERN -- MOST EAST -- OUR  
13 EASTERNMOST COUNTIES WITHOUT ACCESS.

14 MS. DURON: YES, BUT THOSE COMMUNITIES DO  
15 HAVE COMMUNITY-BASED ORGANIZATIONS. SO SOMEHOW IF  
16 THERE'S SOME KIND OF A LIAISON, A RELATIONSHIP, AN  
17 OPPORTUNITY TO BEGIN TO NARROW THAT RELATIONSHIP AND  
18 THAT GAP, IT'S REALLY DEPENDENT TO ME ON THESE LARGE  
19 INSTITUTIONS TO MAKE REALLY GREAT EFFORTS TO SEE HOW  
20 THEY CAN BUILD OUT SINCE WE ONLY HAVE, WHAT, MAYBE 9  
21 MILLION, 10 MILLION LEFT, WHICH MIGHT BE ONE MORE  
22 MAJOR INSTITUTION TO DO THIS WORK. SO WE'RE REALLY  
23 GOING TO HAVE TO LOOK DEEP AT THEIR RELATIONSHIPS  
24 EXTERNAL -- YOU KNOW, IN THESE AREAS. AND WE HAVE  
25 TO BE VERY SERIOUS, I THINK, WITH WHEN WE START

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1 CONTRACTING WITH THE COMMUNITY-BASED ORGANIZATIONS  
2 TO SEE IF WE CAN'T BEGIN TO BRIDGE SOME OF THAT GAP.

3 CHAIRMAN IMBASCIANI: PRECISELY. THANK  
4 YOU, YSABEL. I SEE SHANNON WANTS TO ADD.

5 DR. DAHL: YEAH. I CAN'T HELP BUT THINK  
6 ABOUT HOW SOME INSTITUTIONS ARE REALLY EXCELLENT AT  
7 WRITING GRANTS. AND I'M NOT SURE IF OTHERS HAVE  
8 THIS SKILL SET AND EXPERIENCE OF DOING SO. AND SO I  
9 WONDER IF THERE'S A BIT OF A PROBLEM HERE OF IF YOU  
10 GET THE MONEY, YOU CAN BRING ON THE TEAM TO REALLY  
11 REFINE AND IMPLEMENT A PLAN VERSUS IF YOU CAN'T GET  
12 THE MONEY, THEN YOU CAN'T GO IN THOSE DIRECTIONS.  
13 SO I THINK MAYBE THAT'S ANOTHER DIMENSION FOR US TO  
14 CONSIDER IS IF THERE'S EXTRA SUPPORT WE CAN OFFER IN  
15 PUTTING TOGETHER APPLICATIONS OR SUCH SO THAT WE'RE  
16 REALLY EVALUATING THE MERITS OF THE PLAN AND NOT THE  
17 SKILL SET OF WRITING GRANTS.

18 CHAIRMAN IMBASCIANI: ANYONE HAVE A  
19 COMMENT TO THAT? I DON'T WANT TO PUT GIL ON THE  
20 SPOT, BUT...

21 MS. WYTE: NOT EVERYONE IS A GREAT GRANT  
22 WRITER.

23 CHAIRMAN IMBASCIANI: I'M SORRY. I DIDN'T  
24 HEAR THE BEGINNING OF THAT.

25 MS. WYTE: I WAS JUST SAYING THAT I AGREE

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1 THAT NOT EVERYONE IS BLESSED WITH THE POWERS OF  
2 BEING A GREAT GRANT WRITER TO MAKE IT ALL EQUAL, BUT  
3 THAT IS SUCH AS THE WORLD.

4 CHAIRMAN IMBASCIANI: ALL RIGHT. WELL, WE  
5 HAVE A COMMITMENT FROM OUR PRESIDENT TO STUDY THE  
6 MATTER AND REPORT BACK. I THINK THIS IS A GREAT WAY  
7 TO END THIS. AND I THANK YOU ALL VERY MUCH FOR  
8 ATTENDING. I THINK IS THERE ANY OTHER BUSINESS,  
9 SCOTT?

10 MR. TOCHER: JUST PUBLIC COMMENT FOR ANY  
11 ITEM NOT ON THE AGENDA.

12 CHAIRMAN IMBASCIANI: AND IF THERE'S ANY  
13 MEMBERS OF THE PUBLIC THAT WOULD LIKE TO TALK ABOUT  
14 ANYTHING THAT HAS NOT BEEN FORMALLY AGENDIZED FOR  
15 THIS MEETING, THIS IS YOUR OPPORTUNITY TO SPEAK.

16 MR. TOCHER: THERE ARE NO HANDS RAISED.

17 CHAIRMAN IMBASCIANI: OKAY. THANK YOU,  
18 CLAUDETTE. SO I GUESS THEN WE ARE DONE, AND WE WILL  
19 MEET AGAIN IN DECEMBER AT THE END OF YOUR BOARD  
20 MEETING, I THINK, ON THE 11TH. THANK YOU SO MUCH,  
21 EVERYONE, ESPECIALLY THOSE FOR WHOM IT'S MIDNIGHT OR  
22 WELL PAST. THANK YOU.

23 VICE CHAIR BONNEVILLE: THANKS, EVERYONE.

24 (THE MEETING WAS THEN CONCLUDED AT 8:27 A.M.)

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REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE VIRTUAL PROCEEDINGS BEFORE THE APPLICATION REVIEW SUBCOMMITTEE OF THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD ON OCTOBER 30, 2025, WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE REPORTED STENOGRAPHICALLY BY ME AND TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

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