

# *California Institute for Regenerative Medicine*

## **Minutes of the Independent Citizens Oversight Committee (ICOC) to the California Institute for Regenerative Medicine (CIRM)**

Meeting on January 6, 2005

University of Southern California  
Keck School of Medicine  
Mayer Auditorium, Keith Administration Building  
1975 Zonal Avenue, Los Angeles, CA 90003

### Roll Call

David Baltimore <i>Surrogate: Provost Paul Jennings</i>	Present
Robert Birgeneau	Present
Keith L. Black	Present
Susan V. Bryant	Present
Michael A. Friedman	Present
Michael Goldberg	Present
Brian E. Henderson	Present
Edward W. Holmes	Present
David A. Kessler	Present
Robert Klein	Present
Sherry Lansing	Present
Gerald S. Levey	Present
Ted W. Love	Present
Richard A. Murphy	<i>Absent</i>

Tina S. Nova	Present
Ed Penhoet	Present
Philip A. Pizzo	Present
Claire Pomeroy	Present
Phyllis Preciado	Present
Francisco J. Prieto	Present
John C. Reed	Present
Joan Samuelson	Present
David Serrano Sewell	Present
Jeff Sheehy	Present
Jonathon Shestack	Present
Oswald Steward	Present
Leon J. Thal	Present
Gayle Wilson	Present
Janet S. Wright	Present

### ***Agenda Item #4***

***Overview of the State's financial responsibility requirements, including the availability of, and claiming procedures for, the start up loan authorized pursuant to Section 125290.70(b) of the California Stem Cell Research and Cures Act (Act).***

Walter Barnes, Chief Deputy Controller, Finance, gave an overview to the Independent Citizens Oversight Committee regarding financial aspects of the California Institute for Regenerative Medicine (CIRM).

### ***Start up Loan***

***(See Proposition 71- Stem Cell Research Initiative \$3,000,000 Temporary Start-Up Loan at [www.cirm.ca.gov](http://www.cirm.ca.gov) for a copy of this handout and to view a sample loan request.)*** The California Institute of Regenerative Medicine (CIRM) must submit a request to draw on these funds, specifying the amount and frequency the draw will be made (e.g., quarterly, monthly). Funds are then transferred to the CIRM. The loan is interest bearing and the CIRM must pay full rate. If all \$3 million is taken at once, interest will likely add up to approximately \$66 million. After 12 months it must be paid in full on an incremental basis (that is funds borrowed in the first month must be repaid by the 13<sup>th</sup> month, funds borrowed in the second month must be repaid by the 14<sup>th</sup> month.)

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Until California Institute for Regenerative Medicine (CIRM) is set up, the act states that chair or other Independent Citizens Oversight Committee (ICOC) designee can request funding. Walter suggests that the appropriate person from the State Controller's Office will be happy to discuss procedures with the ICOC member appointed to request funds.

Funding is currently available for expenditures, but the CIRM must have an infrastructure set up so that the Controller's office can pay bills on behalf of the CIRM. Steve [Westly, State Controller] has asked that Mr. Barnes help until the California Institute for Regenerative Medicine is set up and ready to take on that roll. Their office would be happy to help in other areas as well. (e.g., office space, services and computers.) The CIRM is able to contract with other agencies as well.

### **Reimbursement of Costs**

Mr. Barnes referenced the second packet handed out today regarding the general state policy on reimbursement of costs as an interim guideline for Independent Citizens Oversight Committee (ICOC) members. (See **Reimbursement of Costs for Members of the Independent Citizens Oversight Committee** at [www.cirm.ca.gov](http://www.cirm.ca.gov).) This packet deals with eligibility for certain types of costs – mostly travel and per diem. It lays out specifics with regard to travel expense items that they will incur. The daily stipend is \$100 and is considered taxable income, thus it is paid through payroll and ICOC members will receive a W-2, and will be subject to taxes. For the rest of travel, such as lodging, there are limits (e.g., limits \$84 anywhere in the state with high cost areas in Los Angeles, San Diego and San Francisco Bay Area.) Meal reimbursements must reflect actual costs.

### **Comments from Board:**

A question was raised regarding ICOC members who don't wish to take remuneration. Mr Barnes stated that they can ignore those forms.

It was stated that clearly we wish to take money in the way that guarantees us the lowest possible interest payment. It was asked how they might set up a committee to determine that and come back to the board.

Chairman Klein stated that the Initiative establishes a Finance Committee, which includes the State Controller, the State Treasurer, the State Director of Finance and other finance representatives who will look at minimizing costs to the state. Klein stated that Mr. Barnes can expect the California Institute of Regenerative Medicine (CIRM) to draw on an incremental basis to reduce costs. He appreciates the Controller's offer to help set up the financial structure. The Independent Citizens Oversight Committee (ICOC) will discuss delegation of authority later in the meeting to allow the ICOC to enter into interagency agreements. At the time the ICOC begins to fund research, it will have this formal committee [with a report back to the board].

### **Comments from Public:**

Richard McKee of Californians Aware talked about preparation of agendas, recognizing that Chairman Klein had addressed these issues in a letter. Mr. McKee pointed out that his organization has specific concerns which are shared by Terry Francke. McKee emphasized that public involvement begins at the beginning and that the working groups give the board an opportunity to increase public confidence in its activities. Specifically, much of the work of the working groups could be done in public and to simply present recommendations to the ICOC would be unacceptable. Mr. McKee hopes that the ICOC will take time to develop its rules and involve the public. He encouraged board members to visit [www.calaware.org](http://www.calaware.org), the website of an organization which helps local agencies to deal with issues related to public openness.

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## ***Agenda Item #5***

***Report on ACR 252 and cooperation of the Institute with California Council on Science and Technology in the development of best practices related to revenues generated from patent royalties and licenses as authorized by the Act***

Chairman Klein discussed the intention of the California Institute of Regenerative Medicine (CIRM) to partner with the California Council on Science and Technology (CCST), the task force set up by passage of ACR 252. The bill itself calls on the California Council on Science and Technology to convene a special study group to develop recommendations to the Governor and the Legislature on how the state should treat Intellectual Property created under state contracts, grants, and agreements. CCST executive director Susan Hackwood was present at the meeting. The CCST membership is listed on its website and includes many outstanding California scientists. ICOC board member Tina Nova is on the council as are MRC Greenwood and other eminent members of the research community. The CCST has requested by letter that the Independent Citizens Oversight Committee (ICOC) work with the CCST on best practices and designate two ICOC members to work with it. Klein asked for a board consensus to participate.

### ***Comments from Board:***

California Council on Science and Technology (CCST) was encouraged to not focus exclusively on economic return but include in their analysis increased access to care and treatments.

Questions were raised about next steps and a timeline for this important, complicated area. There was a request for a graphic as to the interaction. Per Susan Hackwood, the timeline is now. They have been looking into IP as it related to institutions for a year. The next step is to get ICOC members involved and the CCST requests that two ICOC members join its committee.

Major discussion points included:

- Next steps: get ICOC members involved – have two members join the CCST committee.
- This is an advisory relationship; the information can be used to put into place some rules based on best practices; initial grantees will need to know the rules
- All rules/standards can be modified and improved during the 270 day period of public hearings.
- There are good models in place; we have the advantage of best practices in universities which have very effective IP agreements; we can come to consensus as to existing best practices now
- Looking for consistency throughout the state
- Other states are contacting us, looking to California as a model
- The point is “balance”; if developing a therapy for an orphan disease becomes a burden, no one will do it; we have to look at what is feasible; of course we need to look at compassionate care for the patient; we just need to balance

### ***Comments from Public:***

Deborah Greenfield of the Chicago Institute and Adrienne Pine of the California Nurses’ Association both discussed problems with patents preventing access to care; they urged that the CIRM promote science by revolutionizing how the information is shared.

Chairman Klein noted that these are very important concerns and invited these members of the public to present and participate in the later public hearing process on these issues. He specifically asked if they would submit their ideas, in preparation for these hearings. Board members requested that the California Council on Science and Technology (CCST) provide an open source model as a part of their presentation.

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## *Agenda Item #6*

### *Report on status of SB 322 and cooperation by the Institute with SB 322 task force*

Chairman Klein reported that his understanding is that nearly all of the appointments have been made by the task force, creating a committee that will operate under the coordination of George Cunningham. He has had discussions with Mr. Cunningham and unless the board feels otherwise, he would like to cooperate with this group, as well, in an advisory capacity.

#### **Comments from Board:**

Board members would like to know who the members of that committee are and what the next steps will be.

#### **Comments from Public:**

Susan Fogal, chair of the Pro-choice Alliance against 71, urged the ICOC to formally adopt the standards developed by this committee. Other members suggested the board look to other groups such as those in Canada and at other efforts outside of the United States.

#### **Comments from Board:**

Dean Pizzo thanked Susan for her comments and added that there is another group who can help. The National Academies of Science (NAS) will come out with standards as well; it is incumbent on this board to become responsible stewards of this extraordinary act on behalf of Californians; these groups can help achieve those goals.

## *Agenda Item #7*

### *Brief Overview of Government and Ethics Issues*

Ted Prim, Deputy Attorney General, gave an overview of ethics. He did not distribute handouts, instead referring members to the following sites:

- [Ethics orientation for state officials](#)
- [The Attorney General's pamphlet on Conflicts of Interests](#)
- [Can I Vote?](#)

Additionally, he reviewed some of the high points regarding the Bagley-Keene requirements for open meetings.

#### **Comments from Board:**

- Is today's meeting in full compliance with Bagley-Keene? [Ted Prim stated that as far as he knew, yes it was.]

#### **Comments from Public:**

##### *Regarding Bagley-Keene and the ICOC:*

An allegation was made that the meeting failed to comply with Bagley-Keene, which requires that materials be available 10 days in advance. There was an objection to the fact that the number listed on the agenda to call for more information was a non profit organization and phones were not answered.

Chairman Klein pointed out that clearly Mr. Halpern and Mr. Francke were able to reach the person and there is reference that the calls were returned. He reiterated the importance of having staff for the

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California Institute for Regenerative Medicine (CIRM). It is important for the CIRM to reach for the highest standards and when there is staff, there will be materials made available. A resolution for today's agenda was being changed as of 6pm last night. It was available to the public today, concurrent with being available to the board. The CIRM is in the process of being created and we appreciate your patience. When the Institute has staff, we will attempt to get materials out as quickly as possible.

There was criticism that these issues were raised at the first meeting and it happened again, despite the fact that the board consists of smart people with a lot of resources.

Mr. Prim clarified that there was a misconception perhaps about Bagley-Keene. He stated that it requires that the agenda be on internet and this agenda was on the controller's website. He said that a good practice that is followed is to have all documents available as well, however that is not required under Bagley-Keene. Bagley-Keene does require that when materials are provided to a majority of the body, they must be made available to the public. In this instance, the board members did not receive items in advance of today. The Independent Citizens Oversight Committee was therefore in compliance with Bagley-Keene.

*Regarding Bagley-Keene and the working groups:*

There was an objection to the working groups not being subject to Bagley-Keene and advice to the board to disregard the initiative, with a statement that the public would never know what is going on and neither would the board members.

Chairman Klein called attention to the fact that the working groups are advisory only and that full write-ups will be available to public and board. There is no approval possible without an explanation of recommendations in a public meeting. He pointed out that NIH has found that in order to conduct an effective peer review which includes frank criticism, it is important to get real criticisms and reviews; and, scientists have not historically been willing to criticize each other in public. [They are concerned that this may destroy reputations without even a chance for rebuttal.]

Numerous board members added their support to keeping the grant review process private, citing the following reasons:

- The only way that you'll get individuals to frankly criticize and fairly rank grants is in closed meetings. At the National Institutes of Health (NIH), grants are brought to the council in closed meetings. Prop 71 makes the process more open by making the second step in the review process public. *(various board members)*
- We want to have the highest quality board and to be assured that the most rigorous possible critique takes place. We also want the most creative ideas; ideas that may not end up having high scientific merit; and we don't want to damage the reputations of scientists who take a chance; we want scientists to submit proposals without fear that they will be ridiculed in public. *(various board members)*
- Closed sessions protect IP issues as well. If grants risk losing IP protection, we may not have the submissions that we would like. *(various board members)*
- A majority of scientists say that they MUST have a peer review process that is private. It is critical that we proceed in a fashion that protects confidentiality. *(Jeff Sheehy)*

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*Regarding the California Research & Cures Coalition and the YES on 71 Campaign:*

At board request, Chairman Klein qualified the relationship between the California Institute for Regenerative Medicine, the California Research & Cures Coalition, and the campaign.

The campaign was conducted by a nonprofit, a 501(c)(4) and had 15 board members. After the campaign, that same group created a 501(c)(3) [the California Research & Cures Coalition (CRCC)] to educate on stem cell research in the state and keep people advised regarding best practices. The CRCC and the National Academies of Science and Medicine cosponsored an event to look at best practices.

The board of the California Research & Cures Coalition (CRCC) is totally different and totally separate from this board. I was chair of the CRCC; I resigned from that board. Early in December I made a decision that if I became chair of the Independent Citizens Oversight Committee, I would resign from the CRCC board.

At a time when the California Institute for Regenerative Medicine (CIRM) had no staff, the CRCC staff donated their time to the CIRM. We asked state agencies if they had staff, but they did not, so we had a contribution, at no cost to the state, of that staff time. The public forums regarding best practices are being sponsored by that non profit. No panel members on those forums are Independent Citizens Oversight Committee members. Those are public forums. There is a complete separation between this board and that non profit; both have a common purpose - to advance stem cell research - but the comparison ends there.

A board member requested assurance that going forward there will be no special status for the CRCC and that the ICOC would not lean on them any more than any other non profit. Chairman Klein stated that the CRCC has the same status as the Christopher Reeve Paralysis Foundation, the Michael J. Fox Foundation, and JDRF [*the Juvenile Diabetes Research Foundation*]. These are all non profits that help us by providing information.

## ***Agenda Item #8***

***Consideration of the location and headquarters of the Institute and formation of a committee for purposes of locating suitable office space for the Institute and making a recommendation to the board on February 3, 2005.***

Vice Chairman Penhoet introduced this item and suggested a Site Search Committee.

<b>Proposed Committee</b>
Michael Friedman
Bob Klein
Sherry Lansing ( <i>Chair</i> )
Richard Murphy
Ed Penhoet
John Reed

<b>Final Committee</b>
Michael Friedman
Bob Klein ( <i>Chair</i> )
Sherry Lansing
Richard Murphy
Ed Penhoet
Claire Pomeroy
Phyllis Preciado
John Reed

## ***Explanation of committee selection:***

We wanted equal distribution of committee members between regions with major biomedical employment and research facilities; there was also an attempt to find individuals who are willing to contribute time, in addition to their other committee assignments, to this issue.

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## **Changes made during the meeting to the above list:**

- Member Lansing is happy to serve; not to chair
- Member Prieto nominates Member Pomeroy to sit on this committee, nomination accepted
- Member Preciado will sit on this committee as well

## **Criteria for location discussed:**

- Proximity to biomedical employment centers
- Proximity to academic institution clusters
- Will not be within a potential grantee's institution
- Strong evidence of local community support
- Proximity to useful transportation/airports
- Financial impact of the decision

## **Board Discussion Points:**

- Urgency – several board members reiterated the need to move quickly; we want to work on this piece with a sense of urgency; but no one wants to make an imprudent decision; the sooner we get a building, the earlier we can have a staff in place, which will alleviate the problems regarding the need for openness.
- Short term/Long term – the committee will search for a long term location; with delegation, the chair will be able to enter into a short term lease so that the CIRM can get the office functional as soon as possible.
- Staff – reiteration of the need for staff; in recruiting staff, there are sometimes geographic constraints; the location needs to be attractive for biomedical employee recruitment.

## **Action Plan:**

The plan is to leave it to the committee to work on these for 30 days. The goal is to have a recommended location(s) and plan of action at that time, but the board can decide to extend this time if appropriate. The committee will contact a small number of brokers to assist us and return with recommendations at the next meeting.

***Motion made to accept the 8 members as noted which was seconded and then approved by voice vote.***

## **Comments from Public:**

Mr. Barnes, speaking as a representative of the State Controller's office, reiterated his offer of contracting with his office or other agency on this area to get expertise on board quickly; people who know the rules and process regarding this type of matter.

\*\*\*Break\*\*\*

## **Agenda Item #9**

***Establish a hiring committee to develop and implement a process for interviewing and hiring a President, with general strategy and timeline approved by the board.***

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Chairman Klein and Vice Chairman Penhoet introduced this item with a suggested President Search Committee:

Proposed Committee
Bob Birgeneau
Keith Black
Susan Bryant
Michael Goldberg
Brian Henderson
Bob Klein ( <i>Chair</i> )
Richard Murphy
Tina Nova
Ed Penhoet
Phil Pizzo
Phyllis Preciado
Dana Reeve

Final Committee
Bob Birgeneau
Keith Black
Susan Bryant
Michael Goldberg
Brian Henderson
David Kessler
Bob Klein ( <i>Chair</i> )
Sherry Lansing
Richard Murphy
Tina Nova
Phil Pizzo
Joan Samuelson
Phyllis Preciado
Janet Wright

### **Explanation of committee selection:**

We wanted diversity with regards to background/expertise (e.g., scientist, patient advocate, clinician, etc). We also tried to balance with other committee needs.

### **Changes made during the meeting to the above list:**

- Members Samuelson, Lansing, and Wright will sit on this committee
- Vice Chairman Penhoet is removed due to the willingness of others to join
- Board decision to disallow non-ICOC members on this committee.

### **Board Discussion Points:**

- Consideration of non-ICOC members on this committee [e.g., Dana Reeve] - the general consensus is that this would unfairly complicate and slow down the process
- Urgency – to get fully functional, we need to get the President on board
- Search firm – the board agreed that the committee could make this decision; The process for the selection is intended to be determined by the committee except to the extent that the board would like to give the committee direction on specific criteria that they would like to be considered
- Salary/Job description –
  - the Initiative sets up standard that averages salaries paid to comparable institutions, including the University of California system; intended to allow flexibility to provide salary that is competitive with California's best institutions.
  - basic job description is in the Initiative, additional criteria and thoughts can be added at the committee meeting
- Interim President – the board agreed that the committee could recommend an interim president after its first meeting



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- Nominations can come from the public, board members or search firm. Chairman Klein believes that ICOC members are eligible for nomination but would have to step down from the board so that it maintains objectivity
- Mr. Prim noted that there is a personnel exception to the Bagley-Keene as it relates to the president. The statute requires the ICOC to take action regarding compensation in open session, but it may hold closed sessions to discuss multiple candidates so as to protect their privacy during the process

### ***Action Plan:***

Schedule first conference call for the committee with a 10 day notice. This meeting will have a public portion where policy and criteria are discussed. There will be an executive session to discuss names of candidates. The initial screen will cast a very broad net, which can be narrowed within 30 days. This committee would be an advisory committee; it can look at ranges and come back with recommended candidate and compensations; it should also come back with an explanation of the criteria that were used to make the decisions and an explanation as to why a candidate is the best person to move this research forward. The hope is that the committee would be dedicated to bringing back a detailed job description and policy to the 2/3 meeting.

***Motion made to accept the members of the presidential search committee as noted, which was seconded and then approved by voice vote.***

***No Comments from Public.***

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## Agenda Item #10

*Establish a committee to develop and implement a process for selecting members of: (a) the Scientific and Medical Research Funding Working Group, (b) the Scientific and Medical Accountability Standards Working Group, and (c) the Scientific and Medical Research Facilities Working Group, with general strategy and timeline approved by the board.*

Vice Chairman Penhoet introduced this item with suggested Working Group Committee membership, recommended by Penhoet and Chairman Klein.

Proposed Committee
<i>Co-Chairs Ed Penhoet and David Baltimore</i>
<b>Standards Search Subcommittee:</b>
David Kessler ( <i>Chair</i> )
Joan Samuelson
David Serrano Sewell
John Shestack
Os Steward
<b>Grant Search Subcommittee:</b>
Ed Holmes ( <i>Chair</i> )
Sherry Lansing
Gerald Levey
Ted Love
Leon Thal
Janet Wright
<b>Facilities Search Subcommittee:</b>
Michael Friedman ( <i>Chair</i> )
Claire Pomeroy
Francisco Prieto
John Reed
Jeff Sheehy
Gayle Wilson

Final Committee
<i>Co-Chairs Ed Penhoet and David Baltimore</i>
<b>Standards Search Subcommittee:</b>
David Kessler ( <i>Chair</i> )
Joan Samuelson
David Serrano Sewell
Jeff Sheehy
John Shestack
Os Steward
<b>Grant Search Subcommittee:</b>
Keith Black
Brian Henderson
Ed Holmes ( <i>Chair</i> )
Sherry Lansing
Gerald Levey
Ted Love
Phil Pizzo
John Reed
Jeff Sheehy
John Shestack
Leon Thal
Janet Wright
<b>Facilities Search Subcommittee:</b>
Michael Friedman ( <i>Chair</i> )
Bob Klein
Ted Love
Claire Pomeroy
Francisco Prieto
John Reed
Gayle Wilson

### Changes made during the meeting to the above lists:

Standards	Grants	Facilities
Add Member Sheehy	Add Members: <ul style="list-style-type: none"> <li>▪ Henderson</li> <li>▪ Sheehy</li> <li>▪ Shestack</li> <li>▪ Black</li> <li>▪ Reed</li> <li>▪ Pizzo</li> </ul>	Remove Member Sheehy Add Member Love Add Chairman Klein

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## **Board Discussion Points:**

- Consideration of non-ICOC members on this committee - the general consensus again is that this would unfairly complicate and slow down the process; however, it was made clear that committee members could solicit advice informally from outside members
- In establishing criteria, discussions about content will inevitably come up; but the emphasis is focused on the selection; subcommittee's responsibility is to recommend process for appointing
- Clarifications were made that these subcommittee members were not serving on the working groups themselves, but searching for members to serve
- It was noted that additional expertise could be solicited by the members for specialized areas

## **Comments from Public:**

Discussions arose regarding the "chicken before the egg"; "cart before the horse"; that the ICOC must develop robust conflict of interest standards for its members and for members of the working groups and they can't be looking for people without first establishing rules.

Chairman Klein noted that the record is accurate that conflict of interest rules will be in place before any grants go out.

## *Informational Note:*

As previously stated, National Institutes of Health conflict rules, as of January 1, 2003, apply as a guideline that the Institute can enhance.

There was a suggestion that someone will have to decide what types of grants will be awarded; what guidelines will be used; the ICOC might decide they want staff to work out nuts and bolts.

***Motion made to accept the members of the working group search sub committees as noted, which was seconded and then approved by voice vote.***

Mr. Prim noted that when the subcommittees meet they are subject to Bagley-Keene. If the working group search committee as a whole (standards, grants and facilities) is meeting, it has the power to do things as the ICOC, (being a quorum) and so it must also be noticed as a meeting of the ICOC.

## ***Agenda Item #11***

***Delegation of authority to the Chairman, including authorization for hiring interim staff and certain other technical and professional staff and authorization to carry out other functions of the Institute.***

Member Holmes introduced this item saying that it has been made clear that the ICOC/CIRM needs staff. The resolution here, which has been prepared by the Attorney General, is worthy of our consideration. It will allow the chair to act as interim president with limited functions - to be able to hire interim staff and to make contracts to get going.

Chairman Klein pointed out that this does not obviate the need for an interim president. We need a president who has a strong scientific background. This delegation expires in 120 days, but with hopes that we have a president before then, at which point it will expire. Chairman Klein then went through the resolution.

## **Board Discussion Points:**

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- Discussion regarding length of agreements; some may be longer term such as a copier for 36 months;

### **Comments from Public:**

We have a foregone conclusion that we'll have offices in Palo Alto staffed by Bob Klein – this may be a good thing. The staff will be the Yes on 71 staff; so that the real president can hire his own staff.

Susan Fogal reemphasized the importance of distinguishing the political campaign that raised millions and won an election; the non profit is a non profit; this is a state entity; there need to be clear boundaries. [*Chairman Klein agreed.*]

Chairman Klein was asked if there are there comments he will make along those same lines [a statement about the California Research & Cures Coalition and the staff that would be hired on interim basis.]

He then expanded on his earlier statement. No person will work for both the California Research & Cures Coalition (CRCC) and California Institute for Regenerative Medicine. There are certainly staff (to be hired by the Institute) who worked with the 70 advocacy groups who are important constituents of the California Institute for Regenerative Medicine; these are staff who I hope will bring continuity to the Institute. We know that Mr. Weldon and Mr. Brownback are intending to move another bill into the federal arena; we would hope that California is well represented in those discussions and he hopes the staff members that have worked on those issues would accept an invitation to work on our government relations issues. The decisions being made now do not include scientific staff; the current hiring decisions are limited staff members that will be substantial assets in building this organization, they have tremendous commitment and knowledge on stem cell research and the research, public, and patient constituencies of the Institute.

### **More comments from Board:**

- It is really important to recognize that some of the staff of CRCC developed relationships with communities when they worked on this and these relationships shouldn't be taken lightly. It is important to continue these relationships.
- Things have to move quickly and a well trained staff taken from the California Research & Cures Coalition or the Prop 71 campaign would be critical to that happening.
- Governmental orgs are generally or not always made as a result of political decisions or campaigns, and while we have to draw lines; people who have expertise can resign a current position and be hired for another one if they have expertise that is needed and can do a good job. Our primary concern is to find people who can do the best job.
- We want the very best people to serve; the staff ultimately needs to report to the president, but in the short run we are desperate to get people with knowledge and skill regardless of where they come from ; I am in favor of moving quickly in that regard.
- Staff that worked on the Prop 71 campaign would bring an important continuity with patient groups and other constituencies that this Institute needs to keep informed.

***Motion made to approve the resolution as found in the folders, which was seconded and then approved by voice vote.***

### ***Agenda Item #12***

Consideration of bylaws, Board procedures and policies.

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## *Regarding bylaws:*

Many state agencies don't have bylaws, but it would be the Chairman's intent to work with the Attorney General with models and bring a draft to the board.

## *Regarding board procedures:*

Board procedures; we will hope to refine over time but we'll bring these to the board for comments or revision.

## *Regarding board policies:*

As already addressed by the public in the broad sense, we need policies for conflict of interest and ethics in a very early time.

As mentioned earlier, the Chairman intends to set up discussions/presentations regarding these issues and requests that we have knowledge and input from the public. He requested that those who spoke today come to one of those meetings to have a full discussion.

This is an informational item regarding the intent.

## ***Comments from Public:***

There was an acknowledgment that the peer review process should be confidential and another call for the facilities and standards groups to have open meetings.

## ***Agenda Item #13***

### **Scheduling of Subsequent Meeting(s) of the ICOC**

There was general board agreement to handle this offline when all had access to their calendars.

**Public comment. The Committee will accept public testimony on any matter under its jurisdiction that is not on the agenda, but the Committee cannot act on any such matter at this meeting.**

Dan Kiefer, of Stem Cell Action Network (SCAN), told about having had Parkinson's disease since he was 35 years old. He praised California voters for approving Prop 71. He believes the oversight committee is now implementing this medical research initiative conscientiously and carefully. Though he lives with the knowledge that his condition has and will continue to decline over time, stem cell research gives him hope that his physical deterioration is not inevitable and may even be reversible. SCAN applauds the committee's unanimous selection of Robert Klein as its chair and believes that Mr. Klein, who has a son with diabetes and a mother with Alzheimer's disease, has demonstrated excellent leadership qualities including sensitivity to ethical considerations not only in relation to stem cell research but throughout his career. SCAN looks forward to working with the oversight committee to advance the compassionate cause that we all share using stem cells to better understand and heal illnesses that can strike anyone at any time. On behalf of the Stem Cell Action Network, Dan commended the board for the mission that they've diligently undertaken.

John Ball, also of SCAN, stated that he has had Parkinson's for thirty years. His mother-in-law died of Parkinson's disease after suffering for thirty-seven years with it herself. He said that if genetics is part of Parkinson's, his kids have got it programmed into their being from both sides. He would like to leave here knowing that we did everything we could to take that prospect away from their future.