#### BEFORE 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: UNIVERSITY OF CALIFORNIA IRVINE

PACIFIC BALLROOM D STUDENT CENTER IRVINE, CALIFORNIA

DATE: WEDNESDAY, OCTOBER 26, 2011

9 A.M.

REPORTER: BETH C. DRAIN, CSR

CSR. NO. 7152

BRS FILE NO.: 89092

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- 10. CONSIDERATION OF RECOMMENDATIONS FROM
  THE INTELLECTUAL PROPERTY SUBCOMMITTEE AND
  THE SCIENCE SUBCOMMITTEE REGARDING THE
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  PARTNERSHIP FUNDING PROGRAM.
- 11. (DEFERRED) CONSIDERATION OF RECOMMENDATION FROM THE INTELLECTUAL PROPERTY SUBCOMMITTEE REGARDING ITS MISSION STATEMENT.

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- 12. CONSIDERATION OF CONCEPT APPROVAL OF 160 CREATIVITY AWARDS.
- 13. CONSIDERATION OF CONCEPT APPROVAL OF 169 BASIC BIOLOGY IV.
- 14. CONSIDERATION OF APPOINTMENT OF NEW
  MEMBERS TO THE SCIENTIFIC AND MEDICAL
  ACCOUNTABILITY STANDARDS WORKING GROUP.
- 15. (DEFERRED) CONSIDERATION OF RESOLUTION HONORING JOHN R. SLADEK, JR., PH.D., FOR HIS SERVICE TO CIRM AS CHAIR OF THE GRANTS WORKING GROUP

**DISCUSSION ITEMS** 

16. PUBLIC COMMENT.

NONE

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1	IRVINE, CALIFORNIA; WEDNESDAY, OCTOBER 26, 2011
2	9 A.M.
3	
4	CHAIRMAN THOMAS: GOOD MORNING, EVERYBODY.
5	LIKE TO WELCOME EVERYBODY TO THE OCTOBER MEETING OF
6	THE ICOC HERE IN BEAUTIFUL IRVINE, CALIFORNIA.
7	THANK YOU, EVERYBODY, FOR BEING HERE AND FOR
8	ATTENDING ON THE PHONE. WE APPRECIATE EVERYBODY'S
9	PARTICIPATION AS ALWAYS.
10	AS YOU KNOW, THE PROCEEDINGS, AS THEY
11	ALWAYS ARE, ARE BEING AUDIOCAST AND MADE AVAILABLE
12	TO ALL MEMBERS OF THE PUBLIC AROUND THE WORLD VIA
13	THE INTERNET.
14	MARIA AND BY THE WAY, WOULD LIKE TO
15	WELCOME MARIA AGAIN IN HER CAPACITY AS THE LEADER OF
16	HER FIRST OFFICIAL BOARD MEETING. I'D LIKE TO CALL
17	UPON HER TO LEAD US NOW IN THE PLEDGE OF ALLEGIANCE.
18	(THE PLEDGE OF ALLEGIANCE.)
19	CHAIRMAN THOMAS: MARIA, WOULD YOU PLEASE
20	CONDUCT THE ROLL CALL.
21	MS. BONNEVILLE: ROBERT BIRGENEAU. FLOYD
22	BLOOM. DAVID BRENNER. SUE BRYANT.
23	DR. BRYANT: HERE.
24	MS. BONNEVILLE: MARCY FEIT. TED
25	KRONTIRIS. LEEZA GIBBONS. MICHAEL GOLDBERG.
	<u>,</u>
	4

	DARRISTERS REPORTING SERVICE
1	MR. GOLDBERG: HERE.
2	MS. BONNEVILLE: SAM HAWGOOD.
3	DR. HAWGOOD: HERE.
4	MS. BONNEVILLE: STEVE JUELSGAARD.
5	DR. JUELSGAARD: HERE.
6	MS. BONNEVILLE: SHERRY LANSING. TED
7	LOVE. BERT LUBIN.
8	DR. LUBIN: HERE.
9	MS. BONNEVILLE: SHLOMO MELMED. PHIL
10	PIZZO.
11	DR. PIZZO: HERE.
12	MS. BONNEVILLE: CLAIRE POMEROY.
13	FRANCISCO PRIETO.
14	DR. PRIETO: HERE.
15	MS. BONNEVILLE: CARMEN PULIAFITO.
16	DR. PULIAFITO: PRESENT.
17	MS. BONNEVILLE: ROBERT QUINT. DUANE
18	ROTH. JOAN SAMUELSON. DAVID SERRANO-SEWELL. JEFF
19	SHEEHY.
20	MR. SHEEHY: HERE.
21	MS. BONNEVILLE: JONATHAN SHESTACK.
22	MR. SHESTACK: HERE.
23	MS. BONNEVILLE: OS STEWARD.
24	DR. STEWARD: HERE.
25	MS. BONNEVILLE: JONATHAN THOMAS.
	5
	,

1072 BRISTOL STREET, COSTA MESA, CALIFORNIA 92626 1-800-622-6092 1-714-444-4100 EMAIL: DEPO@DEPO1.COM

1	CHAIRMAN THOMAS: HERE.
2	MS. BONNEVILLE: ART TORRES.
3	MR. TORRES: HERE.
4	MS. BONNEVILLE: KRISTINA VUORI. JAMES
5	ECONOMOU.
6	DR. ECONOMOU: HERE.
7	CHAIRMAN THOMAS: THANK YOU, MARIA.
8	WE'LL PROCEED TO ITEM NO. 4 ON OUR AGENDA,
9	WHICH IS THE CHAIRMAN'S REPORT. GOT A NUMBER OF
10	THINGS I WANTED TO BRING TO THE BOARD'S ATTENTION
11	THAT HAVE TRANSPIRED SINCE OUR LAST MEETING IN
12	AUGUST.
13	NO. 1, WE ARE OFF AND RUNNING WITH THE IOM
14	AND THEIR PERFORMANCE REVIEW OF CIRM AND ALL OF ITS
15	PROGRAMS, PROCEDURES, POLICIES, ETC. WE HAD ABOUT A
16	MONTH OR SO AGO THE CHAIR AND VICE CHAIR OF THE IOM
17	COMMITTEE CAME OUT. THAT WOULD BE HAROLD SHAPIRO
18	AND TERRY MAGNUSON. HAROLD BEING FORMERLY THE
19	PRESIDENT OF PRINCETON AND BEFORE THAT UNIVERSITY OF
20	MICHIGAN AS THE CHAIR. TERRY IS AT THE UNIVERSITY
21	OF NORTH CAROLINA. THEY CAME OUT TO DO A SORT OF
22	PREMEETING WITH US IN CALIFORNIA TO GET A JUMP START
23	ON THE FLAVOR FOR THE WHOLE CIRM UNDERTAKING.
24	WE HAD A NICE PRESENTATION AT OUR OFFICES.
25	A NUMBER OF THE STAFF PRESENTED. WE THEN WENT TO
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1	UCSF WHERE DEAN HAWGOOD HOSTED THE TWO GENTLEMEN AND
2	GAVE THEM A TOUR OF THAT FACILITY. THEY MET WITH
3	SOME PI'S THERE, HAD A VERY GOOD TALK, AND WERE VERY
4	IMPRESSED, DEAN HAWGOOD, WITH EVERYTHING YOU'VE GOT
5	GOING AT UCSF.
6	WE THEN PROCEEDED DOWN TO STANFORD WHERE
7	THEY GOT A TOUR DOWN THERE AND HAD A NICE MEETING
8	WITH DEAN PIZZO WHO TOLD THEM ALL ABOUT WHAT WAS
9	HAPPENING IN THE STANFORD PROGRAM, GAVE THEM A NICE
10	HISTORY OF HOW THINGS HAD PROGRESSED AND WHERE
11	THINGS WERE GOING. THEY MET WITH A NUMBER OF THE
12	STAFF THERE AS WELL AND WERE SIMILARLY HIGHLY
13	IMPRESSED WITH BOTH THE FACILITY AND WITH THE
14	STRENGTH OF THE PROGRAM, AS THEY HAD BEEN AT UCSF.
15	WE WERE JOINED IN THAT SECOND MEETING AND
16	TOUR BY BOB KLEIN, AND WE FOLLOWED UP THE STANFORD
17	SEGMENT WITH DINNER WITH BOB, AND MICHAEL GOLDBERG
18	JOINED US. AND WE JUST HAD A VERY SUCCESSFUL DAY.
19	THE WHOLE DAY WAS ORCHESTRATED BY LYNN
20	HARWELL, WHO HAS BEEN OUR CHIEF PERSON RUNNING THE
21	ENTIRE INTERACTION WITH THE IOM. AND I'LL GIVE
22	ANOTHER COMMENT ON LYNN ON THAT SUBJECT IN A MINUTE.
23	IT WAS A VERY GOOD DAY. THEY'RE VERY IMPRESSED.
24	THEY GOT HIT WITH LOTS OF DATA, AND I THINK IT WAS
25	VERY SUCCESSFUL.

1	WE THEN FLASH FORWARD ABOUT SEVERAL WEEKS
2	TO LAST WEEK, AND WE ENDED UP GOING BACK TO HAVE OUR
3	INITIAL MEETING WITH THE IOM, THE FULL PANEL OF THE
4	IOM, BACK IN WASHINGTON, D.C., IN THE BUILDING OF
5	THE NATIONAL ACADEMY OF SCIENCES. WE HAD A LENGTHY
6	PRESENTATION WHICH CONSISTED OF BOB KLEIN, WHO WENT
7	BACK WITH US, GAVE SORT OF HISTORICAL CONTEXT, HOW
8	CIRM STARTED AND GOT TO WHERE IT WAS UP UNTIL A FEW
9	MONTHS AGO. DR. ELLEN FEIGAL THEN GAVE A TALK ON
LO	THE PORTFOLIO AND OUR ENTIRE SCIENCE PROGRAM, WHICH
L1	WAS VERY DIFFICULT TO DO IN A LIMITED PERIOD OF
L2	TIME. DID A VERY NICE JOB. FOLLOWED BY ELONA BAUM
L3	WHO DISCUSSED OUR INDUSTRY OUTREACH AND INTELLECTUAL
L4	PROPERTY ELEMENTS OF OUR PROGRAM.
L5	AND THEN I CONCLUDED WITH A FORMAL CHARGE
L6	TO THE COMMITTEE AND THE HOST OF QUESTIONS WHICH WE
L7	WERE ASKING THEM TO CONSIDER AS THEY PERFORM THEIR
L8	REVIEW. WE HAD VERY GOOD Q AND A. THE WHOLE
L9	SESSION LASTED ABOUT FIVE HOURS.
20	AND SO WE'RE NOW OFFICIALLY INTO THE
21	PROCESS. THAT PROCESS WILL TAKE A NUMBER OF MONTHS
22	AND WILL CONCLUDE TOWARDS THE END OF 2012 WITH A
23	REPORT ON CIRM AS THEY SEE IT WITH THEIR RESPONSE TO
24	HOW WE ARE DOING WITH SUGGESTIONS. VERY THOROUGH

ANALYSIS WHICH ARE WE LOOKING FORWARD TO. SO THAT

25

1	IS THE IOM.
2	I WILL SAY THAT, AGAIN, I WANT TO GIVE
3	SPECIAL THANKS TO LYNN WHO WENT TO A GREAT DEAL OF
4	EFFORT AND CONTINUES TO WITH RESPECT TO THE
5	INTERACTION WITH THOSE FOLKS AND SORT OF MAKING SURE
6	THAT EVERYBODY'S PRESENTATIONS WERE VERY GOOD. SHE
7	HAD TO BE DEALING WITH US ON THE FLY. WE WERE
8	HANDING HER AMENDMENTS TO OUR SLIDES IN THE MIDDLE
9	OF SOMEONE ELSE'S PRESENTATION. SHE HAD TO GET THEM
10	ONTO THE COMPUTER IN REAL-TIME. SHE'S DONE A
11	TERRIFIC JOB WITH RESPECT TO THAT. SO I JUST TO
12	WANT, LYNN, TO THANK YOU SPECIFICALLY.
13	SECOND ITEM I'D LIKE TO REPORT ON IS A
14	NUMBER OF US HAVE SPOKEN. WE HAD OUR OCTOBER STATE
15	GENERAL OBLIGATION BOND SALE WHICH TOOK PLACE LAST
16	WEEK. AS YOU MAY RECALL, THE STATE SPLITS THEIR
17	SALE INTO TWO COMPONENTS. ONE IS THE TAX-EXEMPT
18	SIDE. THE OTHER IS THE TAXABLE SIDE. AND YOU FALL
19	AS DICTATED BY HOW YOUR USE OF PROCEEDS ARE DEFINED
20	WITHIN THE CONTEXT OF IRS LAWS AND REGS, AND WE ARE
21	IN THE TAXABLE SIDE OF THE LEDGER.
22	I'LL SAY PARENTHETICALLY WE'RE WORKING
23	WITH ORRICK, WHO IS BOND COUNSEL, TO SEE IF WE CAN
24	GET THE IRS TO ISSUE A PRIVATE LETTER RULING WHICH
25	ULTIMATELY WILL MAKE OUR PROCEEDS TAX-EXEMPT. MUCH

1	MORE TO COME ON THAT AT A LATER DATE. THAT'S A
2	MULTIMONTH PROCESS AND AT BEST CASE WOULD AFFECT THE
3	FALL ISSUE NEXT YEAR, BUT WE ARE WORKING ON THAT.
4	ANYWAY, LAST WEDNESDAY THEY HAD THE BOND
5	ISSUE THAT HAD THE TAXABLE COMPONENT. WE WERE IN
6	THAT ISSUE, AS YOU KNOW. AND WE HAVE FOR OUR
7	OVERALL FUNDING PACKAGE NEGOTIATED A DEAL WITH THE
8	STATE DEPARTMENT OF FINANCE WHICH BASICALLY INVOLVES
9	US SPENDING CASH ON HAND, TAKING THE AMOUNT WE'VE
10	GOT FROM THIS RECENT BOND ISSUE, COMBINING THAT WITH
11	A SIGNIFICANT COMPONENT OF COMMERCIAL PAPER TO SERVE
12	AS CONTINGENCY IN THE EVENT WE NEED MORE MONEY IN
13	THE FUNDING PERIOD THAN WE THOUGHT WE MIGHT AND TO
14	SERVE AS A RESERVE FUND TO SHOW TO OUR COLLABORATIVE
15	FUNDING PARTNERS, GRANTEES, LOAN RECIPIENTS, ALL
16	OTHER STAKEHOLDERS THAT WE HAVE PLENTY OF FACILITY
17	AVAILABLE. WE PUT TOGETHER THIS PACKAGE, AND IT
18	HAS, I THINK, WORKED OUT VERY WELL FOR US.
19	WE WILL RECEIVE FULL FUNDING AND HAVE A
20	FULL RESERVE ELEMENT THERE WHICH IS STRUCTURED A
21	LITTLE DIFFERENTLY THAN WE HAVE IN THE PAST. IT'S
22	THE WAY THAT THE GOVERNOR'S OFFICE HAS ASKED ALL
23	AGENCIES WHO ARE BEING FUNDED BY THE G.O. BOND ISSUE
24	TO CONSIDER, AND SO WE'RE VERY HAPPY WITH HOW THIS
25	TURNED OUT. IT WAS A LOT OF WORK.

1	I WOULD LIKE TO SPECIFICALLY ACKNOWLEDGE A
2	NUMBER OF PEOPLE: SENATOR TORRES FOR HIS POLITICAL
3	CONTACTS, ACUMEN, STRATEGIC ADVICE, PARTICIPATION IN
4	THE MEETINGS WITH DOF AT WHICH OUR DEAL WAS
5	NEGOTIATED AND OVERALL EXCELLENT ADVICE.
6	TO ALAN WHO HAS LED THE STAFF'S EFFORTS IN
7	TERMS OF GETTING INFORMATION COMPILED FOR THE DOF
8	AND THE STATE TREASURER'S OFFICE AND PLAYED A KEY
9	ROLE IN OUR MEETING WITH DOF STAFF AT WHICH WE
10	HAMMERED OUT OUR DEAL.
11	TO LYNN, WHO SEEMS TO BE THE PERSON FOR
12	ALL SEASONS AT THIS MEETING, WHO HAS BEEN OUR
13	PRINCIPAL LIAISON WITH DEPARTMENT OF FINANCE AND THE
14	STATE TREASURER'S OFFICE, PULLED TOGETHER ALL THE
15	MATERIAL, ALL THE SPREADSHEETS, ALL THE
16	JUSTIFICATION THAT FORMED THE BASIS FOR OUR
17	NEGOTIATION, AND PLAYED A CENTRAL ROLE IN THE
18	MEETINGS WE HAD WITH DOF AND CONTINUES TO BE OUR
19	PERSON WHO'S THE ONGOING PRINCIPAL CONTACT WITH
20	THOSE OFFICES. SO, LYNN, THANK YOU VERY MUCH.
21	I'D LIKE TO IN ADDITION SINGLE OUT JAMES
22	WHO HAS, AS ALWAYS, GIVEN GREAT LEGAL GUIDANCE IN
23	THE COURSE OF THESE NEGOTIATIONS AND WAS AN ACTIVE
24	PARTICIPANT IN THE MEETINGS WITH DOF STAFF AND THE
25	SUBSEQUENT MEETING WITH DIRECTOR ANA MATOSANTOS AS

1	WAS SENATOR TORRES AND HAS BEEN VERY HELPFUL IN THE
2	DRAFTING OF ALL RELEVANT LANGUAGE THAT'S GONE BACK
3	AND FORTH.
4	THANK YOU, PAT, FOR A SIMILAR INTEGRAL
5	ROLE IN HELPING GETTING TOGETHER ALL THE INFORMATION
6	ON THE SCIENCE PROGRAMS THAT FORMED THE BASIS FOR
7	OUR DRAWDOWN ANALYSIS THAT WAS SUBMITTED TO THE DOF
8	AND THE TREASURER'S OFFICE.
9	AND CERTAINLY LAST, BUT NOT LEAST, CHILA
10	WHO IS THE KEEPER OF ALL RELEVANT NUMBERS AND
11	WITHOUT WHICH WE WOULDN'T HAVE ALL THE INFORMATION
12	AND BACKUP THAT IS NECESSARY TO BE ABLE TO MAKE OUR
13	CASE, WHO ALSO CAME WITH US TO THE PIVOTAL DOF STAFF
14	MEETING.
15	SO THIS WAS A REAL TEAM EFFORT. WE'RE
16	VERY GRATEFUL TO THE GOVERNOR'S OFFICE AND TO THE
17	STATE TREASURER'S OFFICE FOR THEIR CONTINUED SUPPORT
18	OF CIRM AND APPRECIATE THAT THEY VIEW WHAT WE'RE
19	DOING AS VERY WORTHWHILE. AND WE LOOK FORWARD TO
20	CONTINUED EXCELLENT RELATIONS WITH BOTH OFFICES
21	GOING FORWARD.
22	WE HAVE EXTENDED AN INVITATION TO THE
23	GOVERNOR WHO HAS BEEN HIMSELF VERY SUPPORTIVE OF US
24	AND HOPE THAT HE AND DIRECTOR ANA MATOSANTOS WILL BE
25	ABLE IN THE NEAR FUTURE TO VISIT US EITHER IN SAN

1	FRANCISCO OR PERHAPS AT ONE OF OUR CAMPUSES, LIKELY
2	UC DAVIS SINCE IT'S CLOSEST, TO GET EVEN A GREATER
3	FLAVOR FOR THE WHOLE THING. SO WE'RE VERY
4	APPRECIATIVE OF THE GOVERNOR AND THE DIRECTOR AND OF
5	STATE TREASURER LOCKYEAR. AND I'D ALSO LIKE TO
6	MENTION OUR GOOD FRIEND STEVE COONY IN THE STATE
7	TREASURER'S OFFICE WHO'S BEEN GREAT THROUGHOUT THIS
8	WHOLE PROCESS.
9	AT THE WORLD STEM CELL SUMMIT, WHICH WAS,
10	I THOUGHT, A VERY SUCCESSFUL AND INTERESTING EVENT
11	ON ALL SORTS OF FRONTS, CIRM WAS VERY STRONGLY
12	REPRESENTED BOTH BY BOARD MEMBERS, BY STAFF, AND
13	CERTAINLY LAST, BUT NOT LEAST, BY GRANTEES AND LOAN
14	RECIPIENTS WHO ALL OF THOSE WERE SCATTERED
15	THROUGHOUT THE THREE-DAY PROGRAM AND I THINK GAVE
16	VERY, VERY VALUABLE INSIGHTS INTO ALL SORTS OF
17	THINGS.
18	AND I DO WANT TO NOTE WITH RESPECT TO THAT
19	EVENT, FURTHER TO MY PARTICULAR CONCERN THAT WE
20	HEIGHTEN THE EMPHASIS OF THE PATIENT ADVOCATE
21	PARTICIPATION IN OUR ALL EFFORT, WE GAVE A RECEPTION
22	FOR PATIENT ADVOCATES ATTENDING THE STEM CELL SUMMIT
23	WHICH WAS VERY NICELY ATTENDED AND APPRECIATED. AND
24	I THINK THAT IT WAS A VERY NICE THING TO DO TO
25	ADVANCE THIS GOAL WE HAVE OF THAT INCREASED

1	PARTICIPATION.
2	FURTHER ON THAT THEME, WE HAD A MEETING
3	LAST SATURDAY, WHICH I ATTENDED, THAT DON GIBBONS
4	SET UP IN BAKERSFIELD, WHICH WAS A PATIENT ADVOCATE
5	EVENT THAT WAS HIGHLIGHTING A NUMBER OF SPEAKERS ON
6	THE WORK THAT'S BEING DONE WITH RESPECT TO
7	AGE-RELATED MACULAR DEGENERATION. THERE WERE QUITE
8	A FEW FOLKS THERE. I THOUGHT THE PANEL THAT WAS
9	ASSEMBLED DID A REALLY GOOD JOB OF LAYING OUT WHAT
10	IS BEING DONE IN LAYMAN'S TERMS AND WAS THE SOURCE
11	OF LOTS OF GOOD Q AND A FROM THE FOLKS WHO WERE
12	THERE.
13	I GAVE THE KEYNOTE AT THE TOP OF THAT, AND
14	I THINK IT WAS JUST A VERY GOOD EVENT WHICH WE'RE
15	LOOKING TO DUPLICATE ALL OVER THE STATE WITH THE
16	SORT OF FORMAT OF HAVING SCIENTISTS SPEAK AND
17	PATIENT ADVOCATES, BOTH OF WHICH GAVE SORT OF
18	IMPASSIONED PRESENTATIONS.
19	THERE IS A SIMILAR EVENT THAT'S COMING UP
20	THIS SATURDAY IN SANTA ROSA AT WHICH SENATOR TORRES
21	WILL BE THERE ON BEHALF OF THE BOARD AND WILL BE
22	GIVING THE KEYNOTE SPEECH AT THAT EVENT. SO, AS I
23	SAY, WE LOOK TO THIS AS SORT OF A MODEL TO DUPLICATE
24	TO GENERATE INTEREST AND SPREAD THE WORD THROUGHOUT
25	THE STATE.

Т	THERE WAS A TERRIFIC CEREMONY ON FRIDAY IN
2	BERKELEY DEDICATING LI CA SHING CENTER ON THAT
3	CAMPUS, WHICH ACTUALLY IS GOING TO BE OCCUPIED IN
4	JANUARY, BUT THE EVENT WAS TIMED WHEN MR. LI WAS
5	GOING TO BE IN TOWN FROM HONG KONG. HE HAD VERY
6	GENEROUSLY DONATED \$40 MILLION TOWARDS THAT
7	BUILDING, AND THEY HAD A VERY NICE EVENT FOR HIM AT
8	WHICH CHANCELLOR BIRGENEAU PRESIDED.
9	AND SPEECHES WERE GIVEN BY THE CHANCELLOR,
10	BY BOB TJIAN, WHO'S A PROFESSOR AT BERKELEY AND ALSO
11	THE HEAD OF THE HOWARD HUGHES MEDICAL INSTITUTE, BY
12	YOURS TRULY, AND LAST, BUT NOT LEAST, BY MR. LI, WHO
13	DID THE BULK OF HIS SPEECH IN MANDARIN AND HAD ONE
14	OF HIS COLLEAGUES GIVE THE TRANSLATION. VERY
15	THOUGHTFUL, ELOQUENT SPEECH. AND THEY HAD SEVERAL
16	HUNDRED PEOPLE AT THAT. WE WERE WELL REPRESENTED BY
17	CIRM AT THAT EVENT AS WELL. SENATOR TORRES WAS
18	THERE, DR. PRICE WAS THERE, CHANCELLOR BIRGENEAU
19	OBVIOUSLY WAS THERE, AND A NUMBER OF FOLKS FROM CIRM
20	WERE THERE, ELONA AND GEOFF AND LYNN. AND IF I'M
21	LEAVING ANYBODY OUT, FORGIVE ME. BUT THE EVENT HAD
22	A GREAT FEEL, AND THE SPACE IS FANTASTIC IN THE
23	TRADITION OF ALL OF THE FACILITIES THAT HAVE BEEN
24	BUILT AS PART OF THE CIRM EFFORT.
25	SO WE'RE LOOKING FORWARD TO GREAT WORK
	15
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1	BEING DONE IN THAT BUILDING AS IT'S CURRENTLY BEING
2	DONE ELSEWHERE ON THE CAMPUS, BUT THE SCIENTISTS ARE
3	CHAMPING AT THE BIT TO GET IN THERE AND WILL DO SO,
4	AS I SAY, IN JANUARY.
5	DR. PIZZO: MR. LI ALSO WAS ONE OF THE TEN
6	RECIPIENTS OF THE CARNEGIE CORPORATION'S AWARD FOR
7	PHILANTHROPY, WHICH WERE GIVEN IN NEW YORK CITY
8	THURSDAY, THE DAY PRIOR TO THAT, AND I WAS THERE FOR
9	THAT EVENT ALONG WITH MANY, MANY OTHERS AROUND THE
10	COUNTRY. SO HE'S BEEN HONORED FOR HIS EXTRAORDINARY
11	CONTRIBUTIONS, AND THE BERKELEY EXAMPLE IS JUST ONE
12	OF THE GREAT ONES.
13	CHAIRMAN THOMAS: THANK YOU, DEAN PIZZO.
14	I SHOULD NOTE THAT AT THE END OF MY REMARKS, I NOTED
15	THAT MR. LI WAS A POLITICALLY SAVVY GUY AND DIDN'T
16	WANT TO LOOK LIKE HE WAS PLAYING FAVORITES, AND SO
17	HAD DONATED LOTS OF MONEY BOTH TO BERKELEY AND TO
18	STANFORD.
19	DR. PIZZO: LET THE RECORD SHOW THAT IT
20	WAS MORE TO BERKELEY, WHICH IS WHY I'M VISITING HONG
21	KONG IN THREE WEEKS.
22	CHAIRMAN THOMAS: THANK YOU FOR THAT
23	CLARIFICATION, DEAN PIZZO.
24	THE LAST THING I'D LIKE TO TOUCH ON IS
25	THERE WAS A SIGNIFICANT OPINION IN THE STEM CELL

1	SPACE HANDED DOWN BY THE EUROPEAN COURT OF JUSTICE
2	LAST WEEK, AND I WOULD LIKE TO HAVE ELONA SAY A FEW
3	WORDS ABOUT THAT BECAUSE IT IS SOMETHING THAT WE
4	NEED TO MAKE SURE EVERYBODY IS AWARE OF.
5	MS. BAUM: I GAVE A SUMMARY OF THIS AWHILE
6	BACK, IT MIGHT HAVE BEEN IN JUNE ALREADY, TO THE IP
7	SUBCOMMITTEE. AND WE KNEW THAT THERE WAS BEFORE THE
8	EUROPEAN COURT OF JUSTICE A CASE THAT THEY WERE
9	ASKED TO OPINE ON CERTAIN LEGAL ISSUES THAT CAME
10	FROM GERMANY. GREENPEACE HAD CHALLENGED A DECISION
11	GRANTING A PATENT ON NEURAL PRECURSOR STEM CELLS
12	THAT AROSE FROM EMBRYONIC STEM CELLS.
13	AND THE COURT IN GERMANY WAS REQUIRED TO
14	INTERPRET WHAT THEY CALL THE BIOTECH INVENTIONS
15	DIRECTIVE. AND THAT PARTICULAR DIRECTIVE STATES
16	THAT THE USE OF HUMAN EMBRYOS FOR INDUSTRIAL OR
17	COMMERCIAL USE SHALL BE CONSIDERED UNPATENTABLE.
18	SO THERE WERE A NUMBER OF LEGAL QUESTIONS
19	THAT THE GERMANY COURT WOULD HAVE TO OPINE ON, AND
20	IT FELT THAT IT WAS APPROPRIATE TO ASK THE EUROPEAN
21	UNION COURT OF JUSTICE FOR GUIDANCE ON THAT. I
22	WON'T GET INTO ALL THE SPECIFIC QUESTIONS AND
23	ANSWERS THAT THE COURT PROVIDED, BUT THE MOST
24	CONCERNING ONE IS A FINDING. I'M GOING TO QUOTE IT
25	AND THEN I'LL PARAPHRASE IT.

1	IT STATED THAT AN INVENTION MUST BE
2	REGARDED AS UNPATENTABLE, EVEN IF THE CLAIMS OF THE
3	PATENT DO NOT CONCERN THE USE OF HUMAN EMBRYOS,
4	WHERE THE IMPLEMENTATION OF THE INVENTION REQUIRES
5	THE DESTRUCTION OF HUMAN EMBRYOS.
6	AS YOU CAN SEE, IT'S A FAR-REACHING
7	OPINION THAT ALL THE COUNTRIES WOULD HAVE TO APPLY
8	WHEN THEY'RE DETERMINING PATENT CHALLENGES. SO THE
9	GUT IS OR THE TAKEAWAY IS THAT IF IT INVOLVED THE
10	DESTRUCTION OF A HUMAN EMBRYO, EVEN IF THAT IS NOT
11	STATED DIRECTLY WITHIN THE PATENT APPLICATION AND
12	MIGHT HAVE HAPPENED THROUGH PREVIOUS RESEARCH YEARS
13	AGO, THE PATENT WOULD BE BANNED. SO THAT'S A
14	FAR-REACHING APPLICATION OF THE LAW WHICH WILL HAVE
15	BINDING EFFECT ON ALL THE COUNTRIES IN EUROPE.
16	THE OUTCOME OF THAT WILL DETERMINE HOW THE
17	PATENT OFFICES ACTUALLY APPLY THAT. THERE ARE
18	ANALYSTS THAT BELIEVE THAT AT LEAST SOME SMART
19	ATTORNEYS IN EUROPE WILL BE ABLE TO IN SOME DEGREE
20	PATENT OTHER ASPECTS OF A PROJECT. OTHERS POINT OUT
21	THAT EVEN REGARDLESS OF THE PATENTS, THERE MIGHT
22	STILL BE AN ABILITY TO PROTECT THE RESEARCH AND
23	THAT, UNDER REGULATORY REQUIREMENTS, YOU'D STILL
24	HAVE TO GO THROUGH ALL THE REGULATORY REVIEW ON THE
25	PARTICULAR CELL LINE AND PRODUCT AT ISSUE, AND THAT

1	CREATES SOME BARRIER TO ENTRY.
2	SO I THINK THAT WHILE IT'S CONCERNING
3	BECAUSE IT'S A BROAD REACH, THE SILVER LINING IN
4	SOME RESPECTS IS THAT THERE COULD BE SOME ABILITY TO
5	STILL PROTECT THE SPECIFIC WORK VIA REGULATORY
6	REQUIREMENTS, ETC.
7	DR. BRYANT: COULD I ASK A QUESTION? SO
8	DOES THAT MEAN, FOR INSTANCE, WE DON'T DESTROY
9	EMBRYOS NOW BECAUSE WE'VE GOT CELL LINES. ARE THEY
10	SAYING EVEN SOMETHING THAT COMES FROM A CURRENT CELL
11	LINE WOULD BE PROHIBITED BECAUSE IT ORIGINALLY CAME
12	FROM A HUMAN EMBRYO?
13	MS. BAUM: THAT'S THE CONCERN. IT REACHES
14	ALL THE WAY BACK IN EUROPE, NOT HERE.
15	SO I THINK THOSE WERE THE KEY TAKEAWAY,
16	THAT IT'S A BROAD APPLICATION OF THE EUROPEAN LAW,
17	AND FOLKS ARE VERY CONCERNED ABOUT IT. THERE STILL
18	MIGHT BE SOME ABILITY TO PROTECT THE RESEARCH IN
19	EUROPE BECAUSE OF REGULATORY BARRIERS, ETC.
20	CHAIRMAN THOMAS: ANY OTHER QUESTIONS OF
21	ELONA ON THIS POINT? OKAY. THANK YOU VERY MUCH.
22	ONE MINOR HOUSEKEEPING ISSUE, IF YOU
23	NOTICE THE MEETING SCHEDULE IN YOUR BOOKS THERE, THE
24	DATES FOR THE JANUARY AND DECEMBER MEETINGS NEXT
25	YEAR HAVE BEEN SLIGHTLY ALTERED. AND YOU CAN SEE

1	THE JANUARY MEETING IS THE 17TH IN SAN DIEGO AND
2	DECEMBER IS THE 12TH IN LOS ANGELES.
3	THAT CONCLUDES MY REPORT. ANYBODY HAVE
4	ANY QUESTIONS ON ANY OF THE ITEMS?
5	DR. LUBIN: IT WOULD BE INTERESTING TO SEE
6	THE LIST OF QUESTIONS, THE FINAL LIST OF QUESTIONS
7	THAT WERE SUBMITTED TO THE IOM. MAYBE YOU
8	DISTRIBUTED THIS; AND IF I'M ASKING THAT AND HAVEN'T
9	SEEN IT, I APOLOGIZE, BUT IT WOULD BE NICE TO SEE
10	WHAT THEY'RE WHAT YOU'VE ASKED THEM TO LOOK AT.
11	CHAIRMAN THOMAS: LYNN, CAN YOU MAKE SURE
12	THAT'S CIRCULATED TO THE BOARD? THANK YOU.
13	LET'S NOW PROCEED TO THE NEXT ITEM, WHICH
14	IS THE PRESIDENT'S REPORT. DR. TROUNSON.
15	MS. BONNEVILLE: QUICKLY I'D JUST LIKE TO
16	CONFIRM CLAIRE POMEROY AND MARCY FEIT ARE ON THE
17	LINE.
18	DR. POMEROY: YES, I AM. THANK YOU VERY
19	MUCH.
20	MS. BONNEVILLE: MARCY, ARE YOU ON?
21	MS. FEIT: THIS IS MARCY. I'M ON LINE.
22	DR. VUORI: THIS IS KRISTINA VUORI. I'M
23	ON THE PHONE AS WELL.
24	CHAIRMAN THOMAS: MORNING, KRISTINA.
25	DR. VUORI: GOOD MORNING, EVERYBODY.
	20

1	DR. TROUNSON: SO, JON, JUST FOLLOW-UP
2	COMMENTS ON THE EUROPEAN RULING. I'M ACTUALLY VERY
3	CONCERNED ABOUT THE OVERALL MOVEMENT IN THE WORLD
4	TOWARDS A VERY MORE CONSERVATIVE VIEW. AND I JUST
5	DRAW YOUR ATTENTION TO THE VATICAN INVESTMENT INTO
6	AN ADULT STEM CELL COMPANY WITH RADICALLY FALLING
7	PRICES. IT DOESN'T SOUND AN ECONOMIC REASON TO BACK
8	THAT COMPANY.
9	AND ALSO CONCERNS THAT I HAVE IN THE U.S.
10	ABOUT WHAT I SEE AS SOME STRONG POTENTIALLY NEGATIVE
11	VIEWS ARISING, I THINK, AS THIS PRESIDENTIAL
12	ELECTION PROGRESSES. SO I THINK THE WORLD, THE
13	GLOBAL ORGANIZATIONS HAVE REALLY BEEN MUCH MORE
14	REACTIVE IN RECENT YEARS RATHER THAN PROACTIVE. AND
15	I'M ENCOURAGING THOSE ORGANIZATIONS TO BECOME A BIT
16	MORE PROACTIVE, I THINK, BECAUSE THE COMMUNITY
17	ACTUALLY DOESN'T REALLY RECOGNIZE A BIG DIFFERENCE
18	BETWEEN STEM CELLS AND EMBRYONIC STEM CELLS
19	ACTUALLY. SO IT WOULD HAVE A BIG NEGATIVE IMPACT
20	REALLY ACROSS THE WHOLE SPACE IF THIS SORT OF
21	MOVEMENT REALLY GAINS MOMENTUM.
22	SO I SEE IT AS A CONCERN AND SOMETHING
23	THAT WE OUGHT TO BE INTERESTED IN. AND MAYBE IF AN
24	ORGANIZATION IS PREPARED TO COME TOGETHER TO BE A
25	BIT MORE PROACTIVE, I THINK WE SHOULD ENCOURAGE THAT

1	AT THE VERY LEAST. SO IT'S JUST A CONCERN THAT I'VE
2	HAD FOR A LITTLE WHILE NOW.
3	SO I WANT TO CAN YOU SEE THIS? I WANT
4	TO TALK TO YOU ABOUT NUCLEAR TRANSFER BECAUSE THERE
5	WAS A PAPER, AN INTERESTING PAPER, THAT WAS
6	PUBLISHED RECENTLY ON NUCLEAR TRANSFER. IF YOU LOOK
7	AT THE TOP LINE HERE, IF YOU CAN SEE THAT THAT FAR,
8	I THINK IT SHOULD BE ABLE TO BE VISUALIZED. AT THE
9	TOP BRACKET WE'VE GOT WHAT'S NORMAL DEVELOPMENT WHEN
10	YOU TAKE AN OOCYTE AND THEN IT'S FERTILIZED BY SPERM
11	AND THEN PRODUCES AN EMBRYO THAT GOES ON TO EITHER
12	REPRODUCTION OR YOU CAN MAKE AN EMBRYONIC STEM CELL
13	OUT OF IT. SOMEHOW THE SPERM GOT MISSING. IT'S
14	PROBABLY GONE TO YELLOW IN THE PICTURE.
15	THE EMBRYO IS A 2N AND IT'S A DOUBLE SET
16	OF CHROMOSOMES. THAT'S REALLY WHAT'S VERY IMPORTANT
17	HERE. SO IF YOU TAKE NUCLEAR TRANSFER, YOU TAKE THE
18	2N DONOR SOMATIC CELL, A SKIN CELL, IF YOU LIKE, AND
19	YOU PUT IT INTO AN EGG THAT YOU'VE REMOVED THE
20	NUCLEUS FROM. SO YOU TAKE OUT THE EGG'S NUCLEUS,
21	THE RED COMPONENT THERE ON THE SECOND LINE, AND
22	INTRODUCE THE 2N NUCLEUS. YOU'VE GOT A SOMATIC CELL
23	NUCLEAR TRANSFER CONSTRUCT, WHICH ACTUALLY DEVELOPS
24	AS THE EQUIVALENT OF AN EMBRYO. AND THAT'S NOT
25	PERMITTED TO BE USED FOR REPRODUCTIVE CLONING, OF

1	COURSE, BUT YOU CAN ACTUALLY MAKE AN EQUIVALENT OF
2	AN EMBRYONIC STEM CELL OR PLURIPOTENTIAL STEM CELL
3	OUT OF IT. AND THAT COULD BE USED FOR THERAPEUTIC
4	PURPOSES IN ANIMALS.
5	AND THE BOTTOM ONE IS A PROCEDURE THAT'S
6	BEING WORKED ON, THIS SORT OF GIVES YOU THE FULL
7	PARAMETERS HERE, WHERE PATIENTS MIGHT HAVE
8	MITOCHONDRIAL DISEASE. SO ACTUALLY IN A PATIENT'S
9	EGGS, YOU TAKE THE NUCLEUS AND YOU PUT IT INTO A
10	DONOR EGG WHICH YOU'VE REMOVED THE NUCLEUS, AND YOU
11	CAN GROW AN EMBRYO FROM THAT. AND THAT EMBRYO WILL
12	NOT CONTAIN ANY OR VERY LITTLE, IF ANY,
13	MITOCHONDRIAL COMPONENT WHICH HAS GOT
14	MITOCHONDRIA HAVE DNA, SO THAT'S WHERE MITOCHONDRIAL
15	GENETIC DISEASE EXISTS. SO THIS WOULD BE A CURE,
16	AND IT'S BEEN SHOWN TO WORK IN ANIMALS. THIS WOULD
17	BE A CURE FOR MITOCHONDRIAL DISEASES. THAT'S THE
18	SORT OF SPACE THAT THE SCIENTISTS HAVE BEEN WORKING
19	IN, AND WE'VE ALWAYS BEEN INTERESTED IN THE NUCLEAR
20	TRANSFER PART.
21	SO THE TOP LINE REMAINS NORMAL
22	DEVELOPMENT. BUT IF YOU COME DOWN TO THE SECOND
23	LINE NOW, AND I'LL TAKE YOU THROUGH THE SOMATIC CELL
24	BEING INTRODUCED INTO THE EGG. THE EGG HAD ITS
25	NUCLEUS REMOVED, THE 1N REMOVED. WE'RE ON THE

1	SECOND LINE NOW. AND NOW WHAT HAD HAPPENED IN A
2	PUBLICATION THAT WAS JUST RECENTLY PUBLISHED WAS
3	THAT IF YOU DO THAT IN THE HUMAN, INSTEAD OF
4	PRODUCING A BLASTOCYST AND, THEREFORE, THE
5	EQUIVALENT OF PLURIPOTENTIAL OR EMBRYONIC STEM CELLS
6	FOR THERAPEUTIC CLONING, THE EMBRYO STOPPED
7	DIVIDING. IT JUST HAS CELLS. SO YOU CAN SEE THE
8	BIG RED X. IT DIDN'T GO ON ANY FURTHER. SO THIS IS
9	WORK THAT SHOWED THAT THEY COULDN'T GO ON ANY
10	FURTHER.
11	NOW, IF YOU GO DOWN TO THE BOTTOM LINE,
12	WHAT THEY WERE ABLE TO DO WAS TO DO THE WHOLE
13	PROCEDURE EXCEPT THEY DIDN'T REMOVE THE RED NUCLEUS
14	OF THE EGG. SO NOW YOU HAVE THE NUCLEUS OF THE EGG
15	STILL THERE, BUT YOU'VE ADDED THE SOMATIC CELL
16	CHROMOSOMES IN ITS NUCLEUS. NOW YOU'VE GOT A 3N, SO
17	YOU'VE GOT THREE SETS OF CHROMOSOMES. SO THAT'S
18	CALLED TRIPLOIDY. AND THEY'RE ABLE TO GROW THE
19	BLASTOCYSTS, TRIPLOID BLASTOCYSTS FROM THAT, AND
20	ALSO PRODUCE THE EQUIVALENT OF EMBRYONIC STEM CELL
21	LINES.
22	SO IF YOU LEAVE THE EGG'S NUCLEUS IN
23	PLACE, YOU CAN ACTUALLY GET THE PROCEDURE TO WORK.
24	SO THAT WAS INTERESTING. THIS WAS THEIR EXPERIMENT.
25	IT WAS INTERESTING.

1	I WANT TO TAKE YOU BACK TO THE SECOND LINE
2	BECAUSE I THINK WHAT'S ALSO MORE INTERESTING OR AS
3	INTERESTING IS THEY TOOK AN EMBRYONIC BLASTOMERE,
4	THAT IS, A CELL OF AN EIGHT-CELL EMBRYO, HUMAN
5	EMBRYO, CELL OF AN EIGHT-CELL EMBRYO. AND INSTEAD
6	OF USING A SKIN CELL, THEY PUT IN THE CELL OF THE
7	EIGHT-CELL EMBRYO. SO THIS IS A PRETTY
8	UNDIFFERENTIATED CELL BECAUSE IT'S BEFORE ANY
9	DIFFERENTIATION OCCURS.
10	WHEN THEY FUSE THAT INTO THE EMPTY EGG
11	CELL, THEY GOT BLASTOCYSTS, AND THEY GOT BLASTOCYSTS
12	PRODUCED. RIGHT. SO THIS IS ALSO INTERESTING.
13	THEY DON'T MAKE MUCH OF A POINT IN THE PAPER ABOUT
14	THAT, BUT I THINK IT'S PARTICULARLY INTERESTING.
15	SO NOW LET'S GO TO THE PAPER. SO THIS WAS
16	PUBLISHED IN NATURE IN OCTOBER, AND IT WAS THE WORK
17	OF THE ELGI LAB OF THE NEW YORK STEM CELL
18	FOUNDATION. LET ME GO THROUGH IT JUST IN WORDS.
19	THE SOMATIC CELL NUCLEAR TRANSFER EMBRYOS WOULD NOT
20	DEVELOP BEYOND A FEW CLEAVAGE STAGES. THAT'S
21	DIFFERENT TO WHAT HAPPENED IN CALIFORNIA BECAUSE THE
22	CALIFORNIANS SHOWED THAT YOU COULD GROW BLASTOCYSTS.
23	YOU COULD GROW BLASTOCYSTS. IT WAS ANDY FRENCH,
24	WHO'S A POST-DOC THAT ACTUALLY WORKED WITH ME, BUT
25	HE'S WORKING WITH SAM WOOD IN CALIFORNIA. SO THAT'S

1	SOMETHING A LITTLE DIFFERENT THERE.
2	ALSO, IN MONKEYS THEY COULD GET IT TO
3	WORK. SO THE MITALIPOV GROUP IN SEATTLE WERE ABLE
4	TO PRODUCE SOMATIC CELL NUCLEAR TRANSFER CELL LINES,
5	EQUIVALENT OF EMBRYONIC STEM CELL LINES. SO THESE
6	THREE LABS ARE ALL A BIT DIFFERENT. AT LEAST IN TWO
7	INSTANCES THEY'RE ABLE TO DO IT, BUT IN THE NEW YORK
8	STUDIES THEY COULDN'T. THEY ONLY GOT CLEAVAGE. SO
9	YOU HAVE TO REMEMBER THAT THERE'S A LOT OF DARK OUT
10	THERE, AND WE NEED TO FIGURE OUT WHAT'S IMPORTANT.
11	WELL, NOW, IF YOU TAKE THE NUCLEAR
12	TRANSFER OF THE DIPLOID SOMATIC CELL INTO THE INTACT
13	OOCYTE, SO ONE OOCYTE DOESN'T HAVE ITS NUCLEUS
14	REMOVED, THEY PRODUCE BLASTOCYSTS. AND THESE ES
15	CELLS WERE ALL TRIPLOID. AND TRIPLOID ES CELLS ARE
16	NOT PARTICULARLY USEFUL BECAUSE THEY'RE
17	CHROMOSOMALLY ABNORMAL, AND YOU DON'T REALLY WANT TO
18	USE THOSE BECAUSE THEY'VE GOT THREE SETS OF
19	CHROMOSOMES. SO YOU COULDN'T ALWAYS PREDICT WHAT
20	MIGHT HAPPEN IN THAT SENSE. I THINK THEY CAN BE
21	UNSTABLE. I THINK THE GROUP THERE THINKS THAT THEY
22	ARE STABLE, BUT GENERALLY YOU WERE WORRIED ABOUT
23	TRIPLOID CELLS. THREE SETS OF CHROMOSOMES IS NOT
24	WHAT YOU REALLY WANT.
25	SO I THINK THE WORLD THINKS THAT'S

Т	INTERESTING, DUT MATTE NOT TERRIBLY USEFUL AT THIS
2	POINT. NOW, THE EMBRYONIC BLASTOMERE WORKED WHEN
3	INJECTED INTO THE ENUCLEATED EGG, AND THEY
4	PARTHOGENETICALLY ACTIVATED THAT OOCYTE TO DO THAT.
5	SO THAT'S WHAT'S INTERESTING BECAUSE I WONDER WHY
6	THEY DIDN'T TRY TO USE AN IPS CELL BECAUSE AN IPS
7	CELL IS VERY CLOSE TO A BLASTOMERE. RIGHT. THAT'S
8	A VERY UNDIFFERENTIATED CELL. SO THAT WAS THE
9	OBVIOUS EXPERIMENT THAT I WOULD HAVE THOUGHT THAT
LO	THEY SHOULD HAVE DONE BECAUSE IF YOU TOOK AN IPS
L1	CELL AND USED IT, AND IF THAT WOULD WORK, WELL, YOU
L2	COULD GET YOUR THERAPEUTIC CLONING PROCEDURE WORKING
L3	FROM THAT. SO THAT WAS JUST AN INTERESTING
L4	OBSERVATION.
L5	SO AT LEAST FROM THE NEW YORK STEM CELL
L6	STUDY, THERE'S SOMETHING WRONG WITH THE SOMATIC
L7	CELL, THE SKIN CELL, NUCLEUS. IT'S NOT WORKING FOR
L8	THEM AT LEAST. WHAT'S THE NEXT EXPERIMENT? I THINK
L9	
	YOU OUGHT TO TRY AN IPS CELL. SO I THINK IT'S AN
20	YOU OUGHT TO TRY AN IPS CELL. SO I THINK IT'S AN INTERESTING SET OF EXPERIMENTS. I THINK IT'S BEEN
20 21	
	INTERESTING SET OF EXPERIMENTS. I THINK IT'S BEEN
21	INTERESTING SET OF EXPERIMENTS. I THINK IT'S BEEN INTERPRETED DIFFERENTLY, AND YOU'VE JUST GOT MY
21 22	INTERESTING SET OF EXPERIMENTS. I THINK IT'S BEEN INTERPRETED DIFFERENTLY, AND YOU'VE JUST GOT MY INTERPRETATION OF IT. I THINK IT'S AN IMPORTANT
?1 ?2 ?3	INTERESTING SET OF EXPERIMENTS. I THINK IT'S BEEN INTERPRETED DIFFERENTLY, AND YOU'VE JUST GOT MY INTERPRETATION OF IT. I THINK IT'S AN IMPORTANT PIECE OF WORK BECAUSE THINGS HAVE GONE A BIT DEAD ON

1	AND WE JUST HAD A WORKSHOP NOT SO LONG
2	AGO, AND THAT PUBLISHED THAT, AND WE ACTUALLY
3	PUBLISHED A SUMMARY OF THAT IN NATURE BIOTECHNOLOGY
4	AS WELL, SAYING WE THINK THAT SOMATIC CELL NUCLEAR
5	TRANSFER HAS SOME VERY IMPORTANT ISSUES THAT COULD
6	HELP US IF WE'RE ABLE TO DO IT. SO I STILL THINK
7	IT'S AN IMPORTANT AREA OF RESEARCH, AND THIS IS A
8	STEP, BUT IT'S A BIT OF A CLOUDY ONE, AND I THINK
9	THE NEXT EXPERIMENT MIGHT BE THE MOST INTERESTING.
10	SO MOVING ON, THERE WAS A PAPER THAT WAS
11	PUBLISHED IN <i>SCIENCE TRANSLATIONAL MEDICINE</i> ON
12	MYOCARDIAL INFARCTS IN MICE THAT IMPAIR THE
13	THERAPEUTIC POTENTIAL OF BONE MARROW CELLS. NOW,
14	YOU WILL PROBABLY REMEMBER THAT MESENCHYMAL STEM
15	CELLS OR MSC'S ARE BEING USED IN MANY, MANY STUDIES
16	TO LOOK TO SEE IF THEY CAN IMPROVE THE HEART
17	CONDITION OF PATIENTS. SO THEY'RE INJECTING
18	PATIENTS IN A LOT OF DIFFERENT CLINICAL TRIALS NOW
19	WITH MESENCHYMAL STEM CELLS.
20	AND THE QUERY THAT CAME FROM THIS RESEARCH
21	GROUP IS, WELL, THIS WORKED PRETTY WELL IN THE MICE.
22	SO WHEN YOU'VE GOT A NORMAL MOUSE AND YOU PUT IN
23	MESENCHYMAL STEM CELLS, YOU ACTUALLY GOT QUITE A
24	CONTRIBUTION THERE. BUT WHEN THEY TRIED IT WITH A
25	MOUSE THAT HAD AN INDUCED INFARCT, IT DIDN'T WORK.

1	AND SO YOUR PATIENTS ARE THE ONES THAT HAVE GOT AN
2	INFARCT. THEY'VE HAD A HEART ATTACK. THEY'VE GOT
3	DAMAGED HEART. AND SO THERE'S SOMETHING IN THE BONE
4	MARROW WHICH IS A RESPONSE, AN INFLAMMATORY
5	RESPONSE, WHICH IS STOPPING THOSE MESENCHYMAL STEM
6	CELLS BEING EFFECTIVE.
7	SO THE QUESTION HERE IS THAT IF YOU ARE
8	GOING TO USE THE PATIENT'S OWN MSC'S, MAYBE THAT'S
9	NOT THE BEST SOURCE. THIS EXPERIMENT SAYS MAYBE
10	THAT'S NOT THE BEST SOURCE. MAYBE YOU SHOULD GO TO
11	A SOURCE THAT HASN'T HAD MYOCARDIAL INFARCT IF YOU
12	EXPECT IT TO DO SOME BENEFIT. SO I THINK IT'S AN
13	INTERESTING OBSERVATION, NEEDS TO BE FOLLOWED UP,
14	BUT THERE'S BEEN A LOT OF QUESTIONS ABOUT WHY
15	DOESN'T IT WORK AS WELL AS IT DID IN THE ANIMAL
16	MODELS.
17	THERE'S A BEAUTIFUL PAPER, AND THIS
18	DESERVES TO HAVE LOTS OF FIGURES ATTACHED TO IT, AND
19	I CAN'T DO THAT BECAUSE I DON'T REALLY HAVE ACCESS
20	TO THOSE FIGURES. I ENCOURAGE YOU TO GO AND LOOK AT
21	THIS NATURE PAPER. IT'S A BEAUTIFUL PAPER BY ARTURO
22	ALVAREZ-BUYLIA'S GROUP AT THE UCSF IN NATURE
23	PUBLISHED IN OCTOBER.
24	THEY'VE BEEN LOOKING IN THE HUMAN BRAIN
25	FROM SAMPLES THAT THEY'VE BEEN OBTAINING FROM

1	INFANTS THROUGH TO ADULTS, BRAIN TISSUE. AND THEY
2	HAVE BEEN LOOKING TO SEE WHAT'S THE STRUCTURE OF THE
3	NEW NEURONS? WHERE ARE THE NEW NEURONS APPEARING IN
4	THE HUMAN AS DISTINCT FROM HOW THEY APPEAR IN THE
5	RODENT. IT'S VERY, VERY DIFFERENT IN THE HUMAN THAN
6	IT IS IN THE RODENT. SO THAT RAISES A QUESTION
7	ABOUT HOW RELEVANT SOME OF THE MODELS ARE IN THE
8	RODENT. AND THIS BEAUTIFUL WORK HAS REALLY BEEN
9	DONE VERY CAREFULLY BY A TERRIFIC GROUP AT UCSF, AND
10	THEY'RE REALLY LEADING THE WAY IN GETTING TO
11	UNDERSTAND WHAT'S HAPPENING THERE.
12	SO THERE'S A TOTALLY DIFFERENT SET OF
13	MIGRATORY PATHWAYS IN THE HUMAN BRAIN AND A VERY
14	DIFFERENT STRUCTURE FOR THE WAY THE NEURONS ACTUALLY
15	MOVE OUT INTO THE PRINCIPAL AREAS OF THE FRONTAL
16	CORTEX AND OTHERS. SO THESE, INSTEAD OF HAVING A
17	SINGLE MIGRATORY STREAM GOING TOWARDS THE OLFACTORY
18	BULB, WHICH IS PRETTY IMPORTANT FOR A MOUSE, IT
19	NEEDS TO SNIFF EVERYTHING. YOU KNOW, A MOUSE NEEDS
20	TO SNIFF ITS WHOLE LIFE AROUND FIGURING OUT WHAT DO
21	ALL THESE NEW SMELLS MEAN TO HIM. HUMANS DON'T DO
22	THAT. I THINK I DO. I'VE LOST A LOT OF MY ACUTE
23	SENSE OF SMELL. THAT'S NOT REALLY RELEVANT TO THIS,
24	BUT WE ARE DIFFERENT TO MICE AND WE DON'T SNIFF AS
25	WELL AS MICE DO OR DOGS OR WHATEVER.

1	SO THE NEURONAL PATHWAYS HERE HAVE BEEN
2	INVESTED IN SOME AREAS IN THE BRAIN WHICH REALLY
3	MAKES US DIFFERENT. IF YOU DON'T UNDERSTAND THAT,
4	IT'S GOING TO BE A PROBLEM. SO THIS NEW PATHWAY
5	REALLY SORT OF GETS GOING IN EARLY INFANCY AND
6	SORRY IN FETAL LIFE AND GOES ON IN INFANTS AND
7	THEN DECAYS AWAY IN TIME. IT'S VERY IMPORTANT TO
8	KNOW THIS IF YOU ARE GOING TO PUT NEURAL CELLS,
9	GLIAL CELLS, INTO THE BRAIN AND EXPECT THEM TO GET
10	TO THE RIGHT POSITION. YOU'VE GOT TO UNDERSTAND
11	WHAT THE MIGRATORY PATHWAYS ARE.
12	SO IT'S A VERY BEAUTIFUL PIECE OF WORK,
13	AND I CAN'T DO JUSTICE TO IT WITHOUT THE GREAT
14	PICTURES, BUT I ENCOURAGE YOU TO GO LOOK AT THIS.
15	JUST GO LOOK AT THE PICTURES AND YOU'LL BE REALLY,
16	REALLY IMPRESSED. WHAT I THINK IS GOING TO HAPPEN
17	IS THAT SCIENTISTS ARE GOING TO REFLECT A LITTLE BIT
18	ON WHERE THEY PUT THEIR CELLS AND HOW THEY EXPECT
19	THEIR CELLS TO MOVE INTO THE PLACES THAT THEY NEED
20	TO FOR BENEFIT.
21	NOW, THERE'S A COUPLE OF PAPERS HERE I
22	THOUGHT I'D DRAW YOUR ATTENTION TO THAT HAVE BEEN
23	JUST PUBLISHED ON GENOMIC SEQUENCES IN IPS CELLS AND
24	EMBRYONIC STEM CELLS BECAUSE THERE'S BEEN QUITE A

LOT OF NEGATIVE THOUGHTS ABOUT HOW WELL THESE CELLS

25

1	ARE WITH RESPECT TO THEIR GENOMIC INTEGRITY. IT
2	SEEMS LIKE EVERY PAPER THAT YOU READ, THAT THESE IPS
3	CELLS HAVE GOT MAJOR PROBLEMS OF GENOMIC DELETIONS
4	AND REARRANGEMENTS AND SO ON.
5	THIS ONE PAPER HERE BY WALTER FUNK'S
6	GROUP. WALTER IS WITH THE BIOTIME COMPANY, AND HE'S
7	DONE A VERY NICE STUDY LOOKING AT FIVE OF THE HUMAN
8	EMBRYONIC STEM CELL LINES. AND THEY'VE LOOKED AT
9	THAT IN SOME DETAIL, LOOKED AT THE CHROMOSOMES AND
10	PARTICULARLY PARTS OF THE GENOME THAT YOU WOULD BE
11	CONCERNED WITH. THAT IS, THOSE ARE THE ONCOGENES
12	AND PARTICULARLY TUMOR SUPPRESSORS. ARE THERE
13	REARRANGEMENTS IN THESE CELLS WHICH WOULD BE
14	CONCERNING?
15	WELL, THEY'VE ACTUALLY FOUND, LOOKING
16	ACROSS THIS SPACE, THAT THERE REALLY HASN'T BEEN
17	MUCH REARRANGEMENT AT ALL, IF ANY. THEY LOOKED AT
18	HLA BLOOD TYPES, APOE GENES ASSOCIATED WITH
19	ALZHEIMER'S AND CARDIOVASCULAR DISEASE AND SO ON.
20	AND THEY COULDN'T REALLY FIND ANY DIFFERENCES, NO
21	DIFFERENCES THAT WOULDN'T BE EXPECTED IN A HUMAN
22	POPULATION ANYWAY.
23	SO THEIR CONCLUSION IS, AT LEAST IN EARLY
24	PASSAGE, THESE CELLS HAVE A GENOMIC INTEGRITY WHICH
25	PRETTY MUCH MATCHES WHAT YOU'D EXPECT A HUMAN CELL

1	TYPE TO BE, AND THAT ONE SHOULDN'T BE OVERLY
2	CONCERNED ABOUT ANY REARRANGEMENTS IN THOSE CELLS.
3	NOW, THAT'S NOT DEEP SEQUENCING THE WHOLE
4	GENOME, MIND YOU. SO IT'S A REASONABLE CONCLUSION,
5	I THINK, BASED ON THEIR STUDIES, BUT IT DOESN'T GO
6	DEEP TO TELL YOU WHETHER THERE MIGHT BE CHANGES IN
7	MINOR STRUCTURES. BUT THIS PAPER HERE, WHICH REALLY
8	LOOKS AT IPS CELLS, AND MAYBE THE IPS CELLS HAVE
9	SOME CONCERNS ABOUT THEM AS PUBLISHED IN CELL STEM
10	CELL BY THE QUINLAN GROUP AND INCLUDES AT LEAST ONE
11	AUTHOR FROM SCRIPPS, THEY LOOKED AT THE IPS CELLS IN
12	MICE. AND THEY WERE LOOKING AT THE STRUCTURAL
13	VARIANCE.
14	THESE ARE THE ONES THAT TELL YOU WHETHER
15	THERE'S CHANGES IN THE GENOME, WHETHER THERE'S BEEN
16	DELETIONS, REARRANGEMENTS, AND SO ON. AND THEY
17	FOUND VERY FEW OF THESE STRUCTURAL VARIATIONS AT
18	ALL, AND THESE INSERTIONS, 41 OF THEM, WERE
19	INSERTIONS OF AN EXOGENOUS RETRO ELEMENT, AND FOUR
20	WERE CANONICAL DELETIONS, DUPLICATIONS OR
21	INVERSIONS, BUT THERE WAS REALLY NO EVIDENCE OF ANY
22	ENDOGENOUS RETRO ELEMENT TRANSPOSITION. THAT MEANS
23	THE RETRO TRANSPOSANS, WHICH ARE THE JUMPING GENES
24	THAT TEND TO BE VERY ACTIVATED IN THESE CELLS, WERE
25	NOT MOVING AROUND.

1	SO IN CONTRAST WITH A LOT OF EARLIER
2	STUDIES ON IPS CELLS, THERE ARE VERY FEW DE NOVO
3	STRUCTURAL VARIANTS EXISTING IN THE MOUSE IPS CELLS,
4	VERY, VERY FEW, AT LEAST IN EARLY PASSAGE. THEY'RE
5	NOT SORT OF SAYING THAT THEY'RE NOT THERE IF YOU
6	GROW THEM FOR A LONG PERIOD OF TIME. THEY DIDN'T
7	REALLY STUDY THAT. SO MORE STUDIES ARE NEEDED IN
8	THIS AREA TO SEE IF REALLY THE MOUSE AND THE HUMAN
9	ARE DIFFERENT. AND I THINK, AGAIN, IT'S GOOD REASON
10	FOR US TO KEEP WORKING ON THE GENOME IN STEM CELLS
11	TO MAKE SURE THAT WE'VE GOT A FULL UNDERSTANDING OF
12	WHAT'S HAPPENING HERE. TWO PAPERS THAT WOULD
13	SUGGEST THERE'S VERY LITTLE CHANGE, IF ANY, OF ANY
14	REAL SIGNIFICANCE IN THESE CELLS, AT LEAST WHEN
15	THEY'RE MADE. THAT'S KIND OF GOOD NEWS. AND I
16	THINK WE NEED TO SEE WHAT HAPPENS IN THESE STUDIES
17	IN THE FUTURE.
18	SO I THOUGHT THOSE WERE A RAFT OF VERY
19	INTERESTING PAPERS, AND I HOPE YOU THINK THEY'RE
20	INTERESTING AS WELL.
21	NOW, WITH THE UPCOMING RFA'S, THE DISEASE
22	TEAM THERAPY DEVELOPMENT, WE'VE DONE THE PLANNING
23	PERIOD HAS BEGUN NOW IN SEPTEMBER, AND THE RESEARCH
24	AWARDS ARE POSTED. THEY WERE POSTED IN SEPTEMBER.
25	SO TEAMS ARE OUT THERE GETTING BUSY. THEY'RE

1	GETTING BUSY ORGANIZED, AND WE EXPECT THEM TO BE
2	SUBMITTING THEIR PROPOSALS. I THINK THERE WAS 19 OF
3	THEM, AS I REMEMBER. THEY'LL BE SUBMITTING THEIR
4	PROPOSALS IN JANUARY, I THINK.
5	AND WE'VE ALSO RECEIVED, I THINK, 16
6	APPLICATIONS FOR ENTRY BY COMPANIES. SO THEY HAVE
7	BEEN SUBMITTED TO US, AND WE NEED TO LOOK TO SEE
8	WHETHER THEY'RE APPROPRIATE. SO THERE'S 19 PLUS 16
9	AT THE MOMENT.
10	THE EARLY TRANSLATIONAL III AWARDS, THE
11	GRANTS REVIEW OF APPLICATIONS WILL BE IN MARCH NEXT
12	YEAR. BASIC BIOLOGY IV, THE CONCEPT PROPOSAL IS
13	HERE AT THIS MEETING. CREATIVITY AWARDS, THE
14	CONCEPT PROPOSAL IS AT THIS MEETING. AND THE IPS
15	CELL INITIATIVE, BANKING INITIATIVE, WILL BE
16	PRESENTED IN DECEMBER.
17	SO COLLABORATIVE FUNDING PARTNERS UPDATE,
18	WE HAD AN MOU, MEMORANDUM OF UNDERSTANDING, SIGNED
19	WITH NIH. AND WE'VE ALSO HAD ONE WITH SCOTLAND
20	SIGNED. SO BOTH OF THOSE ARE NOW SIGNED MOU'S WITH
21	US TO COLLABORATE. I'LL SPEAK A LITTLE BIT MORE
22	ABOUT NIH IN A MOMENT.
23	IN THE EARLY TRANSLATIONAL II RFA,
24	POTENTIAL COLLABORATIVE FUNDING PARTNERS WERE, ARE
25	AUSTRALIA, CHINA, GERMANY, AND JAPAN. AND I THINK

1	THERE'S PROBABLY REPRESENTATIVES OF ALL OF THOSE
2	COUNTRIES STILL MOVING FORWARD IN THOSE STUDIES. SO
3	THIS IS OUR FIRST JOINT FUNDING EFFORT WITH CHINA
4	AND WITH THE NH&MRC, THE NATIONAL HEALTH AND MEDICAL
5	RESEARCH COUNCIL IN AUSTRALIA.
6	JUST A LITTLE MORE ON NIH. I HAD A
7	WONDERFUL MEETING, ELLEN FEIGAL, MYSELF, AND NANCY
8	KOCH, WITH MAHENDRA RAO, JOHN GALLEN AND OTHERS FROM
9	THE NIH. AND THE GOAL OF THIS MOU IS TO BRING NIH
10	AND CIRM TOGETHER. AND WE'RE STILL DIGESTING THE
11	MEETING, AND SO I HAVEN'T REALLY SUMMARIZED THIS,
12	BUT TO SAY THAT I'M TERRIBLY EXCITED. I THINK THIS
13	IS GOING TO BE A NEW DAWNING OF A RELATIONSHIP WITH
14	OUR FEDERAL FUNDING PARTNER. AND IT'S GOING TO BE
15	VERY IMPORTANT FOR US AND VERY IMPORTANT FOR
16	AMERICAN RESEARCH AND INDEED THE WORLD, I THINK,
17	THIS ARRANGEMENT.
18	SO AMONG THE AREAS THAT WE THINK ARE GOING
19	TO BE AREAS OF COLLABORATION ARE RARE AND NEGLECTED
20	DISEASES. THERE'S A VERY STRONG PORTFOLIO IN THE
21	CLINICAL CENTER AT NIH. EARLY TRANSLATIONAL BASIC
22	BIOLOGY, WE THINK THERE'S GOING TO BE A FOCUS ON
23	PARKINSON'S DISEASE. THAT'S A VERY OPPORTUNE
24	INTERACTION WITH NIH. I THINK SOME OF THE
25	CIRM-FUNDED DISEASE TEAM THERAPY DEVELOPMENT
	26

1	RESEARCHERS, THOSE THAT ARE IN, THAT ARE ACTUALLY IN
2	CONSIDERATION AT THE MOMENT, THEY'RE IN PLANNING, I
3	THINK THEY OUGHT TO THINK ABOUT THE POSSIBILITY OF
4	LINKAGES WITH NIH BECAUSE THE OPPORTUNITY WITH NIH
5	IS BOTH INTRAMURAL AND EXTRAMURAL, AND IT'S VERY
6	SIGNIFICANT. WE COULD HAVE SOME VERY SIGNIFICANT
7	FUNDING AND RESEARCH LINKAGES TO THOSE PLANNING
8	AWARDS.
9	SO WE'VE GIVEN NIH A LIST OF THOSE
10	RESEARCHERS WHO GOT THOSE PLANNING AWARDS, AND WE'RE
11	GOING TO ENCOURAGE OUR SCIENTISTS WHO HEAD THOSE TO
12	ALSO TALK TO NIH TO SEE IF THERE'S A LOGICAL
13	CONNECTION THERE AS WELL AS WITH SOME OF OUR OTHER
14	GLOBAL COLLABORATIVE FUNDING PARTNERS WHO HAVE
15	INDICATED THEY WANT TO BE PART OF THE DISEASE TEAM,
16	UPCOMING DISEASE TEAM PROGRAM.
17	SO WE'VE GOT ACCESS, WE WILL HAVE ACCESS
18	TO THE CLINICAL CENTER OUTSIDE AS WELL. SO THIS IS
19	A TREMENDOUS DEVELOPMENT. AND I THINK PHIL PIZZO
20	AND OTHERS WILL RECOGNIZE THIS AS SOMETHING THAT
21	WE'VE REALLY DESIRED FOR A LONG TIME. AND IT'S
22	TAKEN ME TWO AND A HALF YEARS, AND WE FINALLY GOT IT
23	DONE THANKS TO SOME EXTRA PRESSURE FROM ELLEN
24	FEIGAL, BUT ALSO MAHENDRA RAO, WHO WAS JUST RECENTLY
25	APPOINTED HEAD OF THE REGENERATIVE MEDICINE CENTER

1	AT NIH. SO GREAT. THERE'S A NEW DAWNING THERE, AND
2	I WILL GIVE YOU A MORE COMPLETE UPDATE WHEN WE
3	DISTILL ALL OF THE INFORMATION THAT WE COLLECTED AT
4	THAT MEETING.
5	WORKSHOP REPORT, THE CP WORKSHOP REPORT,
6	THIS IS ABOUT TO BE PUBLISHED. AND I THINK SOME OF
7	THE REAL INDICATORS OUT OF THAT YOU WILL BE
8	INTERESTED TO READ. I WANT TO THANK PARTICULARLY
9	TWO BOARD MEMBERS WHO STAYED THROUGH THAT WHOLE
10	MEETING, JON SHESTACK AND BERT LUBIN, AND
11	CONTRIBUTED SIGNIFICANTLY TO THE DISCUSSIONS AND
12	SCIENCE. SO THAT WAS REALLY GOOD.
13	SO IN THE OUTCOMES, WHICH IS REALLY WHERE
14	WE WANT TO SORT OF FOCUS THERE, WE WANT TO RAISE
15	AWARENESS OF CP AND REALLY WHAT WE'RE CALLING
16	NEUROLOGICAL DISORDERS OF CHILDHOOD BECAUSE WE
17	HAVEN'T GOT A LOT IN OUR PORTFOLIO. WE'VE BEEN
18	TRYING. WE'VE GOT AUTISM IN THERE, BUT IT'S JUST
19	STARTING. AND WE KNOW THIS IS A DIFFERENT AREA, BUT
20	IT'S ONE THAT IS REALLY, REALLY IMPORTANT AND WILL
21	HAVE A VERY BIG IMPACT BOTH ON THE PATIENTS, BUT IT
22	HAS A BIG IMPACT ECONOMICALLY IF WE CAN DO ANYTHING
23	FOR THESE KIDDIES.
24	SO WE WANT TO RAISE AWARENESS. WE WANT TO
25	ENCOURAGE THE STEM CELL COMMUNITY TO EXPAND ITS

1	STUDIES IN THESE AREAS IN NEURAL AND GLIAL
2	DEVELOPMENT AND THE EFFECTS OF INJURY AND TIMING OF
3	INJURIES THAT ARE OCCURRING IN THESE CHILDREN, OR IN
4	THESE OFTEN IT'S IN FETAL DEVELOPMENT, AND
5	EXPLORE FUNDING OPPORTUNITIES FOR BASIC AND CLINICAL
6	RESEARCH IN CEREBRAL PALSY AND RELATED DEVELOPMENTAL
7	DISORDERS IN HUMANS. SO WE'VE ACTUALLY INSERTED A
8	PRIORITY INTO OUR UPCOMING BASIC SCIENCE RFA, AND
9	WE'VE BEEN TO NOW THREE MEETINGS JUST LATELY ON
10	CEREBRAL PALSY AND AUTISM. THEY'RE SPEAKING AND
11	TELLING THEM THAT WE WANT THINGS TO BE ORGANIZED AND
12	EFFECTIVE.
13	SO WE RECOGNIZE IT'S UNDERSTUDIED REALLY
14	GLOBALLY. THESE AREAS ARE UNDERSTUDIED. THEY'RE
15	AMENDABLE, WE THINK, TO IN VITRO STUDIES USING HUMAN
16	STEM CELLS AND INDEED IPS CELLS, AND THEY'RE GOOD
17	CANDIDATES FOR CELL THERAPY IN THE BRAIN. ALL TO BE
18	PROVEN, BUT OPPORTUNISTIC.
19	SO MECHANISMS, WE WANT TO MOVE FORWARD
20	MECHANISMS IN ENDOGENOUS STEM CELLS IN ANIMAL MODELS
21	AND IN HUMAN MODELS, FOR EXAMPLE, CONDITIONS LIKE
22	CP.
23	SO WE'VE GOT TWO MAIN GOALS TO REALLY
24	DRIVE THE COLLABORATIVE NETWORK AND RAISE THE
25	INTEREST IN BASIC AND PRECLINICAL WORK, BUT ALSO

1	CLINICAL DEVELOPMENT. THERE ARE SOME CLINICAL
2	STUDIES OUT THERE. IT SEEMS DIFFICULT FOR ME TO
3	UNDERSTAND SOME OF THEM. FOR EXAMPLE, IF YOU
4	TREAT IF YOU TAKE CORD BLOOD CELLS FROM A BABY
5	AND GIVE IT BACK TO THE BABY, HOW DOES THAT WORK?
6	IT DOESN'T SOUND RIGHT. YOU JUST TOOK THE CELLS
7	WERE IN THE BABY IN THE CORD AND NOW YOU GIVE IT
8	BACK AND IT WORKS. BUT IF IT DOES, WE NEED TO
9	UNDERSTAND THE MECHANISM BETTER BECAUSE IF THAT DOES
10	DO SOMETHING, WELL, IT'S IMPORTANT TO FOLLOW IT ON
11	WITH UNDERSTANDING HOW IT CAN BENEFIT THE CHILDREN.
12	SO WE ARE GOING TO PRESS ON WITH THAT AND
13	TRY AND DO OUR BEST IN THAT AREA IN UPCOMING RFA'S
14	AND TO INCREASE INTEREST ACROSS CALIFORNIA AND IN
15	OUR COLLABORATIVE FUNDING PARTNERS IN BEING
16	INVOLVED.
17	WE JUST RETURNED FROM A CIRM IMMUNOLOGY
18	ROUNDTABLE WITH THE FDA. WE'VE BEEN WORKING WITH
19	THE FDA QUARTERLY AND FACE TO FACE WITH THE FDA. IT
20	WAS A GREAT MEETING. MOST OF THE CRITICAL PEOPLE AT
21	FDA WERE THERE. WE HAD A TERRIFIC GROUP OF PEOPLE,
22	LOT OF CALIFORNIANS, BUT ALSO PEOPLE FROM INTERSTATE
23	WHO WERE THERE, THIS ROUNDTABLE.
24	WE'RE LOOKING AT THE CHALLENGES OF WHAT
25	YOU'VE GOT TO DO IF YOU ARE INTRODUCING FOREIGN

1	CELLS, ALLOGENEIC CELLS, INTO A PATIENT. OUR IMMUNE
2	SYSTEM IS BUILT TO KEEP OUT FOREIGN DEVILS AND IT'S
3	VERY EFFECTIVE. SO IF YOU'RE GOING TO GIVE SOMEONE
4	A NEW CELL, YOU'VE GOT TO OVERCOME SOME MAJOR IMMUNE
5	BARRIERS AND WHAT ARE THE PROCESSES THERE. AND IT
6	SEEMS LIKE THERE'S A LOT OF WORK INDEPENDENTLY IN
7	ALL SORTS OF DIFFERENT DIRECTIONS. SO WE'RE GOING
8	TO TRY AND DRAW THIS TOGETHER A BIT, GET SOME
9	GENERIC APPROACHES OUT OF IT, AND THEN SORT OF LOOK
LO	AT EACH OF THE DISEASE AREAS TO SEE WHAT IS THE BEST
L1	PROCESS FOR HELPING THESE CELLS SURVIVE AND DO THEIR
L2	JOB, AN IMPORTANT PART, DO THEIR JOB FOR THE
L3	DISEASE.
L4	SO THIS IS AN AREA WHICH IS REALLY
L5	CRITICAL FOR US, AND FDA WERE VERY HELPFUL IN GIVING
L6	US THEIR THOUGHTS AS WELL. SO I THINK THAT WE'LL
L7	HAVE A WE HOPE TO PRODUCE A PAPER OUT OF THAT
L8	THAT WE'LL SEND TO ONE OF THE JOURNALS, PROBABLY THE
L9	STEM CELLS AND REGENERATIVE MEDICINE JOURNAL, THAT
20	WE'RE HELPING TO FUND AND SEE IF THEY WILL PUBLISH
21	SOMETHING ON THIS TO TRY AND DRAW SOME MORE INTEREST
22	IN THIS VERY IMPORTANT AREA.
23	YOU RECEIVED, I THINK, IN YOUR NOTES A
24	STATEMENT REGARDING CIRM'S CONSIDERATION OF THERAPY
25	DEVELOPMENT PROJECTS. SO THAT STATEMENT IS

1	MANAGEMENT'S STATEMENT ON BEHALF OF CIRM IN THIS
2	AREA. AND IT'S REALLY AIMED AT GIVING SOME
3	PERSPECTIVE TO A HISTORICALLY BALANCED OBLIGATION TO
4	PROVIDE INFORMATION TO THE PUBLIC WITH THE
5	RESPONSIBILITY ALSO TO PROTECT THE PROPRIETARY
6	INFORMATION FOR THE APPLICANTS. SO WE'RE TRYING TO
7	WALK IN THIS SORT OF NARROW SPACE OF DOING THE RIGHT
8	THING. WE'RE GIVING EVERYBODY AS MUCH INFORMATION
9	AS POSSIBLE, BUT ALSO, IMPORTANTLY, JUST PROTECTING
10	COMPANIES, THEIR INTELLECTUAL PROPERTY AND THEIR
11	REPUTATIONS.
12	SO ENGAGING INDUSTRY REQUIRES THAT CIRM
13	ASSURE THE COMPANIES WITH WHICH IT WORKS HAS THE
14	CAPACITY TO PROTECT THEIR COMPANY PROPRIETARY
15	INFORMATION AND THEIR ABILITY TO OBTAIN FOLLOW-ON
16	FINANCING. IT'S PARTICULARLY TRUE FOR COMPANIES
17	INVOLVED IN CLINICAL RESEARCH. IF WE DON'T DO THAT,
18	THEY WON'T COME AND APPLY TO US. SO WE'RE TRYING TO
19	WALK THAT VERY NARROW LINE, AND WE'RE TRYING TO DO
20	OUR BEST. AND THAT'S REALLY WHAT THE STATEMENT WAS
21	INTENDED TO REFLECT.
22	WE'RE WORKING, I'VE GOT NATALIE DEWITT NOW
23	WORKING BUSILY WITH RESEARCHERS THROUGHOUT
24	CALIFORNIA ON OUR ALPHA CLINICS PROPOSAL. IT'S TO
25	DEVELOP THE AIM OF THIS IS TO DEVELOP KNOWLEDGE

1	AND INFRASTRUCTURE FOR CELL THERAPIES AND CLINICAL
2	TRIALS AND BEYOND, LOOKING TO BUILD EXPERTISE OF
3	MEDICAL AND CLINICAL TRIALS STAFF, FACILITATE
4	REGULATORY COMPLIANCE, BUILD AN INFORMATIONAL
5	NETWORK, ESTABLISH STANDARDS FOR CELL HANDLING,
6	PATIENT CARE, AND ASSESSING OUTCOMES, TESTING
7	BUSINESS MODELS FOR BRINGING CELL THERAPIES TO THE
8	MARKETPLACE. WE WANT TO ENGAGE WITH CALIFORNIA. WE
9	WANT STEM CELL CLINICS STARTING TO BE OPERATIVE IN
10	CALIFORNIA, AND SO WE'RE MOVING IN THAT DIRECTION.
11	WE'RE ALSO BUSY ON A PAPER WHICH WILL
12	HOPEFULLY LINK GENOMICS WITH STEM CELLS. I'VE TOLD
13	YOU A NUMBER OF TIMES WHY I THINK THAT'S IMPORTANT,
14	BUT WE'VE GOT TO PROVIDE CALIFORNIAN SCIENCE AND
15	CLINICIANS ACCESS TO TECHNOLOGIES FOR ANALYZING STEM
16	CELL GENOMES THAT'S VERY CLEAR AND UNDERSTANDING THE
17	VARIABILITY OF THE STEM CELLS, INCLUDING HANDLING,
18	CHARACTERIZATION OF THOSE CELLS, DEVELOP NEW METHODS
19	FOR SINGLE-CELL GENOME SEQUENCING, AND QUANTITATIVE
20	ANALYSIS. IN FACT, IF YOU LOOK AT A POPULATION AND
21	YOU SEE WHICH GENES ARE BEING PRODUCED OBLITERATES
22	WHAT THE ACTUAL INDEPENDENT CELLS ARE DOING. YOU
23	MIGHT HAVE A NUMBER OF ROGUE CELLS IN THERE, AND WE
24	NEED TO KNOW WHAT THE POPULATION IS MADE UP OF.
25	STRATIFYING CANCER PATIENTS TO TARGET

1	THERAPIES IN THE RIGHT PATIENTS. SO THESE, WE
2	THINK, ARE IMPORTANT. WE'RE WORKING ON THAT. WE
3	WANT TO BRING THOSE TO YOU IN A SERIES OF WHITE
4	PAPERS ON THOSE TWO AREAS.
5	JUST TO QUICKLY FILL YOU IN ON ARM
6	COMMITTEE, THAT'S THE ALLIANCE FOR REGENERATIVE
7	MEDICINE, UPDATES. THEY VOTED A SLATE OF NOMINEES
8	FOR THEIR EXECUTIVE COMMITTEE. THE MEMBERSHIP HAS
9	GROWN WITH MORE THAN 85 MEMBERS. RECENT
10	DEVELOPMENTS: AN UPCOMING MEETING WITH FDA AND CBER
11	OFFICES OF CELL TISSUE AND GENE THERAPY WITH
12	DIRECTOR CELIA WITTEN TO DISCUSS CELL POTENCY
13	ASSAYS. THAT WAS A VERY SUCCESSFUL MEETING. ARM
14	HAS GOT NOW A LOT OF WORK BEING DONE IN CELL
15	POTENCY. THIS IS VERY IMPORTANT FOR FDA. THEY'RE
16	VERY ENGAGED WITH GETTING THIS INFORMATION.
17	THEY'VE HAD RECENT MEETINGS WITH
18	CONGRESSIONAL HEALTH LEADERSHIP TO ADVOCATE FOR
19	REGENERATIVE MEDICINE PROMOTION ACT. I'VE KEPT ART
20	AS INFORMED AS POSSIBLE ON THAT. THEY'RE STILL
21	WORKING THEIR WAY IN THAT AREA.
22	A BRIEFING FOR THE U.S. HOUSE OF
23	REPRESENTATIVE TRICAUCUS, THEY'RE ARRANGING THAT.
24	AND THE UPCOMING STEM CELL ON THE MESA MEETING,
25	WHICH WILL BE HELD IN CONJUNCTION WITH CIRM AND THE

1	SANFORD CONSORTIUM, HAS REALLY KIND OF SORT OF
2	LINKED TOGETHER THE INTERESTS OF ARM, OF THE
3	INDUSTRY COMPONENTS OF STEM CELL THERAPIES TOGETHER
4	WITH THE ACADEMIC ONES IN LA JOLLA IN LATE NOVEMBER,
5	EARLY DECEMBER.
6	WORLD STEM CELL SUMMIT, THINK JON SPOKE TO
7	YOU, SO I'M NOT GOING TO TAKE VERY LONG ABOUT THAT.
8	THERE WAS ABOUT 1,400 ATTENDEES FOR AT LEAST A
9	PORTION OF THE EVENT. SOME PEOPLE CAME AND WENT.
10	WE HAD A LOT OF PRESENTATIONS FROM CIRM. WE HOSTED
11	A RECEPTION FOR ADVOCATES. JON TOLD THE CIRM STORY
12	AND SHERRY LANSING RECEIVED, IN ABSENTIA, I THINK, A
13	LEADERSHIP AWARD FOR HER ROLE ON ICOC AND IN PATIENT
14	ADVOCACY. AND THE PROGRAM THEME WAS TRANSLATIONAL
15	SCIENCE. I RECOMMENDED STRONGLY THAT THEY DID THAT
16	AND THEY DID IT, AND IT WORKED PRETTY WELL.
17	THEY HAD EVENTS, LAB TOURS, PUBLIC
18	SYMPOSIA, AND EVEN AN ANIMAL FAIR. SORRY. WE'RE
19	MOVING ON TO STEM CELL AWARENESS DAY. SO THERE WERE
20	LAB TOURS, PUBLIC SYMPOSIUM, AND AN ANIMAL FAIR. I
21	DIDN'T REALIZE THAT. THERE WERE 30 EVENTS IN
22	CALIFORNIA. AND DAVIS INCLUDED TWO PONIES AND A DOG
23	TREATED WITH STEM CELLS. SO THERE YOU ARE. THAT
24	WAS THE ANIMAL FAIR. FIFTEEN IN OTHER STATES AND
25	SIX COUNTRIES. THEY'RE REACHING HIGH SCHOOL

1	STUDENTS, 60 CLASSROOMS HAD CIRM GRANTEES GUEST
2	LECTURES, AND I HAD A LOT OF INPUT FROM THOSE
3	LECTURERS. THEY SAID THEY REALLY, REALLY ENJOYED IT
4	AND THE STUDENTS AND TEACHERS DID AS WELL. MORE
5	THAN 15 CLASSES WERE BUSED TO CIRM-FUNDED LABS IN
6	GLADSTONE AND UC IRVINE.
7	AND CIRM PATIENT ADVOCACY DAYS ON OCTOBER
8	THE 26TH IN BAKERSFIELD. JON SPOKE ABOUT THAT.
9	OCTOBER 29 IN SANTA ROSA, AND, ART, YOU ARE GOING TO
10	GIVE THE KEYNOTE. SO WE'RE BUSY.
11	WE HAD THE BEST MEETING OF STEM CELLS IN
12	THE WORLD, THE GRANTEE MEETING IN SAN FRANCISCO, AND
13	IT WAS JUST FANTASTIC. WE LIMITED IT TO 400
14	CIRM-FUNDED INVESTIGATORS. THE HIGHLIGHTS ARE
15	SHOWCASING CIRM AND THE COLLABORATIVE FUNDING
16	PARTNERS, CUTTING-EDGE RESEARCH, BASIC AND
17	TRANSLATIONAL. THERE WERE SOME FANTASTIC LECTURES.
18	CRAIG VENTER WAS SUPERB, BUT ALSO LEE HOOD AND JOHN
19	WAGNER BROUGHT TEARS TO EVERYBODY'S EYES. HE'S JUST
20	SUPERB. IF YOU HAVEN'T SEEN JOHN WAGNER'S LECTURE,
21	GO ON OUR WEBSITE AND LOOK AT IT. IT'S JUST ONE OF
22	THOSE SUPERB LECTURES.
23	AND I HAD A LOT OF THE PEOPLE TELL ME THAT
24	THEY HEARD FOUR OF THE BEST LECTURES THAT THEY'VE
25	EVER HEARD EVER. THESE WERE SENIOR SCIENTISTS.

1	FOUR BEST LECTURES THAT THEY EVER HEARD AT THIS
2	MEETING. SO IT WAS A GREAT MEETING, A GREAT SCIENCE
3	MEETING. I THINK THE PEOPLE WHO WERE THERE FROM THE
4	BOARD ENJOYED IT. THERE WERE MEMBERS OF THE BOARD
5	THERE. AND IT IS JUST A SUPERB MEETING, AND IT
6	WORKED EXTREMELY WELL.
7	WE'RE HAVING A TISSUE ENGINEERING
8	WORKSHOP. IT'S SLATED FOR JANUARY 12TH TO THE 13TH.
9	THE GOAL IS TO EDUCATE ICOC MEMBERS AND OUR CIRM
10	STAFF ON OPPORTUNITIES FOR STEM CELLS IN TISSUE
11	ENGINEERING. SO A SERIES OF SCIENTIFIC TALKS AND
12	MODERATED GROUP DISCUSSION. THEY'VE GOT A GREAT
13	PANEL OF PEOPLE TALKING FROM AROUND THE WORLD. IT'S
14	REALLY GOING TO BE A BUZZ. THIS IS GOING TO BE A
15	GREAT WORKSHOP.
16	INTERNATIONALLY RENOWN LEADERS ARE ALL
17	COMING. I THINK VERY FEW PEOPLE TURNED DOWN OUR
18	INVITATION. WE'VE GOT THE BEST PEOPLE IN THE WORLD
19	IN TISSUE ENGINEERING COMING TO TALK AT THIS
20	WORKSHOP. IT'S GOING TO BE GREAT. SO IT'S HELD
21	UNDER COLD SPRING HARBOR RULES, AS WE USUALLY DO SO
22	THAT THE SPEAKERS CAN SPEAK IN A FREE FASHION.
23	NEW APPOINTMENTS IN CIRM. I WANT TO
24	INTRODUCE CANDACE BAGLEY. THERE'S CANDACE. I'VE
25	INTRODUCED HER TO SOME OF YOU ALREADY. SHE'S MY NEW

1	SENIOR EXECUTIVE ASSISTANT, AND SHE'S WONDERFUL.
2	AND NOW I'M GETTING ORGANIZED AGAIN. IT'S BEEN
3	ABOUT TWO OR THREE MONTHS WHERE I'VE BEEN IN THE
4	WILDERNESS SINCE PAT BECKER LEFT. I'VE HAD SOME
5	HELP, AND THANKS VERY MUCH TO ALEX CAMPE FOR
6	STEPPING IN IN THE LAST MINUTE TO SORT OF BAIL ME
7	OUT, BUT IT HASN'T BEEN EASY. I'VE DUPLICATED
8	MEETINGS, AND I'VE DONE ALL THE WRONG THINGS WHEN
9	YOU DON'T HAVE A REALLY GOOD ASSISTANT. SO I'M VERY
10	THANKFUL SHE'S THERE.
11	MELANIE MILLER HAS JOINED ELONA TO HELP
12	WITH HER WORK. ANKA URBAHN IS HERE. SAY HELLO TO
13	ANKA IN THE HALLWAY WHEN YOU SEE HER. SO SHE'S
14	PROGRAM MANAGER AND WORKING CLOSING WITH ELLEN
15	FEIGAL. KIM WILLIAMS WHO'S HELPING PAT OLSON AND
16	MICHAEL YAFFE AS ADMINISTRATION ASSISTANT THERE HAVE
17	ALL JOINED US. AND NOW WE'RE GOING TO BE MUCH MORE
18	EFFECTIVE BECAUSE WE'VE GOT THESE FANTASTIC PEOPLE
19	HELPING US OUT.
20	THIS IS A LITTLE BIT DIFFERENT NOW BECAUSE
21	THERE'S BEEN PEOPLE COMING AND GOING JUST RECENTLY.
22	SO THIS IS THE BEST TEAM IN THE WORLD IN STEM CELLS.
23	THIS IS THE BEST TEAM BY FAR IN THE WORLD. THIS IS
24	A GREAT TEAM. AND I HOPE YOU BEGIN TO MEET THEM
25	ALL. THEY'RE JUST WONDERFUL PEOPLE, AND THEY'RE SO

1	EFFECTIVE. THEY WORK SO HARD. AND IT DOESN'T
2	MATTER WHAT TIME OF DAY OR NIGHT. I ASK FOR SOME
3	HELP, THEY GIVE IT TO US.
4	NOW I WANT TO INVITE CHILA FORWARD TO GIVE
5	YOU AN UPDATE ON THE BUDGET.
6	CHAIRMAN THOMAS: DR. TROUNSON, WE HAVE A
7	QUESTION FROM SENATOR TORRES.
8	MR. TORRES: I WANT TO THANK YOU AND THE
9	STAFF FOR PUTTING ON THIS GRANTEE MEETING. IT WAS
10	VERY IMPRESSIVE, AND IT WAS SO WELL ORGANIZED. AND
11	YOU WOULD WALK THROUGH THERE, AND GETTING THE
12	FEEDBACK FROM THE GRANTEES WAS SO EXHILARATING
13	BECAUSE OF THE FACT THEY FELT SO COMFORTABLE. THEY
14	FELT THEY HAD ACCESS. AND EVEN THE VENDORS THAT
15	WERE THERE WERE VERY IMPORTANT AND ACCESSIBLE.
16	I WAS ALSO AT THE CEREBRAL PALSY WORKSHOP,
17	AND I WANT TO THANK AGAIN THE STAFF THAT PUT THAT
18	TOGETHER. I THOUGHT IT WAS TERRIFICALLY DONE. THE
19	SPEAKERS WERE EXCELLENT. AND I JUST CAN'T SAY
20	ENOUGH, AGAIN, ABOUT THE GRANTEE MEETING.
21	MR. SHESTACK: THANK YOU. I WANT TO ASK
22	YOU. YOU SAID THAT, IF I HEARD YOU RIGHT, YOU HAVE
23	SCIENTIFIC STAFF ATTENDING VARIOUS MEETINGS TO
24	PROMOTE THE CP AND AUTISM INTEREST. WHICH MEETINGS?
25	DR. TROUNSON: I'VE BEEN TO ONE, I THINK
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1	THE CHAIR WASN'T THAT HAPPY WITH ME, BUT I HAD GIVEN
2	A COMMITMENT TO THE CP WORKSHOP IN SAN FRANCISCO
3	THAT HAPPENED JUST AT THE DAY BEFORE, THE DAY OF THE
4	IOM MEETING. SO I KEPT THAT APPOINTMENT WITH THEM
5	AND IT WAS IMPORTANT. MANI VESSAL AND I SPOKE AT
6	THAT MEETING. AND I'M GOING TO ONE IN NOVEMBER.
7	AND THE THIRD ONE, I'LL HAVE TO DIG BACK IN MY
8	DIARY, BUT I'M GOING TO AS MANY AND GETTING PEOPLE
9	TO GO TO AS MANY AS WE CAN JUST TO TELL PEOPLE THAT
10	WE'RE REALLY INTERESTED BROADLY IN THIS AREA
11	BECAUSE, AS YOU HEARD, I THINK THERE IS
12	OPPORTUNITIES HERE THAT WE'RE NOT SORT OF PICKING
13	UP. A LITTLE BIT OF CONFUSION ABOUT WHETHER WE'RE
14	INTERESTED IN THIS AREA OR WE'RE ONLY EMBRYONIC STEM
15	CELL INTEREST.
16	SO I WANT TO GET THE MESSAGE OUT THERE
17	PROPERLY, THAT WE'RE ENGAGED, WE'D LIKE TO HEAR SOME
18	REALLY GOOD SCIENCE COMING FORWARD, AND WE MADE IT A
19	PRIORITY IN OUR WORK GOING FORWARD.
20	MR. SHESTACK: AND YOU ALSO MENTIONED
21	COLLABORATION WITH OUR FUNDING PARTNERS. WHAT IS
22	THE MECHANISM? FOR INSTANCE, THERE WERE A LOT OF
23	GREAT PEOPLE AT THAT MEETING, AND VERY FEW OF THEM
24	FROM CALIFORNIA, BUT THEY MIGHT FUND A LOT OF PEOPLE
25	WHO WOULD LOVE TO COLLABORATE WITH THEM IN

1	CALIFORNIA. WHAT IS THE MECHANISM FOR, SAY, THE
2	BASIC BIOLOGY GRANT IV, WHICH IS, I GUESS, WHERE
3	YOU'RE PUTTING THIS OUT FOR SOMETHING TO HAPPEN IN
4	PARTNERSHIP WITH SOMEBODY?
5	DR. TROUNSON: AT THE SUMMIT IN SAN
6	FRANCISCO, WE HAD A LOT OF PEOPLE FROM UCSF WHERE
7	THERE'S A LOT OF INTEREST THERE, AND WE HAD SOME
8	PEOPLE FROM SOUTHERN CALIFORNIA AS WELL. AND SO
9	THEY WERE VERY KEEN TO PARTICIPATE, LINK IN, USE ALL
10	SORTS OF MODELS. AND WHERE IT'S POSSIBLE, WHERE WE
11	DON'T HAVE AN AGREEMENT, FOR EXAMPLE, WITH SOMEBODY
12	IN ANOTHER STATE WHERE WE DON'T HAVE AN AGREEMENT,
13	WE'VE SUGGESTED THERE'S SOME BOLT-ON OPPORTUNITIES
14	TO HELP THEM. THAT MEANS IF THEY CAN FIND SOME
15	FUNDING AND IF WE CAN GET A PROJECT UP, THEY CAN
16	BOLT ON AND BECOME PART OF IT.
17	SO WE'RE SORT OF BEING MORE FLEXIBLE WITH
18	OUR FINANCIAL ARRANGEMENTS. IT'S RELATIVELY
19	STRAIGHTFORWARD IF WE'VE GOT AN AGREEMENT WITH
20	SOMEONE, BUT IT'S NOT NECESSARILY THE OTHER WAY
21	AROUND. BUT I HAVE TO SAY ALSO NIH IS VERY
22	INTERESTED IN THIS AREA, JON, AND THEY WANT TO ALSO
23	PARTICIPATE WITH US. THAT MIGHT ADD ANOTHER
24	ACCELERANT, IF YOU LIKE, TO THE FLAME OF GETTING
25	MORE STUDIES IN THIS AREA, MORE DEEPER SCIENCE.
	F1

1	MR. SHESTACK: WHICH INSTITUTE IS THAT?
2	DR. TROUNSON: IT WILL BE ACROSS ALL OF
3	THEM, BUT IT WOULD BE THE NEURAL INSTITUTE. WE'RE
4	CERTAINLY GOING TO HAVE ONE ON PARKINSON'S DISEASE,
5	BUT WE PUT FORWARD ONE WHICH WE SHOULD DO IN THE
6	AREA OF THE JUVENILE NEUROPATHIES. SO, YES, THEY
7	WERE VERY INTERESTED TO HEAR ABOUT THAT AS WELL.
8	SO IT'S NOT AN OVERDONE AREA UNFORTUNATELY
9	THROUGHOUT THE WORLD. I WAS SURPRISED. BUT I THINK
10	WITH A BIT MORE OF OUR COLLABORATIVE FUNDING PARTNER
11	INTEREST, WE MIGHT BE ABLE TO INJECT A LOT MORE IN.
12	THE AUSTRALIANS THROUGH THEIR INTERESTS HAVE BEEN
13	VERY ACTIVE, AND THEY'RE TALKING TO THE SCIENTISTS
14	IN AUSTRALIA. THAT'S WHY I THOUGHT I WOULD DROP IN
15	ON THEIR CP WORKSHOP WHEN I GO AT THE END OF THIS
16	MONTH AND SEE IF I CAN GET THOSE SCIENTISTS TO SORT
17	OF BE INTERESTED IN LINKING UP WITH US AS WELL AS
18	PUSHING MORE ON THEIR NH&MRC.
19	SO WE'RE TAKING A MUCH MORE PROACTIVE
20	ROLE, IF YOU LIKE, OR I AM AND THE STAFF WILL
21	FOLLOW. HOPEFULLY WE'LL GET BETTER AND STRONGER
22	APPLICATIONS COME WITH US AND GET INTO A DEEPER,
23	MORE MEANINGFUL RESEARCH PROGRAM RIGHT ACROSS THAT
24	SPACE.
25	DR. LUBIN: THAT WAS A GREAT PRESENTATION,
	E2

1	ALAN. I WOULD RECOMMEND THAT IN TERMS OF YOUR NIH
2	INTERACTIONS, YOU ALSO CONSIDER INTERACTING WITH A
3	GROUP THAT'S STUDYING BONE MARROW TRANSPLANT AND
4	TRANSPLANT REJECTION IN TERMS OF IMMUNOLOGY, AS WELL
5	AS NIDDK IS DOING A LOT OF WORK ON IMMUNE
6	RECOGNITION, SO WE DON'T DUPLICATE THINGS, BUT TAKE
7	ADVANTAGE OF WHAT'S BEEN DONE AND MAYBE COLLABORATE.
8	DR. TROUNSON: GOOD ADVICE, BERT. WE
9	DIDN'T EXPLORE THAT, BUT WE SHALL. THANK YOU. ANY
LO	IDEAS PARTICULARLY COME FOR OUR ESTEEMED SCIENCE
L1	MEMBERSHIP TO LET US KNOW IF THERE ARE AREAS WHERE
L2	YOU THINK WE SHOULD APPROACH THEM BECAUSE IT'S ON
L3	THE BASIS OF US GETTING THEM INTERESTED. THEY SEEM
L4	TO BE VERY INTERESTED IN A NUMBER OF AREAS, VERY,
L5	VERY INTERESTED. SO I LIKE THE THOUGHTS OF US BEING
L6	ABLE TO ACCESS SOME OF THEIR ORPHAN DISEASE CAPACITY
L7	IN THEIR CLINICAL CENTER. IT'S A SUPERB CENTER FOR
L8	THAT KIND OF WORK.
L9	CHAIRMAN THOMAS: ALAN, I'D JUST LIKE TO
20	ADD OBVIOUSLY THERE'S A LOT OF VERY INTERESTING
21	STUFF GOING ON RIGHT NOW. THANK YOU FOR THAT
22	REPORT. WE'RE DELIGHTED TO HAVE SCOTLAND ON BOARD.
23	LIKE TO PARTICULARLY CONGRATULATE YOU ON THE NIH
24	AGREEMENT, WHICH I KNOW HAS TAKEN A LONG TIME AND I
25	THINK WILL BEAR GREAT FRUIT GOING FORWARD. SO

1	CONGRATULATIONS ON THAT.
2	DR. TROUNSON: THANK YOU.
3	CHAIRMAN THOMAS: ALAN, THAT GOES TO YOU
4	AS WELL AND EVERYBODY WHO IS INVOLVED IN THAT. IT'S
5	A REAL FEAT OF GREAT MOMENT. THANK YOU.
6	MS. SILVA-MARTIN: GOOD MORNING, MR.
7	CHAIRMAN, MEMBERS OF THE BOARD. I WILL BE REPORTING
8	ON THE FINAL EXPENDITURES FOR THE 2010-11 FISCAL
9	YEAR.
10	AS YOU MAY RECALL, AT THE LAST BOARD
11	MEETING I DID PROVIDE A PRELIMINARY REPORT, BUT THAT
12	REPORT DID NOT INCLUDE ANY OF OUR LAGS OR ACCRUALS.
13	SO THE INFORMATION THAT I'M PRESENTING TODAY DOES
14	INCLUDE THAT INFORMATION.
15	BEFORE I COVER THE INFORMATION THAT'S ON
16	THE GRAPH, I WANT TO BRIEFLY EXPLAIN WHAT EACH OF
17	THE BARS REPRESENTS. THE BLUE BAR REPRESENTS THE
18	BUDGET ALLOCATION THAT WAS APPROVED BY THE ICOC
19	BOARD. THE ORANGE BAR REPRESENTS THE ACTUAL
20	EXPENDITURES FOR THE 2010-11 FISCAL YEAR. AND THE
21	GREEN BAR REPRESENTS THE BALANCE OR THE UNSPENT
22	AMOUNT.
23	SO GOING OVER THE DATA THAT'S IN THE FIRST
24	GROUPING OF BARS, THIS REPRESENTS OUR SALARIES AND
25	WAGES AND ASSOCIATED BENEFITS. IN THAT CATEGORY WE

1	WERE ALLOCATED A BUDGET OF \$8,848,000, OF WHICH WE
2	SPENT \$8,043,000 OR 91 PERCENT. SO THE UNSPENT
3	AMOUNT OR THE BALANCE WAS \$804,000 OR 9 PERCENT OF
4	THAT BUDGET.
5	MOVING ON TO THE SECOND GRAPH, SECOND SET
6	OF BARS, WHICH REPRESENTS OUR OPERATING
7	EXPENDITURES, IN THIS CATEGORY WE CAPTURE ALL OF OUR
8	OTHER COSTS. WE CAPTURE THE MEETING COST LIKE FOR
9	THE ICOC BOARD MEETING, THE STANDARD AND GRANTS
10	WORKING GROUP MEETINGS, THE SCIENTIFIC MEETINGS,
11	TRAVEL, TRAINING, OFFICE SUPPLIES, OUR INFORMATION
12	TECHNOLOGY COSTS, AND ALL OTHER CONSULTANT COST.
13	IN THIS CATEGORY WE SPENT \$6,948,000 OF
14	THE \$7,171,000 THAT WAS ALLOCATED. SO WE ACTUALLY
15	SPENT 97 PERCENT OF THE BUDGET, LEAVING AN UNSPENT
16	AMOUNT OF \$222,000 OR 3 PERCENT.
17	SO OVERALL, WE HAD A BUDGET OF
18	\$16,019,000. WE SPENT \$14,993,000, AND WE HAD A
19	BALANCE OF \$1,026,000 OR 6 PERCENT. SO WE SPENT 94
20	PERCENT OF OUR BUDGET.
21	IN YOUR BINDERS YOU WILL SEE THIS CHART
22	THAT ACTUALLY PROVIDES MORE DETAILED INFORMATION
23	ABOUT OUR OPERATING EXPENDITURES. I'M OPEN TO ANY
24	QUESTIONS THAT YOU MAY HAVE REGARDING EITHER THE
25	INFORMATION ON THE CHART OR IN THE GRAPH, BUT THAT

1	BASICALLY CONCLUDES MY PRESENTATION IN TERMS OF OUR
2	OVERALL EXPENDITURES.
3	MR. GOLDBERG: THANK YOU, CHILA, AND
4	CONGRATULATIONS TO THE STAFF FOR BEING ABLE TO
5	MANAGE THE INSTITUTE WITHIN ITS DESIGNATED BUDGET
6	AND EVERYTHING ELSE. IT'S EXTRAORDINARY TO BE ABLE
7	TO DO THAT ON A CONSISTENT BASIS. IT'S MUCH
8	APPRECIATED.
9	THE ONE AREA, CHILA, WHICH KIND OF JUMPS
10	OFF THE PAGE AS BEING PROBLEMATIC IS INFORMATION
11	TECHNOLOGY. COULD YOU COMMENT ON WHY WE'VE BEEN SO
12	OFF IN OUR FORECASTING THERE?
13	MS. SILVA-MARTIN: ACTUALLY WE'RE TRULY
14	NOT OFF ON OUR FORECASTING, AND I'M GOING TO EXPLAIN
15	WHY THAT LOOKS SO HIGH. IN THAT AREA WE WERE
16	BUDGETED THE \$1,249,000, AND WE SPENT \$1,853,000,
17	BUT THE MAJORITY OF THAT OVEREXPENDITURE IS FOR
18	MULTIYEAR CONTRACTS. WE HAD TWO CONTRACTS THAT WE
19	AMENDED DURING THE '10-'11 FISCAL YEAR THAT COVERED
20	EXPENDITURES INTO THE '11-'12 FISCAL YEAR.
21	SO THE CONTRACT FOR OUR INFORMATION
22	TECHNOLOGY ADVISOR WAS AMENDED TO COVER EXPENDITURES
23	FOR THE '11-'12 FISCAL YEAR IN THE AMOUNT OF
24	\$236,000. AND THAT FULL AMOUNT WAS ENCUMBERED
25	AGAINST THE '10-'11 FISCAL YEAR.
	E.C.

1	SIMILARLY, WE HAD A CONTRACT WITH
2	PROGRAMMERS THAT WE AMENDED DURING THE '10-'11
3	FISCAL YEAR THAT WAS ALSO TO EXTEND INTO THE '11-'12
4	FISCAL YEAR, AND THAT AMOUNT WAS \$268,000. SO WHEN
5	YOU FACTOR IN THE FACT THAT WE HAVE ABOUT \$500,000
6	WORTH OF '11-'12 SERVICES THAT WILL BE COVERED OUT
7	OF THE '10-'11 FISCAL YEAR, THAT ACCOUNTS FOR THE
8	OVERAGE.
9	THE OTHER THING THAT WE DID IN INFORMATION
10	TECHNOLOGY WAS WE DID SOME HARDWARE INFRASTRUCTURE.
11	WE HAD OUR BACKUP SYSTEMS WAS FAILING. WE HAD
12	ROUTERS SWITCHES THAT WERE UNABLE TO MEET OUR
13	NEEDS. ADDITIONALLY, WE HAD SERVERS THAT NEEDED
14	MORE RAM. AND SO WE SPENT ABOUT \$71,000 FIXING
15	THAT, ADDRESSING THOSE AREAS. AND THEN WE ALSO
16	SPENT ABOUT \$35,000 CONDUCTING A SECURITY AUDIT ON
17	OUR SYSTEM.
18	DR. PIZZO: I'VE GOT A FOLLOW-THROUGH FOR
19	THAT. ARE YOU HAVING TO ALSO PURCHASE LICENSING FOR
20	DIGITAL SCIENCE INFORMATION ACCESS AS WELL?
21	MS. SILVA-MARTIN: I DON'T KNOW WHETHER
22	WE'VE DONE MUCH OF THAT. I'D HAVE TO LOOK INTO IT
23	AND GET BACK TO YOU ON THAT.
24	DR. PIZZO: FOR EXAMPLE, HOW DOES ALAN
25	ACCESS THE LITERATURE? DO YOU HAVE A WAY OF DOING
	E 7

1	THAT?
2	DR. TROUNSON: GOOD QUESTION. SO I'M
3	EMERITUS PROFESSOR AT MONASH UNIVERSITY, SO I HAVE
4	THOSE RIGHTS MYSELF. THAT DOESN'T REALLY HELP
5	EVERYBODY ELSE. AND THE PROBLEM IS THAT IT'S A HUGE
6	COST. AND I TALKED TO SAM HAWGOOD AND OTHERS, AND
7	IT WAS JUST VERY DIFFICULT TO SEE HOW WE COULD DO IT
8	IN A COMPLEMENTARY WAY THROUGH THE INSTITUTION.
9	WE KIND OF GOT STUCK WITH PEOPLE HAVING
10	ACCESS PROVIDING THE MATERIALS TO ONE ANOTHER, PHIL.
11	SO IT'S NOT AN IDEAL SYSTEM.
12	DR. PIZZO: THE REASON I ASKED IS BECAUSE
13	I DIDN'T KNOW WHETHER THAT WAS PLAYING A ROLE IN THE
14	COST BECAUSE THE COSTS ARE EGREGIOUS AT THIS POINT
15	IN TIME WITH THE RATE GOING UP FOR ANY OF OUR
16	ELECTRONIC LIBRARIES. WE COULD TALK OFFLINE. THERE
17	ARE SOME THINGS THAT ARE BEING EXPLORED NOW THAT MAY
18	BE HELPFUL THAT WEREN'T AVAILABLE EARLIER.
19	DR. TROUNSON: THAT WOULD BE TERRIFIC.
20	I'D LIKE TO DO THAT. OTHERWISE I'M ENCOURAGING ALL
21	THE UNIVERSITIES TO MAKE EMERITUS PROFESSORS OF ALL
22	OUR STAFF, WHICH IS NOT THAT EASY TO DO.
23	DR. PIZZO: JUST FOR ONE VENDOR, JUST FOR
24	THOSE AT ACADEMIC CENTERS, FOR ONE VENDOR ALONE, THE
25	COST THAT WE FACED IN AN EIGHT-YEAR PERIOD HAVE GONE

1	UP 125 TIMES, 125 TIMES.
2	DR. LUBIN: SO THE OTHER THING. I AGREE
3	WITH WHAT PHIL JUST SAID, BUT I THINK THAT EVERYBODY
4	IS LOOKING AT A NEW I.T. BUDGET BECAUSE OF
5	TECHNOLOGY SHARING AND BECAUSE OF THE IMPORTANCE OF
6	THIS. AS WE GO GLOBALLY IN ALL OF OUR NETWORKING, I
7	THINK IT'S TIME TO YOU HAVE ALL THESE CONSULTANTS
8	TO TAKE A LOOK AT WHERE WE ARE NOW AND WHERE WE NEED
9	TO GO SO THAT WE'RE NOT BEHIND THE BALL.
10	FOR THOSE OF YOU, JUST GENERAL
11	INFORMATION, WE DON'T HAVE ELECTRONIC MEDICAL
12	RECORDS. WE'RE LOOKING AT INSTALLING THAT. IT'S
13	\$128 MILLION OVER FIVE YEARS TO HAVE AN ELECTRONIC
14	MEDICAL RECORD SYSTEM PUT IN A HOSPITAL. THAT'S
15	OUTRAGEOUS, BUT THAT'S WHAT IT IS. SO I THINK
16	THAT I'M NOT SAYING YOU NEED ELECTRONIC MEDICAL
17	RECORDS, THANK GOD, BUT I DO THINK YOU SHOULD TAKE A
18	LOOK AT THIS I.T. BUDGET IN A MORE REALISTIC WAY
19	ABOUT HOW THINGS ARE NOW AND DATABASES AND GENOMICS
20	AND INFORMATICS. THAT'S IMPORTANT FOR CIRM TO HAVE
21	A GOOD HANDLE ON WHAT THE FUTURE MIGHT BE.
22	MS. SILVA-MARTIN: THANK YOU.
23	CHAIRMAN THOMAS: THANK YOU, CHILA.
24	MOVING ON TO ITEM NO. 6, JUST TO SET THE
25	CONTEXT HERE, AS YOU RECALL, WE HAD A STRATEGIC PLAN

1	DEVELOPED FOR CIRM IN 2006. WE HAD CONSIDERABLE
2	DISCUSSIONS IN 2009 WITH MANY SUGGESTIONS MADE AS TO
3	ADVANCING THE PLAN AT THAT POINT. AND IT IS OUR
4	RESPONSIBILITY PERIODICALLY, WHICH IS EVERY THREE
5	YEARS OR SO, TO REVISIT OUR STRATEGIC PLAN AND
6	UPDATE IT IN LIGHT OF WHERE WE'VE COME, WHERE THE
7	TECHNOLOGY IS, WHERE WE'D LIKE TO GO, ETC.
8	IT WAS ABOUT TIME IN GENERAL TO BEGIN
9	UNDERTAKING A STRATEGIC PLAN REVISION FOR 2012.
10	THAT PROCESS WAS MOVED ALONG AS WE ENTERED INTO OUR
11	RELATIONSHIP WITH THE IOM, AND IT WAS OUR SENSE THAT
12	WE WANTED TO HAVE A 2012 STRATEGIC PLAN DONE FOR
13	THEM TO INCLUDE AS PART OF THEIR EVALUATION OF WHAT
14	CIRM IS DOING.
15	SO TOWARDS THAT END, WE HAVE BEGUN THAT
16	PROCESS WITH AN EYE TOWARDS COMPLETION ROUGHLY MARCH
17	OF NEXT YEAR. THERE'S BEEN A LOT OF WORK THAT HAS
18	GONE INTO THE DEVELOPMENT OF THIS STRATEGIC PLAN
19	AMENDMENT WHICH WILL NOW FORM THE BASIS OF
20	DISCUSSION TO BE LED BY DR. FEIGAL.
21	DR. FEIGAL: OKAY. THANK YOU VERY MUCH.
22	I PROVIDED A PREREAD WHICH IS IN YOUR BINDER THAT
23	WAS POSTED ALSO PUBLICLY. SO I'M GOING TO ASSUME
24	THAT YOU ALL HAD THE OPPORTUNITY TO READ IT. IT'S
25	NOT A DATA DENSE DOCUMENT, SO HOPEFULLY YOU WERE

1	ABLE TO REVIEW IT IN ADVANCE AND THINK ABOUT IT.
2	IT'S REALLY SETTING UP THE FRAMEWORK FOR HOW WE CAN
3	GO FORWARD WITH THINKING ABOUT HOW TO INFORM THE
4	REVISING OF THE STRATEGIC PLAN.
5	SO LET ME JUST SET THE STAGE IN TERMS OF
6	THE CONTEXT AND THE OBJECTIVES FOR THE SESSION HERE
7	WITH YOU TODAY. JUST A VERY BRIEF BACKGROUND,
8	BECAUSE YOU'RE ALL VERY FAMILIAR WITH THIS, IS THAT
9	CIRM ADOPTED A STRATEGIC PLAN BACK AT NEAR ITS BIRTH
10	BACK IN 2006. IT WAS UPDATED IN 2009-2010. AND
11	SINCE THAT TIME, WE'VE BEEN REVIEWED, WE'VE RECEIVED
12	RECOMMENDATIONS FROM AN EXTERNAL REVIEW PANEL IN
13	LATE 2010, AND THESE RECOMMENDATIONS PLUS THE OTHER
14	TYPES OF SHIFTS IN THE STEM CELL FIELD THAT WE NEED
15	TO CONSIDER, THE ICOC DISCUSSIONS WHICH WE'RE HAVING
16	ONE OF THOSE DISCUSSIONS TODAY, YOU HAD A PREVIEW
17	BACK AT THE AUGUST 25TH BOARD MEETING, AND
18	STAKEHOLDER INPUT.
19	SO WE'RE HOLDING A SERIES OF MEETINGS WITH
20	VARIOUS STAKEHOLDERS, INCLUDING THE PATIENTS,
21	PATIENT ADVOCACY ORGANIZATIONS, RESEARCHERS,
22	INDUSTRY, OTHER MEMBERS OF THE PUBLIC. ALL OF THIS
23	WILL HELP INFORM THE 2012 UPDATE THROUGH THE ICOC
24	CONSIDERATION IN MARCH OF 2012.
25	SO WHAT WE'RE HERE TODAY FOR IS REALLY TO

1	ENGAGE IN A COLLABORATIVE, IN A CONSULTATIVE, AND IN
2	AN INCLUSIVE DISCUSSION THAT IS REALLY INTENDED TO
3	DRAW OUT A RANGE OF ICOC VIEWPOINTS AND APPROACHES.
4	THE MEMBERSHIP OF THIS BOARD IS DIVERSE. WE HAVE
5	PATIENTS, WE HAVE PEOPLE FROM PATIENT ADVOCACY
6	ORGANIZATIONS, WE HAVE RESEARCHERS, WE HAVE
7	PHYSICIANS, WE HAVE PEOPLE FROM THE COMMERCIAL LIFE
8	SCIENCES, SO WE HAVE A RANGE OF DIFFERENT
9	DISCIPLINES AND PERSPECTIVES, AND WE WANT YOU ALL TO
10	PARTICIPATE.
11	SO THE POINT TODAY IS NOT TO ARRIVE AT A
12	CONSENSUS. THE POINT TODAY IS ACTUALLY TO DRAW OUT
13	THE VARIETY OF PERSPECTIVES, POTENTIAL APPROACHES
14	THAT COULD HELP INFORM THIS 2012 PLAN. IN THE
15	PURSUIT OF DOING THAT, I DO JUST WANT TO MENTION,
16	AND I WILL INTRODUCE THEM LATER, TO HELP FACILITATE
17	THE DISCUSSION, WE'RE GOING TO HAVE MEMBERS FROM THE
18	CAMPBELL ALLIANCE GROUP, WHICH IS A LIFE SCIENCES
19	CONSULTING GROUP, HELP MODERATE THE DISCUSSION
20	BECAUSE, AS CIRM STAFF, WE REALLY WANT TO LISTEN TO
21	WHAT THE ISSUES ARE AND TO LISTEN TO WHAT THE ICOC
22	PERSPECTIVES ARE.
23	SO WE WANT TO HEAR THE RANGE OF VIEWPOINTS
24	AND APPROACHES, AND WE'RE STILL EARLY IN THE PROCESS
25	OF REVISING THE STRATEGIC PLAN. AND WHAT WE'D LIKE

1	TODAY IS A FOCUS REALLY ON THE STRATEGIC OBJECTIVES
2	AND THE STRATEGIES. THIS IS JUST ONE OF SEVERAL
3	DISCUSSIONS THAT WE'LL HOLD WITH YOU AS THE
4	STRATEGIC PLAN EVOLVES AND AS WE GATHER INPUTS FROM
5	VARIOUS STAKEHOLDERS, AS I MENTIONED, FROM PATIENTS,
6	PATIENT ADVOCACY ORGANIZATIONS, RESEARCHERS, MEMBERS
7	OF INDUSTRY, AND OTHER MEMBERS OF THE PUBLIC.
8	WE ACTUALLY HELD ONE OF OUR FIRST PUBLIC
9	MEETINGS YESTERDAY IN LOS ANGELES. WE HAVE ANOTHER
10	PUBLIC MEETING SCHEDULED FOR OCTOBER 31ST IN SAN
11	FRANCISCO. WE HAVE MEETINGS PLANNED WITH INDUSTRY,
12	AND WE HAVE CONVERSATIONS THAT WE'VE ALREADY HELD,
13	SOME PRELIMINARY ONES, WITH RESEARCH STEM CELL
14	LEADERS AROUND THE TIME OF THE GRANTEE MEETING.
15	WE'VE HELD INTERNAL DISCUSSIONS WITH OUR MANAGEMENT
16	TEAM AND WITH OUR SCIENTIFIC TEAM. SO WE'RE
17	GATHERING INPUTS FROM THEM, FROM THE PUBLIC, FROM
18	PROFESSIONAL SOCIETIES THAT WE WORK WITH, AND OTHER
19	TYPES OF ORGANIZATIONS TO TRY AND BE AS INCLUSIVE AS
20	WE CAN IN TRYING TO INFORM THIS 2012 PLAN.
21	SO JUST A COMMENT, IF I COULD, IN TERMS OF
22	FRAMING THE VISION OF WHERE IT IS WE WANT TO GO
23	TODAY. AND THE POINT REALLY HERE IS TO SUPPORT AND
24	ADVANCE STEM CELL RESEARCH AND REGENERATIVE
25	MEDICINE, AS YOU KNOW, UNDER THE HIGHEST ETHICAL AND

1	MEDICAL STANDARDS THIS IS SIMPLY OUR MISSION
2	STATEMENT FOR THE DISCOVERY AND DEVELOPMENT OF
3	CURES, THERAPIES, DIAGNOSTICS, AND RESEARCH
4	TECHNOLOGIES TO RELIEVE HUMAN SUFFERING FROM CHRONIC
5	DISEASE AND INJURY. WE THINK THIS IS A GREAT
6	MISSION. WE HAVEN'T INTERNALLY AS OF YET THOUGHT
7	THAT WE NEEDED TO REVISE THIS MISSION, BUT IT'S
8	IMPORTANT, THOUGH, THAT WE ARE ALIGNED ON THIS TYPE
9	OF VISION AND MISSION BECAUSE EVERYTHING ELSE FLOWS
10	FROM IT.
11	IF WE THINK OF THE DIFFERENT CATEGORIES OF
12	WHERE WE'VE BEEN, WHERE WE ARE NOW, WHERE WE WANT TO
13	GO IN THE FUTURE, WE LIKE TO CATEGORIZE WHERE WE'VE
14	BEEN IN TERMS OF 2004 AND 2010 AS OUR EXPLORATORY
15	PHASE WHERE WE REALLY FUNDED A BROAD NUMBER OF
16	DISEASES AND PROJECTS. WE'VE ESTABLISHED THE
17	FOUNDATION FOR LEADERSHIP IN STEM CELL RESEARCH.
18	AND SO WE'VE REALLY BEEN VERY EXPLORATORY. WE DON'T
19	KNOW WHERE THE BEST DISCOVERIES ARE GOING TO COME
20	FROM, SO WE'VE REALLY TRIED TO BE ECUMENICAL IN
21	TERMS OF THINKING ABOUT THE DIFFERENT APPROACHES AND
22	ALSO THE BROAD RANGES OF DISEASES THAT WE CAN GO
23	INTO. WE ARE FUNDING, INVESTING IN OVER 26
24	DIFFERENT DISEASE AREAS.
25	WHAT WE'RE THINKING OF, WHY WE CONTINUE TO

1	FUND THE ENGINE OF DISCOVERY WITH FUNDAMENTAL
2	BIOLOGY, THAT WILL CONTINUE BECAUSE WE THINK THAT'S
3	AN IMPORTANT ENGINE TO KEEP GOING. BUT WE'RE ALSO
4	TRYING TO THINK WE DO HAVE A MISSION TO BRING
5	THERAPIES TO PATIENTS. AND SO WE NEED TO BE
6	THINKING OF THE PROPORTION THAT WE INVEST, THE ISSUE
7	OF PRIORITIZATION AND THINKING ABOUT HOW TO
8	INCORPORATE THAT INTO OUR PROJECTS AND INVESTMENTS.
9	HOW DO WE FOCUS ON DRIVING AND ADVANCING SOME OF
LO	THIS STEM CELL SCIENCE INTO CLINICAL TRIALS FOR
L1	PATIENTS TO GENERATE PRELIMINARY EVIDENCE OF
L2	THERAPEUTIC BENEFIT.
L3	BECAUSE AT THE BEGINNING AND AT THE END OF
L4	THE DAY, THIS INSTITUTE IS ABOUT PATIENTS. AND SO
L5	IT WAS THE PATIENTS, IT WAS THE PRIVATE CITIZENS
L6	THAT PUT THIS INSTITUTE TOGETHER THAT VOTED FOR
L7	THIS. AND SO WE HAVE TO ANSWER TO THE PEOPLE WHO
L8	ACTUALLY CREATED THIS INSTITUTE TO BRING THINGS BACK
L9	TO THEM. SO THAT IS A PART OF WHAT WE REALLY NEED
20	TO THINK ABOUT IN TERMS OF HOW WE FOCUS.
21	WE'RE ALSO THINKING THIS IS THE TIME TO
22	REALLY EXPAND AND EXTEND OUR PARTNERSHIPS WITH
23	ACADEMIA, WITH MEDICAL GROUPS, WITH PHYSICIAN
24	GROUPS, WITH PATIENT GROUPS INTERNATIONALLY, AND
25	ALSO, MOST IMPORTANTLY, OR A VERY KEY IMPORTANT PART

1	IS WITH INDUSTRY BECAUSE WE KNOW WE NEED TO DEVELOP
2	THOSE PARTNERSHIPS. WE'RE FUNDING A PARTICULAR AREA
3	OF THAT WHOLE PRODUCT DEVELOPMENT SPECTRUM, BUT WE
4	NEED TO ENGAGE WITH INDUSTRY IN A STRONGER AND MORE
5	EXPANSIVE WAY IN TERMS OF TAKING THE MOST PROMISING
6	THINGS FORWARD TOWARDS AND INTO THE CLINIC SO THAT,
7	WHEN WE THINK ABOUT 2016, WE CAN THINK ABOUT THOSE
8	ISSUES, WHAT WE ENVISION, WHERE WE CAN REALLY
9	FACILITATE THE COMMERCIALIZATION OF THE THERAPIES,
10	WE CAN REALLY BE ADVANCING THOSE THERAPIES FROM
11	CLINICAL TRIALS TO PATIENTS. AND ALSO THAT WE'VE
12	DONE OUR WORK IN TERMS OF HELPING TO ENABLE A
13	BUSINESS MODEL FOR STEM CELL-BASED THERAPIES.
14	SO IT'S NOT JUST ABOUT FUNDING. IT'S
15	ABOUT ALSO LOOKING AT THE REGULATORY PATHWAY,
16	LOOKING AT THE BUSINESS PATHWAY ABOUT HOW TO MOVE
17	THESE TYPES OF THERAPIES FORWARD.
18	I CAN ACTUALLY SEE THAT IT'S ACTUALLY A
19	DIFFERENT SLIDE SET THAT SHOULD HAVE BEEN PULLED UP,
20	BUT I'LL WORK FROM THIS ONE AND THEN WE CAN GO BACK
21	TO THE OTHER SLIDE SET.
22	THESE ARE JUST SOME OF OUR ACTIVITIES
23	TOWARDS OUR SCIENTIFIC MISSION. AND YOU'RE VERY
24	FAMILIAR WITH THESE. I DON'T NEED TO READ THROUGH
25	THESE. I THINK ALAN ALSO COMMUNICATED THIS A LITTLE

1	BIT EARLIER, BUT WE HAVE OVER 450 AWARDS THAT HAVE
2	GONE OUT TO 59 DIFFERENT INSTITUTES, COMPANIES.
3	WE'VE ESTABLISHED, AS YOU KNOW, 12 NEW INSTITUTES
4	AND CENTERS OF REGENERATIVE MEDICINE THAT HAS ALSO
5	BEEN LEVERAGED WITH PRIVATE AND UNIVERSITY
6	DONATIONS. WE'VE ALLOCATED ABOUT 40 PERCENT OF OUR
7	\$3 BILLION ALLOCATION FOR THIS INSTITUTE. SO WE
8	HAVE A LOT OF THINGS IN THE COOKER, A LOT OF VERY,
9	VERY PRODUCTIVE SCIENCE, BUT IT IS A FINITE PURSE.
10	SO WE DO NEED TO THINK ABOUT HOW WE WANT TO MOVE
11	FORWARD.
12	WE HAVE 900 MAJOR SCIENTIFIC PAPERS THAT
13	HAVE BEEN PUBLISHED, ABOUT A QUARTER OF THEM IN VERY
14	HIGH IMPACT JOURNALS. WE'VE ATTRACTED OVER A
15	HUNDRED NEW MAJOR STEM CELL RESEARCH LEADERS TO
16	CALIFORNIA. WE HAVE 44 DIFFERENT TRANSLATIONAL
17	DISEASE PROGRAMS OF WHICH 14 ARE VERY MUCH FOCUSED
18	ON PARTICULAR DISEASES AND ON IND ENABLING RESEARCH
19	TO GET THEM TO FIRST IN HUMAN CLINICAL TRIALS. AND
20	WE'VE ALSO AWARDED IN JUNE OF THIS YEAR THE FIRST
21	CLINICAL AWARD TO THE FIRST IN THE WORLD FDA
22	APPROVED CLINICAL TRIAL UTILIZING HUMAN EMBRYONIC
23	STEM CELL THERAPY IN PATIENTS WITH SUBACUTE SPINAL
24	CORD INJURY. AND THAT TRIAL IS ENROLLING PATIENTS
25	AND HAD THE FIRST CALIFORNIAN ENROLL IN THAT STUDY

BACK IN SEPTEMBER. SO THERE'S BEEN A LOT OF
ACTIVITY AND A LOT OF FORWARD MOTION.
THIS IS OUR TRAJECTORY. IT REALLY STARTED
WITH ESTABLISHING THE INTELLECTUAL CAPITAL, THE SAFE
HAVENS TO DO THE RESEARCH, AND THE SEED FUNDING TO
REALLY SPUR DISCOVERY AND HELP MOVE THINGS FORWARD.
AND YOU'VE SEEN THIS SLIDE, I THINK, MULTIPLE TIMES,
SO THIS IS JUST RECAPPING SOME OF THE THINGS THAT
YOU'VE ALREADY SEEN OVER THE PAST YEAR OR SO. BUT,
AS YOU CAN SEE, IT WAS IN 2009 WHEN WE REALLY
STARTED FUNDING OUR FIRST TRANSLATIONAL PROGRAMS,
AND THAT HAS CONTINUED THROUGH 2011.
HOWEVER, WHAT I WANT TO POINT OUT IS THAT
WE CONTINUE TO FUND RESEARCH, INTELLECTUAL CAPITAL,
AND FUNDAMENTAL BIOLOGY. YOU WILL SEE IN THE
BRIGHTER YELLOW THE PHYSICAL INFRASTRUCTURE, THE
RESEARCH LABS, THE SHARED CENTER WHERE THE RESEARCH
TAKES PLACE. IN THE PALE GREEN, WHAT YOU WILL SEE
IS THE RESEARCH INTELLECTUAL INFRASTRUCTURE THAT
ALSO CONTINUES TO BE FUNDED. WE HAVEN'T STOPPED
THAT. YOU ALSO SEE THE FUNDAMENTAL RESEARCH IN THE
BRIGHTER GREEN, AND THEN YOU SEE IN THE ROYAL BLUE
THE TRANSLATIONAL RESEARCH THAT'S BEEN GOING FORWARD
THAT REALLY JUST STARTED IN 2009.
SO PART OF OUR ISSUES ARE THINKING ABOUT
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1	ARE WE INVESTING IN THE RIGHT AREAS, IS IT THE RIGHT
2	PROPORTION AS WE MOVE FORWARD. THESE ARE SOME OF
3	THE BIG QUESTIONS WE REALLY WANT YOU TO HELP GIVE US
4	INSIGHT INTO. THESE ARE JUST SOME OF THE PROGRAMS
5	THAT WE PUT FORWARD FOR CREATING THE STEM CELL
6	INFRASTRUCTURE. WE CREATED AN INTELLECTUAL
7	INFRASTRUCTURE WITH OUR TRAINING AWARDS, WITH OUR
8	BRIDGES AWARDS, WITH CREATIVITY AWARDS, AND NEW
9	FACULTY RESEARCH LEADERS. YOU WILL HEAR A PROPOSAL
10	LATER TODAY ABOUT THE CREATIVITY AWARDS.
11	SO OUR PROGRAMS, YOU'VE SEEN THIS MULTIPLE
12	TIMES, COVER THIS PRODUCT DEVELOPMENT SPECTRUM.
13	IT'S A UNIDIRECTIONAL CHEVRON ON THE SLIDE, BUT IT'S
14	CLEARLY AN ITERATIVE PROCESS THAT'S BIDIRECTIONAL.
15	SO IT'S NOT WE GO FROM THE LAB TO THE BEDSIDE, BUT
16	WE LEARN FROM THE BEDSIDE AND GO BACK TO THE LAB TO
17	TRY AND UNDERSTAND WHAT WE'RE SEEING IN THE CLINIC.
18	SO YOU WILL SEE HERE THE FUNDAMENTAL BIOLOGY, WHICH
19	IS GOING TO CONTINUE, THROUGH EARLY TRANSLATIONAL
20	RESEARCH, AND YOU HEARD SOME INFORMATION ON THAT
21	FROM ALAN EARLIER ABOUT THE NEXT APPLICATION PROCESS
22	IS ALREADY IN FULL SWING. THE DISEASE TEAM
23	RESEARCH, AND WE ARE GOING TO RECEIVE DISEASE TEAM
24	II RESEARCH AWARDS IN JANUARY OF THIS YEAR AND BE
25	REVIEWING THEM IN THE SPRING AND AWARDING THEM. SO

1	WE'RE GOING TO HAVE A NEW CADRE OF DISEASE RESEARCH
2	TEAMS, BUT IN ADDITION WE HAVE AN ONGOING PIPELINE
3	THAT'S BEEN FUNDED BY OUR DISEASE TEAM RESEARCH I.
4	WE ALSO HAVE TOOLS AND TECHNOLOGY AND
5	TRANSPLANTATION IMMUNOLOGY WHICH WE'RE FUNDING. AND
6	WE HAD A VERY GOOD WORKSHOP AT THE FDA, I GUESS IT
7	WAS, ONLY TWO DAYS AGO TALKING ABOUT SOME OF THESE
8	BOTTLENECKS WITH THE FDA, WITH INVESTIGATORS THAT
9	ARE CIRM-FUNDED, BUT ALSO THOSE NOT CIRM-FUNDED.
10	WE'RE TRYING TO REACH OUT AND PULL IN INVESTIGATORS
11	WHO ARE WORKING IN THE FIELD, MAYBE NOT NECESSARILY
12	FUNDED BY US, BUT WE'RE ALL WORKING ON THE SAME
13	ISSUES. SO, BERT, TO YOUR POINT IN TERMS OF
14	REACHING OUT, WE DO WANT TO MAINTAIN VIGILANCE IN
15	TERMS OF BEING AWARE OF WHAT OTHERS ARE DOING
16	BECAUSE WE DON'T WANT TO DUPLICATE. THERE'S NOT
17	ENOUGH MONEY AND THERE'S NOT ENOUGH TIME IN THE DAY
18	FOR PEOPLE TO BE DUPLICATING EFFORTS. SO WE ARE
19	ACTIVELY WORKING WITH A VARIETY OF DIFFERENT
20	RESEARCH ENTITIES, BOTH DOMESTICALLY,
21	INTERNATIONALLY, WITHIN CALIFORNIA, TO MAKE SURE
22	THAT WE'RE WELL INFORMED AND WE'RE LEVERAGING WHERE
23	WE CAN.
24	YOU ALSO HAVE BEEN HEARING ABOUT SOME OF
25	THE THINGS THAT WE'RE DOING TO ENGAGE INDUSTRY. AS

1	YOU'VE ALSO HEARD, WE WANT TO STRENGTHEN AND EXPAND
2	THAT. AND ELONA HAS BEEN SPEAKING WITH THE I.T. AND
3	THE SCIENCE SUBCOMMITTEES IN TERMS OF THESE
4	DIFFERENT INITIATIVES. YOU'RE GOING TO HEAR ABOUT
5	ONE OF THE COMPONENTS OF THAT INITIATIVE A LITTLE
6	BIT LATER TODAY WITH THE STRATEGIC PARTNERSHIP, BUT
7	THERE WAS ALSO TWO OTHER COMPONENTS, BRIDGE FUNDING
8	AND EXTERNAL INNOVATION. SO YOU'LL BE HEARING ABOUT
9	THAT, WE THINK, SOMETIME IN DECEMBER ABOUT THE FULL
10	COMPLEMENT OF PROGRAMS THAT WE WANTED TO PUT
11	TOGETHER.
12	SO I'M NOT GOING TO GO INTO DETAIL ABOUT
13	THESE INITIATIVES, BUT REMIND YOU OF THE SPECTRUM OF
14	ACTIVITIES THAT WE'RE ENGAGED IN.
15	I'D LIKE TO TAKE JUST A LITTLE BIT OF TIME
16	TO GO OVER THE PERSPECTIVES ON THESE STRATEGIC
17	OBJECTIVES, STRATEGIES, AND RATIONALE FOR CHANGE.
18	AND WE'D LIKE TO REALLY FOCUS TODAY'S DISCUSSION,
19	BECAUSE EVERYTHING ELSE WILL FLOW FROM THAT, ON THE
20	MISSION, THE STRATEGIC OBJECTIVES, AND WHETHER OR
21	NOT THE STRATEGIC OBJECTIVES AND THE STRATEGIES TO
22	REACH THEM WILL IMPACT ON ANY PROCESS CHANGES.
23	SO THE FIRST THING WAS TO THINK ABOUT WHAT
24	DOES SUCCESS LOOK LIKE. IN YOUR PREREAD WE GAVE
25	SOME THOUGHTS ABOUT WHAT SUCCESS COULD LOOK LIKE.

1	WE WANT TO HEAR FROM YOU ABOUT WHAT YOU THINK
2	SUCCESS COULD LOOK LIKE IN TERMS OF FOCUSING ON
3	ACHIEVING OUR MISSION. THIS WILL DRIVE
4	ORGANIZATIONAL PLANNING AND FOCUS. AND WE DO WANT
5	TO BE ALIGNED ON OUR MISSION BECAUSE THEN IT WILL
6	HELP US POPULATE THE ELEMENTS OF THE STRATEGIC PLAN
7	IN TERMS OF STRATEGIC OBJECTIVES, HOW WE STAFF
8	OURSELVES, WHAT KIND OF RESEARCH ALLOCATION WE MAKE,
9	AND HOW WE CONFIGURE AND PUT OUT A REQUEST FOR
10	APPLICATIONS. ALL OF THAT DERIVES FROM OUR
11	STRATEGIES.
12	AND THEN IN THIS NEXT SIX YEARS, WE NEED
13	TO THINK ABOUT WHAT ARE OUR PRIORITIES FOR THE NEXT
14	SIX YEARS BECAUSE THIS WILL PROVIDE DIRECTION TO
15	HELP US ACHIEVE OUR MISSION. SO YOU'VE ALL READ THE
16	STRATEGIC PLANS FROM '06, FROM '09, AND '10. YOU'VE
17	BEEN IN PREVIOUS BOARD MEETINGS INFORMED ON THE
18	EXTERNAL REVIEW PANEL RECOMMENDATIONS AND THE REVIEW
19	AND THE RECOMMENDATIONS THAT CAME FROM THAT. WE
20	WILL UPDATE YOU IN REAL-TIME AS WE HAVE OUR
21	STAKEHOLDER MEETINGS TO GIVE YOU INPUT IN TERMS OF
22	WHAT WE'RE HEARING FROM THE PUBLIC, FROM INDUSTRY.
23	BUT THIS WILL HELP, I THINK, MAKE FOR A MORE
24	INCLUSIVE THOUGHT PROCESS IN TERMS OF WHAT WE PUT
25	FORWARD. AND ALSO, IF WE DO MAKE CHANGES COMPARED

1	TO '09-'10, WE WANT TO BE ABLE TO PROVIDE CLARITY,
2	NOT JUST TO US, BUT TO THE EXTERNAL COMMUNITY ON THE
3	RATIONALE FOR THAT CHANGE.
4	AND THEN, AS I SAID, OUR MISSION AND OUR
5	STRATEGY WILL DRIVE OUR PROCESS. SO THE STRATEGIC
6	OBJECTIVES ARE REALLY THE BASIS OF THE PLANS FOR OUR
7	OPERATIONAL IMPLEMENTATION, WHICH WOULD INCLUDE THE
8	OPERATIONS PLAN, THE COMMUNICATIONS PLAN, WHICH YOU
9	WILL HEAR ABOUT LATER TODAY, BUT WE THINK THE
10	STRATEGIC PLAN SHOULD DRIVE WHAT'S IN THE
11	COMMUNICATIONS PLAN, THE RFA CONTENT AND
12	PRIORITIZATION, AND OUR GRANT REVIEW CRITERIA. AND
13	THIS WILL ALSO, AS OUR OBJECTIVES AND OUR PROCESSES
14	CHANGE, THIS WILL ALSO IMPACT ON WHAT METRICS WE PUT
15	TOGETHER TO MEASURE THAT PROGRESS.
16	SO SOME OF OUR INITIAL THOUGHTS ON WHAT
17	SUCCESS WOULD LOOK LIKE, AND THIS IS JUST MORE
18	TELEGRAPHIC, WE HAVE MORE INFORMATION IN THE
19	PREREAD, IS THAT RESEARCH IS THE FOUNDATION OF
20	THERAPY, AND THAT REGENERATIVE MEDICINE AND CELL
21	THERAPY HAS BEEN ENABLED BY CIRM'S WORK. IN TERMS
22	OF THE MEDICINE CATEGORY, THAT STEM CELL-BASED
23	THERAPIES ARE THE CORE OF CIRM'S MISSION, AND THEN
24	TREATMENTS IN CLINICAL TRIALS EVOLVE FROM STEM CELL
25	RESEARCH.
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1	AND ALSO, WE THOUGHT A THIRD MAJOR SUCCESS
2	WOULD BE IN THE AREA OF MAKING CALIFORNIA A STEM
3	CELL HUB, THAT THERE WOULD BE A RANGE OF BENEFITS
4	FROM CREATING A SUSTAINABLE STEM CELL HUB IN
5	CALIFORNIA, THAT IT WOULD BE MORE WIDELY
6	ACKNOWLEDGED AS A STEM CELL STATE, AS A WORLDWIDE
7	CENTER OF EXCELLENCE IN STEM CELL SCIENCE AND IN
8	STEM CELL-BASED THERAPY.
9	THESE ARE THE STRATEGIC OBJECTIVES FROM
10	'09 AND 2010. AND AS YOU CAN SEE, IT HAD FIVE
11	DIFFERENT BINS OR CATEGORIES WITH ACCELERATION OF
12	THERAPEUTIC DISCOVERIES, OPERATIONAL EXCELLENCE,
13	REGULATORY CERTAINTY, PUBLIC EDUCATION, AND THEN
14	ECONOMIC BENEFIT TO CALIFORNIA. WE SUGGESTED
15	MELDING THESE INTO FOUR MAJOR CATEGORIES, AND YOU
16	WILL SEE THAT HERE, INTO SCIENTIFIC, MEDICAL,
17	ECONOMIC, AND SOCIAL.
18	AND HERE UNDER SCIENTIFIC, THE BROADBRUSH
19	IS THAT THE SCIENTIFIC WOULD ACCELERATE OUR
20	UNDERSTANDING OF STEM CELL SCIENCE AND ITS
21	APPLICATIONS TOWARDS HUMAN DISEASES AND INJURY.
22	IN TERMS OF MEDICAL, THE STRATEGIC
23	OBJECTIVE WOULD BE TO ADVANCE SCIENCE INTO CLINICAL
24	TRIALS TO ACHIEVE PRELIMINARY EVIDENCE OF
25	THERAPEUTIC BENEFIT FOR PATIENTS.

1	THE ECONOMIC WOULD BE THAT WE'RE DRIVING
2	ECONOMIC DEVELOPMENT FOR CALIFORNIA FROM THE STEM
3	CELL SCIENCE.
4	AND IN TERMS OF SOCIAL, AND WE'RE VERY
5	OPEN TO OTHER TERMS, ACTUALLY WE'RE VERY OPEN, THIS
6	IS FLUID, WE'RE OPEN TO ALL OF THIS BEING COMMENTED
7	UPON, WOULD BE TO INCREASE AWARENESS OF CALIFORNIA
8	AS THE LEADER IN STEM CELL RESEARCH AND THERAPIES.
9	AND THESE ARE JUST SOME OF OUR PROPOSED
10	STRATEGIES UNDER THOSE PROPOSED STRATEGIC
11	OBJECTIVES. AND SOME OF THE STRATEGIES INCLUDE
12	ENHANCING OUR FOOTPRINT BOTH ON AN INTELLECTUAL
13	BASIS, INTELLECTUAL PROPERTY BASIS, AND THE PHYSICAL
14	INFRASTRUCTURE, OUR STRATEGIES IN BUILDING
15	PARTNERSHIPS WITH INDUSTRY TO INCREASE OUR
16	SCIENTIFIC RESEARCH COLLABORATIONS, AND, AS WE
17	NOTED, REALLY GREATLY LEVERAGE EXPERTISE BECAUSE THE
18	PURSE IS FINITE. AND ALSO TO BE THINKING AS PART OF
19	OUR STRATEGY DO WE NEED TO REVISE PRIORITIZATION AND
20	THE DECISION-MAKING FRAMEWORK TO MAKE THIS WORK.
21	IN TERMS OF MEDICAL AND ADVANCING SCIENCE
22	INTO CLINICAL TRIALS, DO WE NEED TO THINK ABOUT SOME
23	KIND OF PRIORITIZATION HERE, OR DO WE CONTINUE IN AN
24	EXPLORATION PHASE? WE'RE SUGGESTING THERE NEEDS TO
25	BE SOME SENSE OF PRIORITIZATION AND SOME SORT OF

1	STRATEGIC GUIDANCE INTO THE PROPORTION THAT WE
2	CONTINUE TO DRIVE THE ENGINE OF DISCOVERY VERSUS THE
3	PROPORTION THAT WE WANT TO PUT INTO TRANSLATIONAL
4	PROGRAMS. AND ALSO, DO WE CONTINUE ACROSS ALL THE
5	STEM CELL PLATFORMS?
6	WE ALSO THINK, AS PART OF THE STRATEGY,
7	IT'S NOT JUST ABOUT INVESTMENTS. IT'S ABOUT
8	THINKING OF THE PATHWAY FORWARD BOTH ON A
9	REGULATORY, ON A COMMERCIAL END, BUILDING THOSE
10	PARTNERSHIPS WITH INDUSTRY, THE MEDICAL COMMUNITY,
11	AND GLOBAL ORGANIZATIONS, AND ENGAGING PATIENTS AND
12	PATIENT ADVOCATES EARLY IN ALL OF THESE DIFFERENT
13	ENDEAVORS BECAUSE WE THINK PATIENTS AND THEIR
14	ORGANIZATIONS WILL BE MOST INTERESTED IN THE
15	STRATEGY INVOLVING MEDICAL.
16	IN TERMS OF ECONOMIC, THIS IS REALLY
17	LEVERAGING, AGAIN, THROUGH PARTNERSHIP AND THINKING
18	OF STRATEGIES TO ENGAGE THE CALIFORNIA GOVERNMENT
19	AND ECONOMIC DEVELOPMENT AGENCY TO BRING COMPANIES
20	TO CALIFORNIA. SO WE HAVE TO THINK ABOUT WHO IS OUT
21	THERE THAT WE CAN REALLY ENGAGE AND HELP US IN
22	ATTRACTING THESE COMPANIES TO CALIFORNIA. WE CAN DO
23	SO MUCH WITH FUNDING. ARE THERE OTHER INCENTIVES,
24	OTHER THINGS THAT COULD BE DONE TO ATTRACT PEOPLE
25	HERE AND THEIR COMPANIES.

1	AND THEN IN TERMS OF SOCIAL, WHAT WE MEAN
2	BY THAT IS INCREASING AWARENESS OF CALIFORNIA AS A
3	LEADER IN STEM CELL THERAPIES. THIS IS WHERE WE SEE
4	THE BIG DRIVE ON COMMUNICATION, TO COMMUNICATE THE
5	VALUE PROPOSITION OF WHAT WE'RE DOING. THERE'S BEEN
6	A TREMENDOUS AMOUNT OF WORK ON COMMUNICATION, VERY
7	SUCCESSFUL WORK DONE IN THE SCIENTIFIC COMMUNITY.
8	WE KNOW WE WANT TO BROADEN OUR COMMUNICATION AND
9	STRENGTHEN OUR COMMUNICATION AMONG VARIOUS
10	STAKEHOLDERS.
11	WHAT'S THE BEST WAY WE CAN DO THAT? AND
12	YOU WILL HEAR LATER TODAY ABOUT SOME OF THOSE
13	PROPOSED PLANS. THIS IS ABOUT OUR EDUCATION, OUR
14	MESSAGING, AND HOW CAN WE BETTER PARTNER, NOT JUST
15	WITH PATIENT ADVOCATES ON THE BOARD, WHICH YOU CAN
16	DO A TREMENDOUS AMOUNT, BUT LEVERAGING THE HUNDREDS
17	OF ORGANIZATIONS OUT THERE THAT DON'T HAVE AN
18	OPPORTUNITY TO SIT ON THE BOARD TO ALSO HELP IN
19	TERMS OF EDUCATING AND BRINGING THEM INTO THE FOLD
20	OF BEING INVESTED IN WHAT WE'RE TRYING TO DO. AS WE
21	SAID, ALSO INCREASING OUR GLOBAL OUTREACH EFFORTS.
22	SO I'M ACTUALLY GOING TO ASK MARIA TO PULL
23	UP THE SLIDE DECK I MEANT TO USE, WHICH INCLUDES THE
24	NEXT PHASE OF THIS DISCUSSION WITH YOU, WHICH IS TO
25	BRING IN CAMPBELL ALLIANCE. AND I'M GOING TO BE

1	INTRODUCING JEFFREY LIEPMAN AND EMILY HUA TO HELP
2	MODERATE THE DISCUSSION. AND ONE WAY THAT THEY'RE
3	GOING TO DO THAT IS BY POSING QUESTIONS TO YOU.
4	SO PRESUMABLY START WITH RATHER
5	OPEN-ENDED, BUT WE THOUGHT THE BEST WAY TO DO IT IS
6	HAVE PEOPLE WHO ARE FROM THE OUTSIDE AND SO DON'T
7	HAVE A PARTICULAR HORSE IN THE RACE AND SO CAN TRY
8	AND GARNER INPUT FROM YOU IN TERMS OF HOW TO GO
9	FORWARD.
10	LET ME JUST FIRST ASK, THOUGH, IF THERE
11	ARE ANY QUESTIONS ON MY PART OF THIS PRESENTATION.
12	DR. PIZZO: ELLEN, I HAVE A QUESTION WHICH
13	IS AN EXTENSION OF THE PRESENTATION THAT ALAN GAVE.
14	SO HE MAY WANT TO COMMENT ON THIS FURTHER. IN
15	TRYING TO THINK ABOUT THE RIGHT BALANCE BETWEEN
16	CONTINUING TO FUND BASIC RESEARCH, WHICH WE ALL KNOW
17	WE STILL NEED LOTS OF, VERSUS THE DIVIDEND THAT
18	COMES FROM PROOF OF PRINCIPLE BY TRANSLATIONAL
19	RESEARCH MODELS, WHEN YOU ALLUDED TO, ALAN, THE
20	CONNECTION WITH THE NIH AND THE INTRAMURAL PROGRAM
21	IN PARTICULAR, THAT AFFORDS AN OPPORTUNITY, AS I'M
22	SURE YOU ARE AWARE, OF SAVING A TREMENDOUS AMOUNT OF
23	RESOURCES IF THE INTRAMURAL PROGRAM EMBRACES THE
24	CONDUCT OF PHASE I, II CLINICAL TRIALS, AND WE COULD
25	PARTNER WITH THEM SUCCESSFULLY TO HAVE THEM DONE
	70

1	THERE, THAT WOULD REALLY IMPACT ON HOW MUCH WE'RE
2	INVESTING ON THE CLINICAL SIDE OF THIS TREMENDOUSLY.
3	PLUS WHICH, AS SOMEBODY WHO HAS 23 YEARS WORKING IN
4	THE INTRAMURAL PROGRAM AT THE NIH, YOU CAN BRING
5	PATIENTS FROM ALL OVER THE WORLD TO THE CLINICAL
6	CENTER. AND THAT INSTITUTION FAR EXCEEDS ANYTHING
7	THAT ANY OF OUR INSTITUTIONS HAVE IN TERMS OF
8	CLINICAL TRIAL DESIGN, DELIVERY, SUPPORT, AND THE
9	LIKE.
10	SO THE QUESTION IS DO YOU THINK THAT THAT
11	IS REALISTIC? THAT WOULD BE AN AMAZING PARTNERSHIP.
12	DR. FEIGAL: I JUST MENTION IT, BUT
13	THEY'RE SENDING US SOME INITIATIVES RIGHT NOW IN
14	TERMS OF BENCH TO BEDSIDE. AND I THINK IT'S
15	DEFINITELY A POTENTIAL, BUT, ALAN, PLEASE COMMENT ON
16	YOUR THOUGHTS ON THIS.
17	DR. TROUNSON: I THINK IT NEEDS TO BE
18	REALIZED, PHIL. I THINK IT'S VERY CLEAR THAT THE
19	OPPORTUNITY IS THERE. WE HAVE TO SORT OF WORK OUT
20	WITH OUR CALIFORNIAN COLLEAGUES WHETHER THEY'D BE
21	WILLING TO LINK IN WITH THAT DEEPLY. I THINK THEY
22	WILL IN SOME CIRCUMSTANCES, POSSIBLY NOT IN OTHERS.
23	BUT I THINK IT WILL JUST BROADEN OUR CAPACITY SO
24	MUCH, AS YOU SAID, THAT I THINK WITH SOME
25	ENCOURAGEMENT AND A LITTLE BIT OF WILL, I THINK IT

1	WOULD EXPAND OUR CAPACITY ENORMOUSLY. I'M AGREEING
2	WITH YOU.
3	DR. PIZZO: I'D BE MORE THAN WILLING TO
4	HELP WITH THIS DIRECTLY. I THINK HAVING DONE
5	RESEARCH IN ACADEMIA VERSUS AT THE NIH, THERE IS NO
6	COMPARISON. THE ABILITY TO DO IT FAST AND TO DO IT
7	WITH ALL THE BELLS AND WHISTLES REALLY EXISTS. THAT
8	CLINICAL CENTER IS THE LARGEST OF ITS KIND IN THE
9	WORLD, AND IT'S HUNGRY RIGHT NOW FOR OUTSTANDING
10	WORK. AND IF WE COULD FORGE A PARTNERSHIP, THIS
11	WOULD MOVE US IN AMAZING WAYS. AND, YOU KNOW, THE
12	COST FOR DOING THAT KIND OF RESEARCH IS
13	EXTRAORDINARY, AND THAT WOULD BE THAT WOULD
14	OFFSET SOME OF THE MONIES THAT WE'RE PUTTING INTO
15	THAT HERE AND ONLY LEVERAGE OUR ABILITY TO DO IT
16	BETTER, QUICKER, AND MORE EXUBERANTLY.
17	DR. FEIGAL: I JUST WANT TO ADD THEY SEE
18	THIS, A COLLABORATION WITH CIRM, AS ALSO A
19	TREMENDOUS OPPORTUNITY.
20	DR. PIZZO: THEY NEED IT. IT'S A GOOD
21	TIME FOR THAT.
22	MR. SHEEHY: I HAD A COUPLE OF QUESTIONS.
23	AND ONE OF THEM WAS ALONG DR. PIZZO'S LINES.
24	INITIALLY IT'S JUST THE RESOURCE QUESTION. HOW MUCH
25	MONEY IT WOULD BE GREAT IF WE AS A STARTING POINT

1	LOOKED AT HOW MUCH MONEY WE HAVE AVAILABLE IN ORDER
2	TO COMMIT TO THE STRATEGIC PLAN. I DON'T THINK
3	IT'S
4	DR. FEIGAL: WE COULD TELL YOU.
5	MR. SHEEHY: FULLY 1.65, SO THAT WOULD
6	BE HELPFUL.
7	DR. FEIGAL: 1.2 IS THE ESTIMATE.
8	MR. SHEEHY: SECOND WOULD BE, AS DR. PIZZO
9	SAID, WHERE CAN WE LEVERAGE OUTSIDE FUNDING, I
10	THINK, IS A KEY PART. THE NIH PIECE IS BIG OR IN
11	INDUSTRY.
12	ANOTHER THING THAT WOULD BE HELPFUL FOR
13	ME, WE'RE BASICALLY A TECHNOLOGY FUNDING ENTITY.
14	AND YOU MENTIONED PLATFORMS. WHAT WOULD HELP ME IS
15	TO GET SOME SORT OF MATRIX OF THE PLATFORMS THAT
16	WE'RE FUNDING, MEANING WE DO ADULT STEM CELLS, WE
17	DO AND YOU CAN EVEN BREAK THAT DOWN INTO
18	AUTOLOGOUS, ALLOGENEIC, WE DO CANCER STEM CELL, WE
19	DO EMBRYONIC STEM CELL, WE DO IPS. WE MAY DECIDE TO
20	GO INTO DIFFERENT ORIENTATION. SOME SORT OF MATRIX
21	THAT COULD CAPTURE WHAT OUR PLATFORMS ARE AND THEN
22	TO OVERLAY THAT WITH DISEASE TARGETS, AND THEN PUT
23	THAT AND THEN DO THAT ANALYSIS AGAINST THE
24	DEVELOPMENT PATHWAY SO WE CAN GET A REAL SENSE OF
25	WHERE OUR OPPORTUNITIES ARE, AND THEN WE CAN MAKE
	0.1

1	STRATEGIC DECISIONS.
2	THERE MAY BE CERTAIN DISEASES AND
3	CONDITIONS, FOR INSTANCE, THAT ARE IMPORTANT TO THE
4	PEOPLE OF CALIFORNIA. YOU KNOW, ALZHEIMER'S OR
5	AUTISM, WHICH ARE EPIDEMIC, COME TO MIND THAT MAY
6	FALL IN A DIFFERENT DEVELOPMENTAL PATHWAY, BUT TO BE
7	ABLE TO MAKE THAT KIND OF DECISION TO MAKE
8	INVESTMENTS BASED ON, QUOTE, PLATFORM OUR CURRENT
9	INVESTMENTS, OUR OUTSIDE FUNDING PARTNERS, THE
10	AMOUNT OF MONEY WE HAVE LEFT. THAT WOULD BE A VERY
11	HELPFUL WAY FOR ME TO BE ABLE TO ANALYZE THIS AS
12	OPPOSED TO JUST SETTING OUT BROAD TARGETS.
13	IT WOULD BE ROUGHLY SIMILAR TO WHAT WE DID
14	IN THE FIRST STRATEGIC PLAN WHERE WE BASICALLY
15	LOOKED, WE WERE REALLY LOOKING AT A VERY NARROW SET
16	OF TECHNOLOGIES, REALLY EMBRYONIC STEM CELLS AND
17	SOMATIC CELL NUCLEAR TRANSFER, AND THEN LINED OUT A
18	WHOLE SERIES OF RFA'S TO GET THERE.
19	THE OTHER THING THAT WOULD BE HELPFUL IN
20	DOING THIS MATRIX IS PERHAPS WE CAN IDENTIFY CORE
21	TECHNOLOGIES WITHIN EACH PLATFORM WHERE WE CAN PLAY
22	A ROLE IN FURTHERING THE DEVELOPMENT OF THOSE
23	TECHNOLOGIES, LIKE I THINK OF GENE THERAPY IN ADULT
24	STEM CELLS. WELL, IMPROVING VECTORS IS A BIG PIECE
25	OF THAT, HUGE PIECE OF THAT, OR TRANSDUCTION

1	EFFICIENCY BOTH POP OUT. BUT THAT WOULD HELP ME
2	THINK ABOUT HOW MUCH TO PUT INTO BASIC SCIENCE OR
3	HOW MUCH TO PUT INTO CLINICAL SCIENCE AND WHAT TO
4	PRIORITIZE TO REALLY HAVE THAT KIND OF SCIENTIFIC
5	GRANULARITY AS OPPOSED TO JUST KIND OF MAKING KIND
6	OF A BROADBRUSH LOOK AT THIS.
7	AND THE OTHER THING, IN TERMS OF THE
8	BUSINESS MODEL, I THINK THAT IF WE CAN ENGAGE ART
9	AND DUANE AS EARLY AS POSSIBLE TO CREATE THE
10	DIALOGUES WITH FUNDERS FOR HEALTHCARE SERVICES
11	BECAUSE I THINK ULTIMATELY, ESPECIALLY GOVERNMENT,
12	WHO'S PROBABLY THE BIGGEST SINGLE FUNDER OF HEALTH
13	CARE SERVICES, THEY MAY BE THAT MAY BE WHERE WE
14	GET ENORMOUS AMOUNTS OF SUPPORT THAT WE MAY NOT GET
15	FROM INDUSTRY IN TERMS OF MOVING THESE TECHNOLOGIES
16	FORWARD.
17	A CURE REALLY MAY NOT COST OUT FOR
18	INDUSTRY IN THE SAME WAY THAT IT MIGHT COST OUT FOR
19	KAISER, WHO'S TREATING A NUMBER OF PATIENTS FOR
20	CHRONIC DISEASE, OR FOR MEDICARE OR FOR MEDICAID OR
21	MEDI-CAL FOR ALL THESE FUNDERS. SO I THINK ENGAGING
22	THEM IN THE DIALOGUE AT THE AS SOON AS POSSIBLE
23	POINT WOULD BE ANOTHER ESSENTIAL COMPONENT ON THIS
24	FOR ME.
25	DR. FEIGAL: I JUST WANT TO MAKE A
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	00

1	COMMENT. BACK IN AUGUST, IN PREPARATION FOR THE
2	STRATEGIC PLAN DISCUSSION, WE DID PROVIDE ACTUALLY
3	DATA ON INVESTMENTS AND PROPORTION ACROSS ALL THE
4	STEM CELL PLATFORMS. THAT WAS THE PIE CHART. WE
5	PROVIDED THE DISEASE INVESTMENTS ACROSS THE 26
6	DIFFERENT AREAS. SO I'VE JUST ASKED MARIA TO RESEND
7	THAT DOCUMENT, BUT WHAT WE DON'T HAVE IS AS A
8	MATRIX.
9	MR. SHEEHY: I UNDERSTAND. WE KIND OF
10	LOOKED AT THIS, BUT IT DOESN'T REALLY KIND OF
11	CAPTURE IN TERMS OF THE STRATEGIC PLANNING WHERE WE
12	SHOULD BE MAKING OUR INVESTMENTS. IT DOESN'T
13	SEEM IT SEEMS LIKE THAT SHOULD BE PART OF THIS
14	DISCUSSION. RIGHT. WHAT ARE OUR KEY PLATFORM
15	TECHNOLOGIES, AND REALLY WHICH ONES DO WE WANT TO
16	CONTINUE TO INVEST HEAVILY IN, AND FOR WHAT REASON
17	AND FOR WHAT DISEASES?
18	DR. FEIGAL: I CAN REPUT, IF YOU LIKE, THE
19	SLIDES FROM THAT, WHICH GOES OVER IT.
20	DR. BRYANT: I HAD A COMMENT, AND THAT WAS
21	THAT I THOUGHT YOUR ANALYSIS WAS EXCELLENT, AND I
22	REALLY LIKED IT A LOT. WHAT IT REMINDED ME OF IS I
23	AGREE WITH EVERYTHING THAT'S BEEN SAID ABOUT HOW
24	WE'RE GOING TO PRIORITIZE AND EVERYTHING, BUT THE
25	LONG-LASTING EFFECT OF THIS INITIATIVE IS IN
	0.4

1	BUILDING THE FACULTIES IN THE UNIVERSITIES. AND
2	THEY ARE HERE TO STAY, AND THEY WILL KEEP DOING THIS
3	RESEARCH, HOWEVER THEY GET THE MONEY, AFTER THIS IS
4	OVER. SO I THINK THAT'S PART OF THINKING ABOUT THE
5	FUTURE.
6	AND ALSO, SINCE WE'RE STILL IN THE BASIC
7	SCIENCE PHASE OF FIGURING OUT THE BEST WAY TO CREATE
8	STEM CELLS, WE NEED TO KEEP THE BALANCE THAT YOU
9	TALKED ABOUT. BUT I DO THINK THAT ONE OF THE MAJOR
10	CONTRIBUTIONS HAS BEEN TO BUILD THIS INCREDIBLE,
11	ENERGIZED WORKFORCE HERE THAT'S GOING TO STAY.
12	CHAIRMAN THOMAS: ELLEN, BEFORE WE GO TO
13	THE FACILITATORS, WE MIGHT WANT TO TAKE A
14	COUPLE-MINUTE BREAK HERE IN CASE ANYBODY NEEDS TO
15	USE THE FACILITIES.
16	DR. FEIGAL: SOUNDS LIKE A GOOD IDEA.
17	(A RECESS WAS TAKEN.)
18	CHAIRMAN THOMAS: OKAY. WE'D LIKE TO GET
19	BACK GOING HERE. SO IF EVERYBODY COULD PLEASE TAKE
20	THEIR SEATS.
21	EMILY, I WILL TURN IT OVER TO YOU. YOU
22	CAN NOW LEAD US IN FURTHER DISCUSSION ON THE
23	STRATEGIC PLAN.
24	MS. HUA: GOOD MORNING, EVERYBODY. MY
25	NAME IS EMILY HUA, AND I HAVE A COUPLE OF COLLEAGUES

1	WITH ME, JEFF LIEPMAN AS WELL, AND SEVERAL
2	COLLEAGUES IN THE BACK WHO WILL BE HELPING TO
3	CAPTURE ALL THE FEEDBACK.
4	AS ELLEN MENTIONED, WE ARE PART OF A
5	COMPANY CALLED CAMPBELL ALLIANCE, WHICH IS A
6	MANAGEMENT CONSULTING FIRM. OUR ROLE TODAY IS TO
7	HELP MODERATE THE DISCUSSION AND TO REALLY SOLICIT
8	YOUR FEEDBACK ON THE PRELIMINARY STRATEGIC
9	OBJECTIVES THAT WE HAVE WORKED TOGETHER AS A TEAM.
10	SO I JUST WANTED TO PUT SOME GROUND RULES.
11	AND THE FIRST ONE IS PLEASE BE VOCAL. AND I KNOW,
12	WHEN WE WERE PREPARING FOR THIS, ELLEN SAID THAT'S
13	NOT GOING TO BE A PROBLEM WHATSOEVER. BUT WE REALLY
14	ENCOURAGE YOUR FEEDBACK, YOUR INSIGHTS BECAUSE WE
15	REALLY WANT TO PRESSURE TEST WHAT WE HAVE PUT FORTH
16	AND STRENGTHEN WHERE WE WANT TO GO.
17	SO WITH THAT IN MIND, WHAT I'D LIKE TO
18	ACTUALLY GO TO THE NEXT SLIDE. WHAT I'D LIKE TO
19	START OFF WITH IS ASKING THIS FIRST QUESTION. WHAT
20	DOES SUCCESS LOOK LIKE FOR YOU BY THE TIME BY
21	2016? WHAT DOES SUCCESS LOOK LIKE TO YOU?
22	MS. SAMUELSON: MAY I ASK A QUESTION
23	FIRST? ARE YOU GOING TO RETURN TO EVERY SLIDE?
24	BECAUSE THAT'S WHERE I DID MY THINKING, PRELIMINARY
25	THINKING, AND CAME UP WITH MY THOUGHTS.

1	MS. HUA: WE ARE GOING TO RETURN TO A FEW
2	SELECT SLIDES AS IT RELATES TO THE STRATEGIC
3	OBJECTIVE SLIDE. BUT IF YOU WERE REFERRING TO
4	MS. SAMUELSON: I'D LIKE TO SEE THEM ALL.
5	I'M NOT SURE IF I MEAN ALL, BUT I KNOW THAT THERE
6	WERE SEVERAL WHERE I HAD
7	DR. FEIGAL: EVERYTHING ON THE SLIDE
8	ACTUALLY IS THE STRATEGIC OBJECTIVES PART ARE ALL
9	IN THE PREREAD, WHICH IS IN YOUR BINDER. THE OTHER
10	MATERIAL, I DON'T KNOW IF WE HAVE A WAY TO PRINT
11	THEM OUT HERE, BUT BASICALLY IT'S MATERIAL YOU'VE
12	ALL SEEN BEFORE. IT'S OUR FUNDING TRAJECTORY.
13	MS. SAMUELSON: I JUST WANT A REMINDER OF
14	WHAT IT WAS THAT I WAS THINKING 20 MINUTES AGO AS WE
15	WERE GOING THROUGH IT IN TERMS OF BEING ABLE TO
16	PROVIDE THAT FEEDBACK NOW. I CAN LOOK AT THESE
17	LATER AND SUBMIT SOMETHING.
18	MR. SHESTACK: WE ACTUALLY DON'T HAVE A
19	SLIDE IN OUR BOOKS THAT SAYS SCIENCE, MEDICINE, STEM
20	CELL HUB. IN ANY EVENT, THE QUESTION IS?
21	MS. HUA: SO THE QUESTION IS WHEN A SMALL
22	GROUP OF THE CIRM REPRESENTATIVES THOUGHT ABOUT
23	SUCCESS, THEY THOUGHT OF IT IN THESE THREE AREAS:
24	TO BE VERY SCIENCE FOCUSED AND TO MAKE SURE THAT WE
25	ARE PROLIFERATING THE RESEARCH IN STEM CELL.

1	ANOTHER SUCCESS FACTOR WOULD BE TO TRY TO MOVE SOME
2	OF THE RESEARCH INTO CLINICAL DEVELOPMENT. AND
3	LASTLY, IT WOULD BE DEEMED SUCCESSFUL IF, BY THE END
4	OF THIS INITIATIVE, THERE IS A HUB FOR STEM CELL
5	RESEARCH AND THERE IS THE FOOTPRINT OF STEM CELL
6	BECAUSE OF US.
7	SO I WOULD LIKE TO OPEN IT UP TO YOU GUYS
8	TO SEE IF YOU AGREE WITH THAT.
9	MR. ROTH: I'LL TAKE A SHOT. IT'S HARD TO
10	SIT HERE AND SAY WHAT IS SUCCESS WHAT WOULD
11	SUCCESS LOOK LIKE. I THINK I CAN ADDRESS IT BY
12	SAYING IF I LOOK AT THOSE THREE CATEGORIES, WHERE
13	HAVE WE BEEN SUCCESSFUL, AND WHAT WE MIGHT THINK
14	ABOUT LATER. BUT IF I LOOK AT SCIENCE, I THINK
15	WE'VE BEEN HIGHLY SUCCESSFUL. WE AND THE WORLD
16	COMMUNITY IN GENERAL, THERE HAS BEEN MUCH FASTER AND
17	MUCH MORE INFORMATION THAN I WOULD HAVE EVER
18	IMAGINED WHEN THIS PROJECT STARTED. SO TO ME I
19	THINK I WOULD RATE OUR SCORE PRETTY HIGH THERE.
20	IN TERMS OF THE STEM CELL HUB, I THINK
21	THERE'S A POWERFUL ARGUMENT THAT WE'VE CREATED A
22	LASTING INFRASTRUCTURE, SUE COMMENTED ON THIS, OF
23	SORT OF THE BEST IN THE WORLD IN TERMS OF AT LEAST
24	EQUALLY AS GOOD TO ANYPLACE ELSE IN THE WORLD TO
25	ADVANCE THIS TECHNOLOGY. IT'S PERMANENT. THESE
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1	PEOPLE CAME HERE. THEY'RE LIKELY TO STAY HERE
2	BECAUSE CALIFORNIA IS PRETTY STICKY ONCE YOU GET
3	THEM HERE.
4	SECOND, YOU'VE GOT ALL THESE INSTITUTES
5	THAT WERE ERECTED THAT ARE GOING TO BE HERE FOR A
6	LONG, LONG TIME. SO THE INFRASTRUCTURE PART OF THIS
7	STEM CELL HUB, I THINK, I WOULD RATE VERY HIGHLY.
8	THE MIDDLE BOX IS THE ONE THAT I THINK
9	WE'RE ALL LOOKING AT AND SAYING IN THE FUTURE WHAT
10	WOULD THAT LOOK LIKE. AND I THINK WE'D ALL LIKE TO
11	SEE THERAPIES THAT CHANGE THE LIVES OF INDIVIDUALS
12	AND CHANGE THE COST OF HEALTHCARE AND CHANGE THE
13	QUALITY OF EVERYTHING WE TALK ABOUT.
14	SO TO ME I'D GIVE US VERY HIGH SCORES ON
15	SCIENCE AND STEM CELL HUB. THE NEXT PHASE IS HOW DO
16	WE NOW TAKE THESE ASSETS AND PUT THEM INTO THAT
17	MIDDLE BOX.
18	MS. HUA: THANK YOU. ANYONE ELSE?
19	MR. SHEEHY: WELL, IS THERE ANY WAY TO PUT
20	UP THE OBJECTIVES OF THE ORIGINAL STRATEGIC PLAN,
21	WHICH WERE REALLY CONCRETE, SO MANY PROJECTS, FOR
22	INSTANCE, IN CLINICAL TRIALS, SO MANY PROJECTS PROOF
23	OF CONCEPT, ETC., AND KIND OF MATCH THOSE? BECAUSE,
24	YOU KNOW, IT WOULD BE GOOD TOO WHEN WE TALK ABOUT,
25	FOR INSTANCE IT WOULD BE HELPFUL TOO. WE KNOW WE

1	HAVE \$1.2 BILLION LEFT. WE HAVE SAID THAT WE BUILT
2	THIS INFRASTRUCTURE, AND THERE SEEMS TO BE AN
3	EMERGING CONSENSUS AROUND WHAT DR. BRYANT HAS SAID.
4	SO WHAT PORTION OF THAT \$1.2 BILLION NEEDS
5	TO GO OFF THE TABLE TO SUSTAIN THAT INFRASTRUCTURE?
6	WE KNOW THAT TRAINING PROGRAMS, PERHAPS SHARED LABS,
7	BRIDGES, IDENTIFYING THOSE PROGRAMS THAT WE NEED TO
8	CONTINUE TO FUND AT LEAST TO SOME POINT X INTO THE
9	FUTURE AND SAY, OKAY, WE NEED TO DO THIS DE MINIMIS
10	IN ORDER TO SUSTAIN OUR INFRASTRUCTURE.
11	AND THEN THIS IT'S HARD FOR ME TO DO
12	THIS WITHOUT TYING IT IN SOME WAY TO THE MONEY THAT
13	WE HAVE AVAILABLE TO US. IT'S ALSO HARD FOR ME TO
14	LOOK AT SCIENCE AND MEDICINE WITHOUT SOME MORE
15	CONCRETE METRICS, WHETHER IT'S PHASE I CLINICAL
16	TRIALS WE HOPE TO BE IN, WHETHER IT'S PROOF OF
17	CONCEPT, IND'S ACHIEVED, BUT TO HAVE REALLY CONCRETE
18	METRICS LIKE WE HAD IN THE FIRST STRATEGIC PLAN IS
19	VERY HELPFUL FOR ME TO BE ABLE TO ORGANIZE MY
20	THOUGHTS.
21	MS. HUA: WE ACTUALLY COMPLETELY AGREE
22	WITH THAT. AND THE WHOLE POINT OF TODAY IS ACTUALLY
23	TO GENERATE SOME OF THESE THOUGHTS TO ENSURE THAT WE
24	INCLUDE THEM, BUT THERE WAS A WHOLE SECTION ON
25	METRICS THAT WE WANTED TO PRESERVE AFTER AND MAYBE

1	PULL FOR A SEPARATE SECTION. THIS IS REALLY JUST TO
2	GET THE BIG IDEAS UP FRONT, AND THEN WE CAN START
3	WHITTLING IT DOWN INTO ITS INDIVIDUAL COMPONENTS.
4	CHAIRMAN THOMAS: I THINK WE NEED A FOURTH
5	COLUMN WHICH IS ENTITLED SUSTAINABILITY. AND THERE
6	ARE TWO ELEMENTS OF SUSTAINABILITY. THERE'S NO. 1,
7	WHERE WILL WE BE SEVERAL YEARS DOWN THE ROAD IN
8	TERMS OF POSITIONING CIRM TO CONTINUE FROM THE
9	STANDPOINT OF ADDITIONAL FUNDING, AND WE'RE
10	CONSIDERING VARIOUS ALTERNATIVES. THE SECOND
11	COMPONENT OF THAT IS HOW FAR ALONG ARE OUR GRANTEES
12	IN TERMS OF BEING ABLE TO SUSTAIN THEMSELVES THROUGH
13	ATTRACTING BIG PHARMA, VENTURE FUNDING, OR WHATEVER
14	SO THAT THEY WILL BE THE LEGACY OF CIRM, IF WE
15	DON'T HAVE ADDITIONAL FUNDING, WILL BE THAT MANY OF
16	THESE PROJECTS WILL HAVE ENABLED THEMSELVES TO
17	CONTINUE ALONG HAVING HAD ADDITIONAL FUNDING
18	SOURCES.
19	SO I WOULD RECOMMEND PUTTING A FOURTH
20	COLUMN IN THE SUSTAINABILITY AREA.
21	MS. HUA: DO YOU FEEL IT IS OUR ROLE TO
22	PROVIDE A ROAD MAP FOR THE OTHERS TO BE SUSTAINABLE
23	AS WELL? SO AS PART OF OUR MISSION IS TO PROVIDE
24	THE FUNDING, BUT ALSO THE GUIDANCE ON HOW THEY CAN
25	BE SELF-SUSTAINED.
	01

1	CHAIRMAN THOMAS: DUANE, I KNOW YOU
2	THOUGHT ABOUT THIS ISSUE. PERHAPS YOU'D LIKE TO
3	COMMENT ON THAT.
4	MR. ROTH: I THINK IT'S AN IMPORTANT
5	POINT. SO WHEN I LOOK AT SCIENCE AND STEM CELL HUB,
6	YOU WOULD LOVE TO SEE THAT BECOME EVENTUALLY
7	SUSTAINABLE BECAUSE MORE AND MORE INVESTMENT FROM
8	THE FEDERAL GOVERNMENT, NATIONAL INSTITUTE OF HEALTH
9	AND OTHERS, ARE COMING IN AND TAKING THAT TO THE
10	NEXT STEP. WE'D NEVER BE ABLE, NOR DID WE EVER
11	INTEND THAT OUR MONEY WOULD LAST INDEFINITELY TO
12	FUND THAT SCIENCE.
13	BUT I THINK ON THE RIGHT SIDE, THOSE
14	FACILITIES THAT HAVE BEEN BUILT AND THOSE PEOPLE WHO
15	HAVE BEEN BROUGHT HERE ARE MORE OR LESS PERMANENT.
16	AND WE NEED TO UNDERSTAND, TO JEFF'S POINT, WHAT IT
17	TAKES TO KEEP THAT AND TO KEEP THE SCIENCE GOING,
18	AND THAT'S A DISCUSSION WE SHOULD DRILL DOWN INTO.
19	FOR ME IT COMES BACK TO THAT MIDDLE BOX,
20	WHICH IS WHAT I THINK WE ALL BUILDING SCIENCE FOR
21	SCIENCE SAKE IS INTERESTING, BUT IT DOESN'T OFFER
22	WHAT WE HOPE FOR, AND THAT IS TO CHANGE THE LIVES OF
23	CITIZENS WHO SUFFER FROM A LOT OF DISEASES. SO THAT
24	MIDDLE BOX BECOMES THE ONE NOW THAT, AS WE THINK
25	FORWARD, FOR ME IS WHERE WE NEED TO DETERMINE HOW DO
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1	WE GET THAT SEEDED AND HOW DOES IT BECOME MORE OR
2	LESS SUSTAINABLE?
3	DR. PIZZO: I AGREE WITH THE POINTS THAT
4	HAVE BEEN MADE VERY MUCH SO BY DUANE AND OTHERS.
5	AND I JUST WANT TO AMPLIFY A LITTLE BIT ON THE
6	SUSTAINABILITY ARGUMENT BECAUSE I THINK THAT WHILE
7	WHAT I'M ABOUT TO SAY WON'T BE THAT APPEALING IN
8	TERMS OF THE STRATEGIC PLANNING EFFORT, I THINK IT'S
9	A REALITY. THAT IS, THAT MOST EFFORTS AT EARLY
10	CLINICAL TRIALS DON'T WORK, AND THEY TAKE A LOT
11	LONGER THAN ANY OF US ENVISION. OF COURSE, WE ALL
12	HOPE THAT IN THE NEXT COUPLE OF YEARS ANY ONE OF THE
13	CURRENT DISEASE PLANNING GRANTS, THOSE FUNDED OR
14	THOSE ABOUT TO BE FUNDED, WILL ACHIEVE A POSITIVE
15	RESULT. BUT HAVING, AS OTHERS OF US IN THIS ROOM
16	HAVE BEEN INVOLVED IN RESEARCH OR CLINICAL RESEARCH
17	FOR A LONG TIME, THE LIKELIHOOD OF THAT HAPPENING IS
18	STILL RELATIVELY SMALL.
19	AND TO ME, THEREFORE, SUCCESS IS ALSO THE
20	ABILITY TO NOT LOSE OUR INVESTMENT SO THAT WE CAN
21	CONTINUE TO DO THE WORK THAT WILL BE THE
22	BIDIRECTIONAL TRANSLATION THAT GOES FROM THE
23	CLINICAL EXPERIENCE BACK TO THE LAB TO FINE-TUNE THE
24	ISSUES THAT WE NEED TO MOVE THIS AGENDA FORWARD.
25	IF WE SET TOO FIRM AN END POINT OF
	0.3

1	EXPECTATION, AND I KNOW THE REASONS WHY WE'VE DONE
2	THAT, I THINK WE RUN THE RISK OF HAVING AN
3	INADVERTENT LACK OF SUCCESS BECAUSE WE'VE NOT BUILT
4	IN THE CONTINGENCIES FOR DEFINING THAT ELEMENT OF
5	SUCCESS.
6	MR. ROTH: TO PHIL'S POINT, THAT'S EXACTLY
7	WHAT I SEE IN THAT MIDDLE BOX. I DON'T BELIEVE
8	WE'RE AT SUSTAINABILITY THERE. THE INVESTMENTS HAVE
9	NOT COME EX-GOVERNMENT INTO THAT SPACE. AND SO WHAT
10	WE NEED TO DO WHAT DO WE NEED TO DO TO SEED THAT
11	SPACE. WE'VE SEEDED THE OTHER TWO PRETTY WELL.
12	WHAT WE'VE DONE IS CREATED COMPETITION AROUND THE
13	WORLD FOR FUNDING RESEARCH AND BUILDING FACILITIES,
14	AND MANY SCIENTISTS HAVE CHANGED THEIR CAREERS
15	BECAUSE OF WHAT WE'VE DONE HERE.
16	MS. GIBBONS: I THINK THIS IS A REALLY BIG
17	QUESTION OBVIOUSLY, AND THIS IS A BIG PART OF THE
18	STRATEGY MOVING FORWARD. WHEN YOU ASK THE QUESTION
19	WHAT DOES SUCCESS LOOK LIKE, ARE WE GOING TO
20	CONSIDER OURSELVES SUCCESSFUL AS WE SPEED TOWARDS
21	OUR OBSOLESCENCE? EVERYBODY HERE, AS HAS BEEN
22	POINTED TO, GOT ON BOARD TO GET IT DONE. AND I
23	DON'T THINK WE'LL CONSIDER OURSELVES DONE UNTIL WE
24	HAVE TREATMENTS AND CURES TO ALLEVIATE HUMAN
25	SUFFERING AND TO END THESE DISEASES.

1	SO TO THE EXTENT THAT THAT IS A MUCH
2	LONGER TARGET THAN PERHAPS ANYONE WOULD HAVE EVER
3	ANTICIPATED, I AGREE WITH WHERE YOU GUYS ARE GOING
4	WITH THIS BECAUSE THERE DOES, IN MY ESTIMATION, NEED
5	TO BE THIS VERY KEY SEPARATE COLUMN WHERE WE'RE
6	LOOKING SERIOUSLY AT WHAT DOES THAT MEAN AND HOW DO
7	WE INCORPORATE THE ASPECTS, JEFF, THAT YOU WERE
8	SPEAKING OF UNDER THAT SUSTAINABILITY DISCUSSION.
9	BUT I THINK IF YOU SAY ARE WE SUCCESSFUL,
10	WE WOULD HAVE TO SAY NO. IF WE CLOSE UP SHOP AND
11	TAKE DOWN OUR SHINGLES, DESPITE THE FACT THAT WE'VE
12	GOT THESE INSTITUTES THAT WILL OUTLAST THIS AGENCY,
13	I THINK THAT'S NOT GOING TO FEEL VERY SATISFYING.
14	SO I THINK THE SUSTAINABILITY IS THE KEY.
15	MS. SAMUELSON: I THINK THAT'S EXACTLY
16	RIGHT. I THINK ONE WAY OF LOOKING AT IT IS TO SEE
17	THIS AS THE ANSWER TO A QUESTION OR A DEMAND OR
18	SOMETHING THAT THE PEOPLE OF CALIFORNIA WERE MAKING
19	WHEN THEY VOTED SO OVERWHELMINGLY FOR THE
20	PROPOSITION. THAT'S THE WORLD IN WHICH WE LIVE.
21	AND THEY WERE SAYING WE WILL AGREE TO GIVE YOU THIS
22	MONEY, OUR MONEY, IF YOU WILL DO THIS. THAT IS,
23	PRODUCE AS SOON AS IS HUMANLY POSSIBLE, I DON'T
24	THINK THEY EXPECT MIRACLES, BUT THEY DO EXPECT A
25	GRAND RESPONSE TO THIS GRAND AMOUNT OF MONEY THAT WE

1	WERE GIVEN. AND THAT'S REALLY CLEAR THAT THAT'S THE
2	WAY THE PEOPLE LOOKED AT IT.
3	AND I THINK THERE ARE THINGS WE CAN DO
4	THAT ARE ON THAT SAME SCALE. I THINK WE HAVE TO
5	MAKE OUR WORK AND THE RESULTS FROM IT HOUSEHOLD
6	WORDS AND UNDERSTANDINGS. THEY HAVE TO KNOW WHAT
7	WE'RE DOING. THEY HAVE NO IDEA WHAT WE'RE DOING
8	RIGHT NOW. SO ON THE COMMUNICATION END OF THINGS,
9	THERE'S A LOT OF WORK TO DO. WE NEED TO BE ON T.V.
10	AND WE NEED TO BE ON THE NET AND JUST OMNIPRESENT
11	WITH WHAT WE'RE DOING.
12	AND WE HAVE TO HAVE, I THINK, A MORE
13	ROBUST TRANSLATIONAL APPARATUS SO THAT WE CAN
14	THERE'S THAT ONE SLIDE THAT SHOWS THE CHEVRON, THE
15	ONE WHERE ALL THE ARROWS ARE GOING OVER. IT SEEMS
16	TO ME THAT IT'S, AND I'M WONDERING IF ANYBODY ELSE
17	FELT THIS WAY, THAT IT'S MORE THERE IS THAT ROW, BUT
18	THEN THE ARROWS KIND OF CYCLING BACK AND COMING
19	THROUGH ALL THE WAY BACK TO BASIC RESEARCH BECAUSE
20	WE'RE GOING TO HAVE ONE THING THAT SUCCESS IS
21	GOING TO LOOK LIKE IS FAILURES. THERE ARE GOING TO
22	BE LOTS OF POINTS IN THE TRANSLATIONAL EFFORTS AND
23	CLINICAL EFFORTS WHERE THEY DON'T ACHIEVE THE
24	ULTIMATE GOAL THEY SOUGHT. BUT THAT'S GOING TO
25	TEACH US WHAT THE TRUE PROCESS IS, AND IT'S GOING TO

1	FILL A LOT OF GAPS OF UNDERSTANDING. AND THOSE WILL
2	BE WONDERFUL DEVELOPMENTS THAT WE CAN EDUCATE THE
3	PUBLIC ABOUT, WHICH WILL ALL BE PART OF OUR
4	REMARKABLE ACHIEVEMENT THAT WE'VE MADE FOR SPENDING
5	THIS MONEY.
6	I THINK THE FINAL THING IS THEY HAVE BEEN
7	ASKING US TO BE THE GLOBAL LEADER AND LOTS OF PEOPLE
8	HAVE, THE EXTERNAL ADVISORS FOR ONE. AND I THINK
9	WE'VE GOT TO RISE TO THAT CHALLENGE, AND THAT
10	INVOLVES A LOT OF OTHER THINGS. BUT ANOTHER PIECE
11	OF SUCCESS IS THAT WE CONTINUE THIS ENTERPRISE
12	EVOLVING INTO THE ROLE OF GLOBAL LEADER.
13	MR. SHESTACK: I ALWAYS GET A LITTLE
14	CONFUSED BETWEEN STRATEGY AND TACTICS. SO I WOULD
15	SAY TWO SEPARATE THINGS. STRATEGICALLY ONE THING IS
16	WE HAVE TO MAKE SURE THAT WITH OUR REMAINING MONEY
17	WE CREATE RESOURCES THAT CAN CONTINUE MAKE OTHER
18	PEOPLE BE ABLE TO CONTINUE DOING THE SCIENCE IN THE
19	MOST INEXPENSIVE WAY WHERE THERE ARE SHARED
20	RESOURCES THAT EXIST AND THAT CAN BE TAKEN UP BY A
21	COMMUNITY OF UNIVERSITIES IN CALIFORNIA IN CASE
22	WE'RE NOT RENEWED.
23	BUT THE OTHER THING IS I THINK EVERYBODY
24	WOULD AGREE THERE WILL STILL BE THINGS BY 2016 THAT
25	HAVE NOT BEEN FIXED. SO IN THAT REGARD, NOBODY

1	ACTUALLY REALLY SAYS IT, SO WHAT WE REALLY WANT IS
2	TO SHOW IS TO BE RENEWED, FIND A WAY TO HAVE
3	RENEWED FUNDING BECAUSE WE BELIEVE OUR WORK IS GOOD
4	AND WE'RE MAKING SOME PROGRESS.
5	SO THEN IT DOESN'T GO IN THE STRATEGIC
6	PLAN. MAYBE IT GOES IN THE TACTICAL PLAN. WHAT WE
7	NEED IS LIKE A HIT. WHAT EVERYBODY AT A CERTAIN
8	POINT HAS TO DO IS SORT OF LOOK AT WHAT WE'RE
9	FUNDING WITH A KIND OF COLDER EYE AND SAY WHAT'S
10	MOVING FASTEST, WHERE CAN WE GET RESULTS THAT WE
11	CAN IF THEY'RE GETTABLE. IF THEY'RE NOT, THEN WE
12	CAN PACK UP. WHERE WE CAN GET RESULTS WE CAN
13	SHOW THE PUBLIC THAT THIS IS A PROMISING LINE OF
14	WORK AND RESEARCH AND WILL IN SHORT TIME REDUCE
15	SOME, BUT NOT ALL, HUMAN SUFFERING. IDENTIFYING THE
16	MOST PROMISING AREA IS AN IMPORTANT PART OF THE
17	TACTICS OF A STRATEGIC PLAN.
18	DR. JUELSGAARD: JUST TO FOLLOW UP ON THAT
19	BECAUSE I AGREE VERY MUCH WITH THE COMMENTS THAT
20	WERE JUST MADE. TWO THINGS. FIRST OF ALL, I WOULD
21	MAKE THE ASSUMPTION THAT WE WON'T BE ABLE TO
22	CONTINUE THE FUNDING. AS MUCH AS WE MIGHT HOPE TO,
23	I THINK IT WOULD BE A MISTAKE THAT SOMEHOW THIS IS
24	GOING TO START WITH THE NOTION THAT WE'RE GOING HAVE
25	FUNDING BEYOND WHEN THE ORIGINAL \$3 BILLION RUNS
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1	OUT, AND BUILD PLANNING AROUND THAT. IT'S GREAT IF
2	WE CAN EXTEND THAT, BUT I THINK IT WOULD BE A
3	MISTAKE IN TERMS OF STRATEGIC PLANNING AT THIS POINT
4	TO COUNT ON THAT HAPPENING.
5	SO JUST LET'S ASSUME WE HAVE \$3 BILLION TO
6	SPEND, AND WE'VE NOW GOT 1.3 BILLION LEFT. SO
7	WHAT'S THE MOST EFFECTIVE WAY TO SPEND IT FOR WHAT
8	IT IS THAT WE HOPE TO ACHIEVE. AND I AGREE THAT THE
9	THING WE HOPE TO ACHIEVE IS TO ACTUALLY BE ABLE TO
10	DEMONSTRATE THE CURES AS IN THE MISSION STATEMENT.
11	IT'S THE LAST PART OF IT, WHICH TO ME IS THE MOST
12	IMPORTANT PART, IS TO CURE DISEASE. SO REALLY LET'S
13	INCREASE THE ODDS AS MUCH AS WE CAN OF FINDING THAT
14	OUTCOME IN A PARTICULAR DISEASE WITH A PARTICULAR
15	FORM OF STEM CELL THERAPY.
16	SO, ANYWAY, THOSE ARE MY THOUGHTS ON HOW
17	TO APPROACH THE STRATEGIC PLAN.
18	DR. PIZZO: WELL, I WANT TO JUST IT'S
19	HARD TO DISAGREE WITH YOU ON THAT AS A DEFINED
20	SUCCESS. I THINK ALL OF US RECOGNIZE THAT IF WE
21	HAVE A TREATMENT OR AN IMPACT THAT DOES EITHER CURE
22	OR DEMONSTRATE FULLY THAT STEM CELL THERAPIES WORK,
23	THAT IS THE END POINT THAT WE'RE ALL LOOKING FOR.
24	BUT I THINK THE ISSUE THAT I'M STRUGGLING WITH, AND
25	IT'S NOT THAT I HAVE A FULL ANSWER TO THIS, IS ALSO

1	DEFINING SUCCESS AS A STEP TOWARD THAT OR AT LEAST
2	HAVING THE CAVEAT THAT WE'VE BUILT THAT IN BECAUSE
3	WE DON'T WANT THIS TO BE A BINARY FUNCTION. WE
4	EITHER HAVE IT OR WE DON'T HAVE IT. BECAUSE THE
5	PROBABILITY, JUST THE BASIS OF HOW SCIENCE GOES, IS
6	THAT WE WON'T HAVE THAT HOLY GRAIL. WE MIGHT HOPE
7	TO DO IT, AND IF WE DO, IT'S TERRIFIC, BUT WE SHOULD
8	BE DEFINING AS WELL THE STEPS TOWARD THE SUCCESS.
9	AND THEY COULD BE MILESTONES THAT WE'RE BUILDING IN
10	IN TERMS OF INSIGHTS THAT ALLOW US TO BELIEVE THAT
11	IF WE CONTINUE MOVING DOWN THAT PATHWAY, THAT WE
12	WILL GET TO THAT ULTIMATE SUCCESS.
13	I THINK ACTUALLY, STEVE, THAT THAT'S WHERE
14	I ALLUDED TO EARLIER AND I THINK OTHERS HAVE AS WELL
15	THAT TO ME SUCCESS IS THAT WE'VE BEEN ABLE TO
16	PERSUADE THE CITIZENS OF CALIFORNIA THAT THIS
17	INVESTMENT IS WORTH CONTINUING. THIS IS A UNIQUE
18	AND SPECIAL EXPERIMENT, AND IT'S NOT THE
19	LIKELIHOOD IS IT'S GOING TO GO ON FOR MANY MORE
20	YEARS THAN THE CURRENT ALLOTMENT OF FUNDING IS. AND
21	THAT'S WHERE ANOTHER ELEMENT OF SUCCESS HAS TO
22	RESIDE BECAUSE THE FEAR THAT WE ALL HAVE IS THAT OUR
23	INVESTMENTS TO DATE WILL BE SQUANDERED IF WE'RE NOT
24	ABLE TO CARRY THAT EFFORT FORWARD.
25	THERE'S NO PLACE ELSE IN THE UNITED
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1	STATES, TO THE THIRD POINT, THAT'S GOING TO BE ABLE
2	TO PICK UP THAT BALL. SO WE HAVE TO BE ABLE TO DO
3	THAT, AND WE HAVE TO BE ABLE TO PERSUADE THE
4	COMMUNITY THAT THERE'S A SET OF MOVABLE ACHIEVEMENTS
5	THAT GET TO THE ULTIMATE SOLUTION, BUT MAY NOT BE
6	THE ULTIMATE CURATIVE SOLUTION BY THE TIME 2016
7	HAPPENS.
8	CHAIRMAN THOMAS: CAN I JUST BUILD ON THAT
9	AND WHAT JOAN SAID? THAT IS ONE OF THE MAJOR POINTS
10	OF THE COMMUNICATIONS EFFORT THAT WE'RE GOING TO BE
11	DISCUSSING LATER AT THE MEETING HERE, AND TO EDUCATE
12	THE PUBLIC THAT THIS IS AN INCREMENTAL STORY, BUT
13	ONE OF CONTINUING MOVEMENT FORWARD THAT IS ACHIEVING
14	MILESTONES OF DIFFERENT NOTE THAT ARE, WE HOPE,
15	INEXORABLY MOVING TOWARDS THERAPIES AND CURES.
16	AND IF WE DO OUR JOB AND HAVE AN
17	UNRELENTING EDUCATIONAL COMMUNICATIONS PROCESS, WE
18	WILL GET THAT POINT ACROSS AND I DO BELIEVE WILL
19	GENERATE GENUINE ENTHUSIASM AND UNDERSTANDING
20	AMONGST THE POPULACE FOR WHAT WE'RE DOING HOPEFULLY
21	TOWARDS THE END, AMONG OTHER THINGS, OF GETTING SOME
22	ADDITIONAL FUNDING.
23	DR. JUELSGAARD: COULD I JUST ASK A
24	QUESTION? SO TO WHAT EXTENT I WANT TO GO BACK TO
25	WHAT I ORIGINALLY FOCUSED ON, WHICH IS THE
	101

1	CONTINUATION OF FUNDING. AT THIS POINT WE DON'T
2	HAVE THAT AS THE CASE. SO TO WHAT EXTENT IS THIS
3	STRATEGIC PLAN GOING TO BE BUILT ON EITHER THE
4	ABSENCE OF SUCH FUNDING IN THE FUTURE OR THE
5	PRESENCE OF IT?
6	MR. SHESTACK: ISN'T THIS JUST PLANNED FOR
7	THE NEXT FOUR YEARS?
8	DR. JUELSGAARD: RIGHT. THAT WE WILL
9	ULTIMATELY EITHER BE ABLE TO RAISE MORE MONEY OR
10	NOT. I THINK THAT NEEDS TO BE CONSIDERED AS PART OF
11	HOW WE THINK ABOUT THE STRATEGIC PLAN OVER THE NEXT
12	FOUR YEARS. SO ARE WE GOING TO HAVE MONEY BEYOND
13	THAT OR NOT BECAUSE THIS IS THAT'S GOING TO BE AT
14	SUNSET OR WE'RE STILL GOING TO BE AT MIDDAY. WE
15	NEED TO FIGURE THAT OUT ONE WAY OR THE OTHER AND
16	WORK THAT INTO THE PLAN WHAT OUR ASSUMPTION IS GOING
17	TO BE AROUND THAT.
18	MS. HUA: THAT'S AN EXCELLENT QUESTION. I
19	ACTUALLY WANTED TO
20	MS. SAMUELSON: THAT'S FOR US TO DECIDE,
21	ISN'T IT?
22	DR. FEIGAL: THAT MIGHT BE HARD FOR
23	CAMPBELL TO ANSWER, BUT I THINK WHAT WE'RE THINKING
24	OF IS GIVEN THE TIME FRAME THAT WE THINK WE HAVE,
25	WHAT WOULD BE THE STRATEGIC IMPERATIVES TO MOVE
	100

1	FORWARD. I THINK THE ENVISIONING IS THE HOPE THAT
2	IT WILL CONTINUE TO BE SUSTAINED, BUT I THINK IN
3	PRACTICAL MATTERS, WE SHOULD THINK OF THE TIME
4	PERIOD THAT WE'RE WORKING IN, BUT WE ARE ALSO OPEN
5	TO YOUR POINT OF VIEW AS TO HOW TO DO THIS.
6	MS. HUA: THAT'S WHAT I WAS GOING TO ASK.
7	WHAT DO YOU ALL THINK? SHOULD WE WRITE THE PLAN
8	WITH TWO SCENARIOS IN PLACE, OR JUST THE ONE
9	SCENARIO, WHICH IS FUNDING WILL CEASE AFTER THE TIME
10	ALLOTMENT?
11	MR. ROTH: I WOULD COMMENT THAT I DON'T
12	SEE A DISCONNECT BETWEEN BOTH POSITIONS HERE. IF
13	YOU DO THE RIGHT THING AT THE POINT IN TIME WHEN WE
14	HAVE TO DO THE NEXT PIECE, THEY'RE BOTH I THINK
15	THEY'RE ALIGNED. IF THERE'S A CASE FOR CONTINUING
16	SUPPORT, IT WILL BE MADE. BUT TO REACT THAT WE HAVE
17	TO HAVE THIS HOME RUN OR WE'RE DOOMED I DON'T THINK
18	IS TRUE. I THINK WE SHOULD, AND STEVE'S POINT IS
19	WELL TAKEN, YOU HAVE TO ASSUME THERE'S NO MORE
20	FUNDING. IF TODAY WAS THE DAY WE'RE OUT OF MONEY,
21	THE STATE, I DON'T CARE WHAT YOU DO, YOU WOULDN'T
22	PASS THE BILL. BUT THAT COULD CHANGE IN THE NEXT
23	TWO OR THREE YEARS, AND WE'LL BE IN A POSITION, IF
24	THERE'S MORE MONEY NEEDED, TO SUSTAIN THESE KINDS OF
25	CONTINUING OPERATIONS. THEN YOU CAN BRING THAT
	103

1	CASE. WE SHOULD LOOK AT ALTERNATIVE FINANCING
2	MECHANISMS AND A WAY TO LEVERAGE. ALL OF THOSE
3	THINGS, I THINK, SHOULD BE PART OF THE PLAN, AND
4	THEY DON'T REALLY SAY WE DO THIS OR WE DO THAT.
5	THEY'RE KIND OF ALIGNED.
6	MS. GIBBONS: I AGREE WITH THAT, DUANE. I
7	THINK THESE ARE PARALLEL TRACKS. AND I THINK WE
8	DEAL RESPONSIBLY WITH THIS FINITE AMOUNT OF MONEY
9	THAT WE HAVE. WE CONTINUE TO REFINE THAT AND WORK
LO	INTO THE STRATEGY ADJUSTMENTS THAT WE WANT TO MAKE
L1	WITH REGARD TO THE PORTFOLIO AND THE ASPECTS ALONG
L2	THAT PIPELINE THAT WE WANT TO REALLY PUT OUR FOCUS
L3	ON. WE'VE GOT THE COMMUNICATIONS PLAN COMING UP.
L4	BUT I DON'T THINK THAT IT TAKES OUR FOCUS AWAY FROM
L5	THAT TO BE ABLE TO ALSO PUT WITHIN THE STRATEGY
L6	PERHAPS THIS SEPARATE CHANNEL OF SUSTAINABILITY,
L7	WHICH CAN RUN CONCURRENTLY. AND I DO THINK THEY'RE
L8	PARALLEL, AND I WOULD HATE TO SEE US DECIDE AS PART
L9	OF THIS DISCUSSION THAT WE HAVE TO CHOOSE ONE OVER
20	THE OTHER. I REALLY DON'T FEEL THAT WE DO.
21	DR. TROUNSON: JUST CAN I ASK MAYBE FOR A
22	CLARIFICATION OR MAYBE SOME HELP FROM DAVID BRENNER,
23	SUE, AND PHIL. ONE OF THE CONCERNS THAT I HAVE, AND
24	I THINK THERE WAS A CONCERN SORT OF DEMONSTRATED BY
25	NIH, IS IF WE HAPPEN TO DEPART, WHAT DOES THE CLIFF

1	LOOK LIKE FOR YOU GUYS BECAUSE, YOU KNOW, IT COULD
2	BE A REALLY FEARFUL CLIFF OF HOW DO YOU MAKE UP FOR
3	SUPPORT OF A REALLY LARGE CADRE OF TOP PEOPLE. SO I
4	DO THINK IT NEEDS SOME THOUGHT ABOUT WHAT MIGHT
5	HAPPEN, TO BE HONEST, BECAUSE WE DON'T REALLY WANT
6	TO PLUNGE YOU INTO THE DEPTHS OF REAL DIFFICULTY
7	JUST BECAUSE WE FLOAT OFF THE SCENE.
8	SO WITH ALL RESPECT, I THINK WE NEED TO AT
9	LEAST THINK ABOUT THAT.
10	DR. BRYANT: I AGREE AND I ALSO THINK THAT
11	WE DON'T WANT TO SEE A MASS EXODUS OF STEM CELL
12	RESEARCHERS FROM CALIFORNIA AT THE END OF THIS
13	FUNDING. MY MAIN CONCERN IS THAT IF THERE IS
14	NOTHING THAT KIND OF LIKE SOFTENS THE BLOW, PEOPLE
15	AREN'T GOING TO STICK AROUND VERY LONG WITHOUT
16	FUNDING.
17	DR. PIZZO: IT'S NOT AS IF THEY'VE GOT A
18	LOT OF PLACES TO GO. BUT I THINK WHAT THEY WILL DO
19	IS SWITCH THEIR AREAS OF RESEARCH TO OTHER VENUES
20	THAT ARE MORE FUNDABLE.
21	CHAIRMAN THOMAS: EMILY, MAY I JUST ASK.
22	IT'S TOUGH FOR FOLKS ON THE PHONE TO GET A WORD IN
23	EDGEWISE HERE. IF THERE ARE ANY QUESTIONS OR
24	COMMENTS FROM ALL OF YOU LISTENING IN?
25	MS. FEIT: NOT RIGHT NOW.
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DR. VUORI: VERY INTERESTING CONVERSATION,
BUT I THINK WE ARE FINE IN FOLLOWING THE FLOW RIGHT
NOW.
MR. ROTH: JEFF, YOU ASKED A VERY
IMPORTANT POINT ABOUT THE PREVIOUS STRATEGIC PLAN
AND SORT OF THE SIMPLE GOALS THAT WERE SET BACK
THERE, WHICH I AGREE WITH. THEY WERE WELL DESIGNED
AND I THINK APPROPRIATE. BUT I'M REMINDED THAT ON
THE COVER THERE WAS A QUOTE, AND I DON'T RECALL IT
VERBATIM, BUT IT WAS ROMAN REED WHO SAID SOMETHING
LIKE STEM CELLS TO CURES. AND, AGAIN, WHEN YOU LOOK
AT THOSE THREE AREAS, WE'VE DONE A LOT OF THE
UNDERPINNING TO MOVE THE STEM CELL SCIENCE TO THE
POINT WHERE WE CAN AT LEAST BE TALKING ABOUT
CLINICAL TRIALS AND CURES. THAT WAS NOT THE CASE
WHEN THIS ORGANIZATION CAME TOGETHER.
MR. SHEEHY: I AGREE. WHAT I LIKED ABOUT
THAT PLAN WAS THE VERY CONCRETE METRICS. AND TO
LOOK AT THAT AND THEN MEASURE THAT AGAINST WHAT
WE'RE TRYING TO DO GOING FORWARD, I THINK, IS
IMPORTANT.
ONE OF THE THINGS THAT'S KIND OF STRIKING
IS HOW OFTEN NIH IS COMING UP IN THIS DISCUSSION.
AND IT SEEMS TO ME IF THE BETTER THAT WE CAN
INTEGRATE OUR STRATEGIC PLANNING WITH SOME SORT OF
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MORE FORMAL DIALOGUE WITH THE NIH, THE BETTER THIS
ENTIRE PROCESS WILL BE. WE'RE KIND OF MAKING
ASSUMPTIONS. AND ONE OF THE THINGS THAT I THINK
YOU'RE GOING TO SAY A LOT MORE ABOUT IT A LOT MORE
ARTICULATELY THAN I WILL, DR. PIZZO, BUT I JUST WANT
TO KNOW. ONE OF THE THINGS WHEN WE TALK ABOUT
SUSTAINABILITY IS ONE BIG QUESTION THAT'S COME UP
ALREADY IS HOW DO WE FIT WITH THE NIH BECAUSE NIH
EXISTS. YET I CAN SAY RIGHT NOW THAT IF WE DID
NOTHING ELSE BUT SUSTAIN THE INFRASTRUCTURE WE BUILT
AND CONTINUE TO DO BASICALLY OUR TRANSLATIONAL
RESEARCH, THAT WE PROVIDE A CRITICAL ROLE IN WHAT
THE NIH IS TRYING TO ACCOMPLISH.
THEY SET UP THE CTSI CORE FACILITIES UP
AND DOWN THE STATE. WE'RE FEEDING PEOPLE INTO THAT
INFRASTRUCTURE THAT THEY REALLY PROBABLY DON'T HAVE
THE MONEY TO DO. THEY'RE THERE ON THE CLINICAL SIDE
TO PICK US UP. AGAIN, THIS ALMOST HAS TO BE IT
CAN'T BE REALLY SO ORGANIC AS IT NEEDS TO BE MORE
STRATEGIC AND ORGANIZED.
DR. PIZZO: JEFF, YOU SAID IT PERFECTLY.
I THINK THAT THE FACT IS THE INVESTMENTS FROM CIRM
HAVE CREATED AN INFRASTRUCTURE OF SCIENCE THAT'S
UNPARALLELED ANYWHERE IN THE WORLD RIGHT NOW IN STEM
CELL AND REGENERATIVE MEDICINE. THE NEXT PHASE, THE

1	PHASE THAT WE'RE CURRENTLY WORKING ON OF TRANSLATING
2	THOSE DISCOVERIES INTO CLINICAL TRIALS, IS AN
3	ENORMOUSLY EXPENSIVE VENTURE. AND THAT'S WHERE THE
4	UNIQUE PARTNERSHIP, IF WE COULD FIGURE IT OUT, COULD
5	BECOME HIGHLY LEVERAGED.
6	I THINK THE BIGGEST WORRY THAT I HAVE, AND
7	IT'S NOT JUST TRUE OF US, BUT IT'S ALSO TRUE, QUITE
8	HONESTLY, OF WHAT'S HAPPENING AT THE NIH, WHICH IS
9	BECOMING, IN MY MIND, SAY THIS CAREFULLY, BUT TOO
10	TRANSLATIONAL IN ITS CONCEPT IS THAT IT LOSES THE
11	INSIGHT, THE ABILITY TO GET INSIGHTS FROM BASIC
12	RESEARCH.
13	BASIC RESEARCH HAS OVER AND OVER AGAIN
14	PROVEN TO CREATE NEW PATHWAYS THAT WE WOULDN'T HAVE
15	OTHERWISE IMAGINED. AND I HOPE THAT WE DON'T INVEST
16	ALL OF OUR RESOURCES IN WHAT MIGHT BE KIND OF A BEST
17	OR EVEN A LONG SHOT AND HAVE NOTHING LEFT TO FIGURE
18	OUT WHAT WENT WRONG BECAUSE THE HIGHLY PREDICTABLE
19	THING IS THAT SOMETHING IS GOING TO GO WRONG.
20	THAT'S WHY THE PARTNERSHIP MODEL THAT YOU'VE JUST
21	REFERRED TO BECOMES SO IMPORTANT BECAUSE IF WE COULD
22	LEVERAGE, NOT AGAINST NIH FUNDING, OUR RESEARCH
23	BECAUSE THEY'RE NOT GOING TO DO THAT IN A
24	COMPETITIVE WAY, BUT IN FUNDING THE CLINICAL TRIAL
25	RESULT INFRASTRUCTURE THAT WE'D OTHERWISE HAVE TO

PUT IN PLACE AND FIGURE OUT HOW TO DO BECAUSE OF THE
POTENTIAL FOR, IF A STUDY, AND I CAN SAY THIS
PERSONALLY, IF A STUDY GETS DONE AT THE NIH, IT
OPENS UP MUCH CLOSER CONNECTIONS WITH THE FDA. IT
CREATES A PARTNERSHIP MODEL THAT'S REALLY QUITE
UNIQUE. AND IF WE CAN BE CREATIVE IN DOING THAT, WE
CAN BREAK DOWN BARRIERS, LEVERAGE OUR DOLLARS,
POTENTIALLY EXTEND OUR LIFE SPAN, AND CREATE MORE OF
A NATIONAL PROSPECTUS ON WHAT WE'RE DOING WILL AT
THE END OF THE DAY CREATE OTHER FUNDING SOURCES THAT
WILL ALLOW US TO GO FORWARD.
MS. HUA: GREAT.
MS. SAMUELSON: AND IF WE ARE SUCCESSFUL
AT COMMUNICATING ALL OF THIS TO CALIFORNIANS AND
BEYOND, IF WE ACCEPT THE CHALLENGE OF BEING A GLOBAL
LEADER AND SAY, OKAY, WE'RE GOING TO PARTNER, WE'RE
GOING TO FUND IN CALIFORNIA, BUT WE'RE GOING TO
PARTNER WITH THE BEST AND BRIGHTEST SCIENTISTS
THROUGHOUT THE WORLD SO THAT WE'RE ADVANCING FROM
THE POINT OF ALL OF THEIR DISCOVERIES, NOT JUST OUR
OWN, SO THAT WE KNOW WHERE WE'RE AT SCIENTIFICALLY
IN ALL THESE AREAS. AND IF THE PEOPLE OF CALIFORNIA
UNDERSTAND IT AND PEOPLE BEYOND BECAUSE THEY ARE
LOOKING AT STEM CELL T.V. AND REGENMED.COM AND MAYBE
WE'VE GOT A NEW SOAP OPERA THAT JON AND LEEZA

1	PRODUCE THAT'S THE SECOND GENERAL HOSPITAL THAT'S
2	GOT A CLINICAL TRIAL IN IT, IT'S GOT HARRIED
3	TRANSLATIONAL RESEARCHERS WHO ARE TRYING TO COME UP
4	WITH A HYPOTHESIS, AND THEY THINK THEY HAVE ONE, AND
5	THEN MOUSE DIES AND
6	MS. GIBBONS: ONLY IF YOU PLAY YOURSELF,
7	JOAN.
8	DR. KRONTIRIS: I JUST WANT TO REFLECT
9	BACK ON THE CONVERSATION SO FAR IN TERMS OF THE
10	TENSION BETWEEN ASSET ALLOCATION TOWARD THE
11	SCIENTIFIC ACTIVITIES OBVIOUSLY IT GOES WITHOUT
12	SAYING POINT IN TERMS OF THE POINT THAT PHIL WAS
13	MAKING EARLIER, UNTIL WE HAVE A MUCH MORE
14	COMPREHENSIVE MECHANISTIC UNDERSTANDING OF BOTH
15	DISEASE AND STEM CELLS, IN ANY WAY DEEMPHASIZING THE
16	BASIC SCIENCE ACTIVITIES JUST DOESN'T MAKE SENSE,
17	AND CERTAINLY WE'RE ON A SUCCESSFUL PATH THERE.
18	ON THE OTHER HAND, WE NEED FOR PATIENTS
19	FOR THE VISIBILITY AND FUTURE SUCCESS OF THE PROGRAM
20	TO BE HAVING CLINICAL SUCCESSES AS WELL. AND THE
21	IDEA OF TRYING TO TARGET SOMETHING, I THINK,
22	PROBABLY WOULDN'T APPEAL TO ME AS MUCH BECAUSE I
23	THINK THAT SUCCESSFUL CLINICAL ACTIVITIES WILL OUT.
24	AND WE DON'T HAVE TO BET ON THOSE HORSES SO MUCH.
25	AS TIME GOES ON, WE'LL SEE THAT.

1	BUT I THINK THERE IS A PARTICULAR AREA OF
2	EMPHASIS THAT THIS ORGANIZATION CAN EMPHASIZE THAT
3	MIGHT MAKE ALL THE WORLD DIFFERENT. I'M REFERRING
4	TO THE RESOURCES OF THE CLINICAL CENTER BEING ABLE
5	TO LEVERAGE THOSE IS ONE THING CERTAINLY, BUT IN A
6	MORE LOCAL LEVEL, THERE ARE JUST TREMENDOUS ISSUES
7	THAT RELATE TO TAKING METHODS, CELLS, TARGET
8	STRUCTURES THE NEXT STEP INTO CLINICAL AND
9	TRANSLATIONAL ACTIVITY, WHICH I HAVE TO SAY AS
10	WONDERFUL AS THE SCIENCE IS IN THIS STATE AND AROUND
11	THE COUNTRY, THERE'S STILL A WOEFUL LACK OF
12	INFRASTRUCTURE THAT SUPPORTS TAKING A SCIENTIST'S
13	IDEA INTO THE NEXT COUPLE OF STEPS AND THEN INTO
14	TRANSLATIONAL AND EARLY CLINICAL WORK.
15	THAT SPHERE IS SOMETHING THAT THIS
16	ORGANIZATION COULD REALLY SUPPORT THAT IS NOT EXTANT
17	NOW IN OUR VARIOUS UNIVERSITY AND INSTITUTE
18	SETTINGS. AND IN THAT WAY, WITHOUT PICKING
19	SOMETHING, BUT SIMPLY REDUCING THE THRESHOLD BETWEEN
20	A SCIENTIST'S IDEA AND PUSHING IT ALONG INTO
21	TRANSLATIONAL DEVELOPMENT, THAT IS WHERE I THINK
22	THIS ORGANIZATION COULD MAKE A TREMENDOUS IMPACT,
23	AND WE WOULD SEE THAT IN METRICS THAT I THINK OUGHT
24	TO BE ADOPTED, PARTICULARLY IND DEVELOPMENT.
25	SO I WOULD ARGUE THAT WHILE ON THE ONE

Т	HAND YOU WANT TO BE PUSHING ON CLINICAL TRIALS, I
2	THINK IT'S MORE PRACTICAL TO BE FOCUSING ON THE
3	REQUIRED INFRASTRUCTURE FOR THOSE. AND I DON'T
4	THINK THEY EXIST YET TO BE EFFICIENT AS WE WOULD
5	LIKE THEM TO BE.
6	MS. SAMUELSON: DO YOU MEAN TRANSLATIONAL
7	EXPLORATIONS BASICALLY.
8	DR. KRONTIRIS: YES. THE POINT OF
9	GENERALLY, LOOSELY WE WOULD SAY BEING ABLE TO
10	DEVELOP PROCESSES FOR THE DEVELOPMENT OF PRODUCTS,
11	WHATEVER, LESS SO FOR STEM CELLS, BUT TOXICITY IF
12	THEY ARE SMALL MOLECULES THAT ARE BEING USEFUL IN
13	THIS, ALL OF THE MEDICINAL CHEMISTRY AND TOXICITY
14	STUDIES AND TARGET EVALUATIONS, ALL THOSE KINDS OF
15	THINGS HAPPEN BEYOND THE BASIC SCIENCE LABORATORY
16	SETTING, AND THEY ARE WOEFULLY INADEQUATE, NOT HERE
17	IN CALIFORNIA, ANYWHERE ACROSS THE COUNTRY.
18	DR. PIZZO: I AGREE WITH THAT STATEMENT
19	TOTALLY. AND I THINK THAT ANY OF OUR INSTITUTIONS
20	WILL STRUGGLE TO GET THOSE KINDS OF ELEMENTS IN
21	PLACE. AND EVEN IF WE FORMED A CONSORTIA, WE WOULD
22	STILL STRUGGLE, BUT THEY ARE THAT IS WHAT IS
23	AVAILABLE POTENTIALLY THROUGH THE INTRAMURAL PROGRAM
24	AT THE NIH. I CAN SAY THIS AGAIN FROM DIRECT
25	EXPERIENCE, HAVING WORKED THERE FOR A LONG TIME.

1	YOU CAN DO ALL THE THINGS THAT YOU JUST DESCRIBED
2	FROM TARGET DISCOVERY TO MEDICINAL CHEMISTRY TO
3	TOXICITY TO ALL OF THE PHASE I PRECLINICAL STUDIES
4	INTO EARLY CLINICAL TRIALS, AND YOU CAN DO IT
5	WITH IF WE DO THIS WISELY, WE CAN DO IT WITH
6	SUPPORT THAT WOULD COME REALLY QUITE UNIQUELY.
7	SO I DON'T WANT TO OVERSTATE IT, BUT
8	YOU'VE HIT ON WHAT I THINK IS A REAL CHALLENGE FOR
9	US. MANY OF OUR INSTITUTIONS, INCLUDING OUR OWN,
10	RIGHT NOW IS STRUGGLING TO TRY AND GET THINGS TO THE
11	PHASE I, II LEVEL, IF YOU WILL. IT'S NOT OUR SWEET
12	SPOT. I THINK THAT THERE ARE OTHER PROGRAMS THAT
13	CAN DO THAT, AND I THINK THIS JUST DESERVES AS PART
14	OF THIS EFFORT MORE CONSIDERATION.
15	MS. SAMUELSON: I WANT TO FINISH JUST THE
16	ENDING OF THAT RUN-ON SENTENCE THAT LEEZA MADE ME
17	SPEECHLESS ABOUT FOR A SECOND THERE. IF WE DO THAT
18	AND WE COMMUNICATE IT TO THE PEOPLE OF CALIFORNIA
19	AND BEYOND IN AN INTELLIGIBLE AND SOMETIMES MAYBE
20	EVEN ENTERTAINING WAY, THEY ARE GOING TO UNDERSTAND
21	THIS AND THEY CAN TELL OUR STORY ABOUT THOSE GAPS IN
22	UNDERSTANDING AND INFRASTRUCTURE. AND THEN MAYBE WE
23	LOOK TO AN OLD MODEL LIKE THE MARCH OF DIMES.
24	THAT'S WHAT FUNDED THE POLIO VACCINE, AND IT WAS JOE
25	BLOW PUTTING HIS DIME INTO A BOX. AND WE COULD HAVE

1	BOXES ALL OVER THE WORLD. AND IF WE BECOME THE
2	GLOBAL LEADER THAT LOTS OF PEOPLE WANT US TO BE, SO
3	IT MUST BE POSSIBLE BECAUSE THEY'RE ALL ASKING US.
4	IF WE ACHIEVE THAT, WE'VE GOT PEOPLE ALL OVER THE
5	WORLD WHO WILL FINANCE THIS BECAUSE THEY KNOW IT'S
6	DIFFICULT. AND WE CAN EXPLAIN HOW DIFFICULT IT IS,
7	YES, AND HOW WE'RE WORKING IN SUCH A SMART WAY ON IT
8	THAT WE'RE DOING THE BEST JOB POSSIBLE TO GET THOSE
9	CURES AS FAST AS THEY CAN COME, AND THEN PEOPLE WILL
10	PAY FOR IT.
11	MR. LIEPMAN: IF WE COULD TAKE JUST ONE
12	MINUTE AND TURN TO THE PUBLIC OR ANYONE ON THE LINE
13	THAT WOULD LIKE TO COMMENT AS WELL, I'LL PASS THE
14	MIKE ON.
15	MR. REED: DON REED. TWO THINGS. FIRST
16	OFF, IF WE SPEND EVERY NICKEL WE HAVE AS WISELY AS
17	POSSIBLE, WE WILL GET A CHANCE TO ASK FOR MORE, AND
18	WE WILL ASK FOR MORE AND WE WILL FIGHT FOR IT.
19	EVERYBODY AGREES WITH THAT. I DON'T THINK ANYBODY
20	REALLY DISAGREES WITH THAT. OF COURSE, WE'RE GOING
21	TO FIGHT FOR MORE.
22	SECOND THING IS SOMETHING CONCRETE I WOULD
23	LIKE TO SEE. I WOULD LIKE TO SEE THE WORLD'S
24	LARGEST E-MAIL LIST SO THAT, FOR INSTANCE, SOMEWHERE
25	IN MY PILE OF BOOKS AT HOME, I'VE GOT A BOOK WHICH

1	HAS EVERY BIOMEDICAL COMPANY AND BIOETHICS AND
2	BIOTECH COMPANY IN CALIFORNIA. I HAVE THEIR E-MAIL
3	ADDRESS. THAT'S OUT THERE. EVERY ONE OF THOSE
4	PEOPLE, EVERY ONE OF THOSE COMPANIES SHOULD BE
5	GETTING ON OUR E-MAIL LIST, ALL OUR ANNOUNCEMENTS.
6	THIS MORNING I GOT AN E-MAIL ANNOUNCEMENT
7	ABOUT THE EUROPEAN SITUATION, VERY WELL DONE BY
8	GEOFF LOMAX AND AMY ADAMS. THAT WAS VERY GOOD TO
9	CLARIFY IN MY MIND WHAT'S GOING ON. WE NEED THAT.
10	WE NEED TO INVOLVE EVERYBODY THAT'S A NATIONAL
11	STAKEHOLDER. THAT'S EVERY BIOMEDICAL GROUP, EVERY
12	RESEARCH ADVOCATE GROUP, EVERY COMPANY IN CALIFORNIA
13	AND PROBABLY AMERICA. IF WE TELL THEM EVERY SINGLE
14	DAY WHAT'S GOING ON, THEN WE HAVE A CHANCE TO
15	INVOLVE THEM, AND THAT'S WHAT THEY SHOULD BE. THANK
16	YOU.
17	MS. HUA: FOLKS ON THE PHONE.
18	MS. FEIT: I JUST WANT TO COMMENT THAT I
19	THINK THE COMMUNICATION PORTION OF THE STRATEGIC
20	PLAN IS THE MOST IMPORTANT FOR ME AS A BOARD MEMBER.
21	I'D LIKE TO HAVE IT BE A WORKING DOCUMENT RATHER
22	THAN A DOCUMENT WE LOOK AT NOW, AND THEN WE DON'T
23	LOOK AT FOR ANOTHER YEAR. THAT'S MY ONLY COMMENT.
24	I'D LIKE IT TO BE MORE OF A WORKING DOCUMENT FOR US
25	GOING FORWARD.

1	CHAIRMAN THOMAS: MARCY, IT'S J.T. I
2	COMPLETELY AGREE WITH THAT. IT'S GOING TO BE A
3	DYNAMIC PLAN THAT CONTINUES TO EVOLVE. AND ONCE WE
4	HAVE OUR NEW DIRECTOR IN PLACE, WHICH I HOPE WILL
5	HAPPEN FAIRLY SHORTLY, WE WILL LAUNCH THE STRATEGIC
6	PLAN IN THAT REGARD THAT YOU WILL HEAR MORE ABOUT ON
7	THE PHONE LATER. BUT IT PLANS TO BE A VERY RIGOROUS
8	AND CONSTANTLY EVOLVING IDEA. SO WE'D LOVE, OF
9	COURSE, TO HAVE YOUR FULL INPUT EVERY STEP OF THE
10	WAY AS WELL AS EVERYBODY ELSE'S.
11	MS. FEIT: THANK YOU.
12	MS. HUA: SO WHAT I'D LIKE TO DRAW
13	EVERYONE'S ATTENTION TO NOW IS THE PROPOSED
14	STRATEGIC OBJECTIVES THAT ELLEN PRESENTED. THERE
15	WERE FIVE AND NOW THERE ARE FOUR. AND THE SPECIFICS
16	IN HOW WE WENT FROM FIVE TO FOUR ISN'T AS RELEVANT
17	AS WHAT WE'RE PROPOSING RIGHT NOW BECAUSE THE
18	RATIONALE FOR SOME OF THOSE CHANGES ARE ALL FOLDED
19	IN THE FOUR, SO IT'S MORE OF A WAY TO LOOK AT THE
20	FOUR.
21	SO THIS IS VERY MUCH ALIGNED TO THE
22	PREVIOUS SLIDE THAT WE SHOWED AROUND WHAT DOES
23	SUCCESS LOOK LIKE. NO. 1 IS AROUND SCIENTIFIC. SO
24	THE WAY WE LOOK AT IT OR THE WAY I'M LOOKING AT IT
25	IS IF THIS WERE A HOUSE, THE SCIENTIFIC OBJECTIVE IS
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1	THE KITCHEN. THIS IS THE HEART OF EVERYTHING. WE
2	WERE ESTABLISHED TO REALLY SUPPORT THE INNOVATION
3	AND THE RESEARCH THAT STEM CELLS COULD BE AND THIS
4	SHOULD NOT GO AWAY. I THINK THE CHALLENGE, AND MANY
5	OF YOU ARTICULATED THIS VERY WELL, BUT THERE IS A
6	BALANCE BETWEEN HOW MANY SEEDS DO WE WANT TO
7	CONTINUE TO PLANT WHILE TRYING TO PRIORITIZE WHERE
8	WE WANT TO PUT THOSE SEEDS IN LIGHT OF LIMITED
9	BUDGET. I THINK THAT'S GOING TO BE THE BIGGEST
10	CHALLENGE FOR STRATEGIC OBJECTIVE NO. 1.
11	DO YOU ALL HAVE ANY COMMENTS REGARDING
12	STRATEGIC OBJECTIVE NO. 1 IN TERMS OF ANY OTHER
13	HURDLES?
14	MR. ROTH: I WOULD LIKE TO JUST CONCLUDE
15	THAT THIS CONVERSATION ABOUT SUSTAINABILITY, WHETHER
	THAT THIS CONVERSATION ABOUT SUSTAINABILITY, WHETHER WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP
15 16 17	, and the second
16	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP
16 17 18	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A
16 17	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS
16 17 18 19	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS TO SAY IN THAT SCIENTIFIC AREA, HAVE WE DONE ENOUGH
16 17 18 19 20	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS TO SAY IN THAT SCIENTIFIC AREA, HAVE WE DONE ENOUGH TO SOLVE ENOUGH PROBLEMS SO AT SOME FUTURE POINT
16 17 18 19 20	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS TO SAY IN THAT SCIENTIFIC AREA, HAVE WE DONE ENOUGH TO SOLVE ENOUGH PROBLEMS SO AT SOME FUTURE POINT SOMEBODY IS GOING TO TAKE A HAND-OFF HERE IN THE
16 17 18 19 20 21	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS TO SAY IN THAT SCIENTIFIC AREA, HAVE WE DONE ENOUGH TO SOLVE ENOUGH PROBLEMS SO AT SOME FUTURE POINT SOMEBODY IS GOING TO TAKE A HAND-OFF HERE IN THE EVENT THAT WE CAN'T REFINANCE OR THERE ISN'T ANY
16 17 18 19 20 21 22	WE ARE ABLE TO CONTINUE TO FUND IT OR OTHERS STEP IN, IS AN IMPORTANT ONE TO CONSIDER. WE'VE TALKED A LOT ABOUT NIH. AND THAT'S WHAT I'M LOOKING FOR IS TO SAY IN THAT SCIENTIFIC AREA, HAVE WE DONE ENOUGH TO SOLVE ENOUGH PROBLEMS SO AT SOME FUTURE POINT SOMEBODY IS GOING TO TAKE A HAND-OFF HERE IN THE EVENT THAT WE CAN'T REFINANCE OR THERE ISN'T ANY MONEY. I FEEL PRETTY GOOD ABOUT THAT. I THINK THE

1	SAME THING WHEN IT COMES TO THE SORT OF
2	ECONOMIC PART OF CALIFORNIA, THAT THOSE BUILDINGS
3	ARE UP, THEY'RE PERMANENT, THERE'S SCIENCE THERE. I
4	DON'T KNOW IF THERE'S ENOUGH SCIENCE THERE. MAYBE
5	WE STILL NEED TO EMPHASIZE RECRUITING. BUT THEN
6	WHEN IT GETS TO THE MEDICAL, AND I AGREE COMPLETELY
7	WITH WHAT TED SAID, WHERE ARE THE BOTTLENECKS?
8	WHAT'S GOING TO HOLD IT BACK? I DON'T WANT TO PICK
9	WINNERS AND LOSERS, BUT I'D LIKE TO SEE DOZENS OF
10	TRIALS ENABLED SO THAT YOUR ODDS GLOBALLY ARE PRETTY
11	HIGH THAT YOU ARE GOING TO HAVE SUCCESS.
12	I DON'T CARE PERSONALLY, IT WOULD BE
13	LOVELY IF IT HAPPENED AS A RESULT OF THE WORK WE DID
14	DIRECTLY, BUT WHAT WE DID CAUSED SO MUCH COMPETITION
15	AROUND THE WORLD TO ALSO DO IT, THAT I'LL TAKE
16	CREDIT FOR THE UK OR AUSTRALIA OR ANYBODY ELSE IF
17	THERE'S A SUCCESSFUL TRIAL THAT WE HAD A BIG, BIG
18	PIECE OF THAT BECAUSE OF WHAT WE DID.
19	SO I'M LOOKING AT WE CANNOT, AND I'VE
20	ARGUED THIS OVER AND OVER, WE CANNOT FUND LOTS OF
21	CLINICAL TRIALS. WE DON'T HAVE ENOUGH MONEY. BUT
22	WE CAN USE SOME MONEY TO ENABLE THAT TO HAPPEN SO
23	THAT OTHERS LIKE PHARMACEUTICAL AND BIOTECH
24	COMPANIES WILL STEP IN AND FUND THOSE. AND WE HAVE
25	SOME PROGRAMS THAT I THINK THE SCOPE AND SIZE THAT

1	WE COULD EASILY MANAGE THAT STEVE IS WORKING ON AND
2	ELONA AND ELLEN AND OTHERS THAT I THINK WILL ENABLE
3	US TO DO THAT. THAT'S HOW I WOULD VIEW THOSE.
4	MS. HUA: SO IN OTHER WORDS, UNDER THE
5	MEDICAL, IF WE, AND WE CANNOT, WE CANNOT FUND ALL
6	THE CLINICAL TRIALS THESE ARE BILLIONS OF DOLLARS
7	JUST TO FUND ONE CLINICAL TRIAL IT IS TO HELP
8	BRIDGE WITH PARTNERSHIPS WHAT WE'RE TRYING TO
9	ARTICULATE IS TO BUILD A PATHWAY SO THAT WE CAN
10	SUSTAIN THAT. WE DON'T NECESSARILY HAVE TO INVEST
11	ALL OF THE MONEY, BUT WE NEED TO AT LEAST PROVIDE
12	SORT OF AN INFRASTRUCTURE OR THE MODEL TO SUPPORT
13	THAT GLOBALLY AS WELL AS WITHIN CALIFORNIA.
14	MR. ROTH: WELL, A CONSTANT FOCUS ON THAT.
15	THAT'S WHERE YOU HAVE TO ASK WHAT ARE THE
16	IMPEDIMENTS? AND YOU JUST HEARD IT COME OUT, THAT
17	
	WE DON'T KNOW WHERE WE'D GO TO GET GMP MATERIALS TO
18	WE DON'T KNOW WHERE WE'D GO TO GET GMP MATERIALS TO  DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS
18 19	
	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS
19	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS BACK AND FORTH, BUT TO ME THERE'S SOME ISSUES THERE
19 20	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS  BACK AND FORTH, BUT TO ME THERE'S SOME ISSUES THERE  IN THAT MEDICAL CATEGORY THAT PROBABLY NEED OUR HELP
19 20 21	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS  BACK AND FORTH, BUT TO ME THERE'S SOME ISSUES THERE  IN THAT MEDICAL CATEGORY THAT PROBABLY NEED OUR HELP  TO SEED AND HELP MOVE ALONG.
19 20 21 22	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS  BACK AND FORTH, BUT TO ME THERE'S SOME ISSUES THERE IN THAT MEDICAL CATEGORY THAT PROBABLY NEED OUR HELP TO SEED AND HELP MOVE ALONG.  MS. HUA: I HEARD A LOT ALSO FROM JOAN
19 20 21 22 23	DO THESE CLINICAL TRIALS. THERE'S SOME SUGGESTIONS  BACK AND FORTH, BUT TO ME THERE'S SOME ISSUES THERE IN THAT MEDICAL CATEGORY THAT PROBABLY NEED OUR HELP TO SEED AND HELP MOVE ALONG.  MS. HUA: I HEARD A LOT ALSO FROM JOAN ABOUT BEING A LEADER. COMMUNICATION WAS A BIG THEME

1	AWARENESS. SO BEING ON GENERAL HOSPITAL, IT'S LIKE
2	WHOEVER HEARD OF VIAGRA A COUPLE YEARS AGO. IT'S
3	JUST SO COMMONPLACE NOW, THAT COULD WE MAKE STEM
4	CELL IN THE VOCABULARY OF THE DAY-TO-DAY DISCUSSION?
5	MS. SAMUELSON: YOU LOOK AT WHAT'S ON T.V.
6	DR. PIZZO: FOR THE PUBLIC MEETING, COULD
7	YOU CHANGE YOUR EXAMPLE? HOW ABOUT IPS CELLS?
8	MS. HUA: YES.
9	MS. SAMUELSON: PEOPLE ALL OVER THE WORLD
10	ARE NOW EXPERTS IN THE WORLD OF CRIME, HOW TO COMMIT
11	A CRIME, HOW TO KILL PEOPLE, HOW TO APPREHEND THEM,
12	HOW TO PROSECUTE THEM. HOW MANY SHOWS ARE THERE?
13	IT'S ALMOST EVERY SHOW ON T.V. IS ABOUT THAT
14	INDUSTRY. THERE'S NO REASON WHY WE COULDN'T MAKE
15	THE PEOPLE OF CALIFORNIA AND THE WORLD, BECAUSE THEY
16	ALL WATCH THE SAME STUFF, EXPERT IN THIS NEW FIELD
17	AND INCREASE THE AWARENESS OF MATH AND SCIENCE IN
18	THE STATE AND ACROSS THE COUNTRY AND ADVANCE THE
19	ACCELERATION OF THE TRANSLATIONAL, HOWEVER PHIL AND
20	YOU WERE DESCRIBING IT, THE BUILDING OF THAT
21	INTELLECTUAL INFRASTRUCTURE IN THE TRANSLATIONAL
22	REALM SO THAT MORE AND MORE THINGS ARE GETTING TO
23	CLINICAL APPLICATION BECAUSE GAPS IN UNDERSTANDING
24	ARE BEING FILLED.
25	MS. HUA: ANYONE ELSE AROUND THE SOCIAL
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1	ASPECTS? THE COMMUNICATION WE HEARD THAT IT'S GOING
2	TO BE AN ITERATIVE PROCESS. I THINK THE TAKEAWAY
3	THAT I'M HEARING AROUND COMMUNICATION IS WE WANT TO
4	BUILD A LOT OF MOMENTUM BEHIND THIS. AND WE WANT TO
5	MAKE SURE THAT WHAT WE'VE DONE UP TO DATE HASN'T
6	BEEN LOST AND ACTUALLY IS ENERGIZED BEYOND OUR
7	PURVIEW.
8	DR. POMEROY: IF I COULD JUST ADD TO THAT.
9	I THINK AS WE DEVELOP OUR COMMUNICATION STRATEGIES,
10	IT WILL BE VERY IMPORTANT FOR US TO REMEMBER THAT WE
11	NEED TO DEFINE THE DIFFERENT AUDIENCES. SO THE
12	STRATEGY WE HAVE FOR THE NIH MIGHT BE VERY DIFFERENT
13	THAN THE STRATEGY FOR THE LEGISLATION THAN FOR THE
14	GENERAL PUBLIC THAN FOR INDUSTRY THAN FOR ACADEMIA
15	AND GO THROUGH ALL THE CONSTITUENCIES. SO I HOPE WE
16	CAN OUTLINE THOSE DISTINCTIONS IN THE STRATEGIC
17	PLAN.
18	DR. LUBIN: CLAIRE, WE JUST DISCUSSED THAT
19	LAST NIGHT. ABSOLUTELY YOU ARE GOING TO HEAR MORE
20	ABOUT THAT LATER. I WANTED TO MENTION ONE WORD WE
21	HAVEN'T USED IS FOCUS. DO WE WANT TO TRY TO REFOCUS
22	OUR ENERGIES GIVEN THE BUDGET WE HAVE ON WHAT OUR
23	ULTIMATE GOALS ARE? AND I KNOW THAT'S WHAT YOU'RE
24	SAYING, BUT I THINK THAT THAT'S AN IMPORTANT POINT
25	TO KEEP IN MIND.

	DARRISTERS REPORTING SERVICE
1	MS. HUA: I THINK, MR. SHEEHY, LIKE YOUR
2	SUGGESTION AROUND THE MATRIX WILL HELP TOWARDS THAT.
3	SO IT'S HARD TO MAKE STRATEGIC DECISIONS IF WE DON'T
4	REALLY HAVE A MECHANISM TO REALLY ANALYZE WHAT WE'RE
5	GOOD AT, WHERE WE WANT TO PLAY, WHERE WE WANT TO
6	MOVE FORWARD.
7	ANYONE ELSE?
8	CHAIRMAN THOMAS: EMILY, I'LL JUST MAKE
9	ONE OTHER COMMENT. AS I SORT OF LOOK AT ALL THIS,
10	WE'RE DEVELOPING A STRATEGIC PLAN IN A VERY DYNAMIC
11	POLITICAL CONTEXT. WE COULD END UP UNDER A CERTAIN

12 SET OF FACTS BY THE END OF NEXT YEAR WITH NO NIH

13 FUNDING AVAILABLE FOR ANY OF THIS IF WE HAVE THE

14 PRESIDENCY GO A CERTAIN WAY AND HAVE SOMEBODY THERE

15 WHO IS NOT A FAN OF STEM CELLS. WE HAVE A NUMBER OF

MOVEMENTS AFOOT IN VARIOUS STATES, THE PERSONHOOD

17 PROPOSED LEGISLATION, THAT COULD MATERIALLY AFFECT

DIFFERENT STATE'S ABILITIES TO UNDERTAKE EMBRYONIC

19 | STEM CELL RESEARCH.

16

18

20

21

22

23

24

25

WE HAVE AN INTERESTING CHALLENGE HERE
BECAUSE WE'RE TRYING TO DEVELOP A PLAN THAT KIND OF
ASSUMES A CERTAIN WORLD ORDER THAT MAY OR MAY NOT BE
IN PLACE. SO JUST AS WE HAVE TO CONSIDER WILL WE
HAVE ADDITIONAL FUNDING OR WON'T WE, I THINK WE HAVE
TO TAKE INTO ACCOUNT THE VERY DYNAMIC NATURE OF THE

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1	POLITICAL LANDSCAPE AS IT WILL AFFECT PARTNERSHIPS,
2	LEVERAGED FUNDING, AND ALL THAT SORT OF THING. IT
3	MAKES IT MUCH MORE DIFFICULT TO COME UP WITH
4	SOMETHING PARTICULARLY WHEN WE'RE GOING TO HAVE A
5	PLAN THAT'S OUT IN MARCH IN AN ELECTION YEAR THAT
6	COULD HAVE PROFOUND IMPACT ON THE FIELD IN GENERAL.
7	MS. HUA: YOU BRING UP AN EXCELLENT POINT.
8	THAT LEADS ME TO MY NEXT QUESTION, WHICH IS WHAT ARE
9	THE POTENTIAL RISKS THAT WE FACE IN THE SAME
10	HORIZON? SO DR. THOMAS MENTIONED POLITICAL RISKS.
11	ANY OTHER RISKS THAT WE NEED TO INCORPORATE AS PART
12	OF OUR STRATEGIC PLAN?
13	MR. SHEEHY: CATASTROPHIC FAILURE IN A
14	CLINICAL TRIAL. WE SHOULD HAVE A COMMUNICATIONS
15	PLAN OR BE IN THE PROCESS OF DEVELOPING A
16	COMMUNICATIONS PLAN FOR THAT NOW.
17	MS. HUA: THAT'S A REALLY GOOD POINT.
18	MS. SAMUELSON: I COULDN'T HEAR.
19	MR. SHEEHY: SORRY. I SAID CATASTROPHIC
20	FAILURE IN A CLINICAL TRIAL AND THAT WE SHOULD BE
21	DEVELOPING A STRATEGIC COMMUNICATIONS PLAN FOR THAT
22	NOW ACTUALLY.
23	MS. SAMUELSON: A LOT OF PEOPLE DYING, FOR
24	EXAMPLE. OR SIMPLY MUCH LESS SUCCESS THAN THE
25	PUBLIC OR WE OR SOME AUDIENCE EXPECTS.

1	MS. GIBBONS: I THINK THIS WAS CORRECTLY
2	IDENTIFIED IN YOUR CHALLENGES IN THE NOTES HERE FOR
3	THAT, JEFF. I THINK THAT'S RIGHT ON TOO. AND I
4	SUSPECT THAT WILL COME OUT THIS AFTERNOON AS WELL
5	WHEN WE'RE TALKING MORE ABOUT THE OVERALL
6	COMMUNICATIONS EFFORT.
7	MS. SAMUELSON: IF THIS ISN'T A SURPRISE
8	TO THOSE AUDIENCES BECAUSE THEY HAVE BEEN EDUCATED
9	ABOUT IT, IT WON'T HAVE THE SAME IMPACT PRESUMABLY.
10	MS. HUA: OKAY. SO I'M GOING TO TURN IT
11	OVER TO MY COLLEAGUE, JEFF, TO FACILITATE THE NEXT
12	SET OF QUESTIONS.
13	MR. LIEPMAN: LET ME JUST SUMMARIZE SOME
14	OF THE KEY POINTS THAT HAVE COME OUT SO FAR, AND
15	THEN I JUST WANT TO HIGHLIGHT A FEW OF THE THINGS
16	THAT WE HAVEN'T TOUCHED ON, AND THEN LOOK FORWARD TO
17	KIND OF WHAT ARE THE TAKEAWAYS FROM THE DISCUSSION
18	TODAY AS WE LOOK FORWARD.
19	WE'VE HEARD A LOT OF COMMENTS AROUND
20	SOCIAL AWARENESS AND THE MOVEMENT THAT COULD BE MADE
21	TO REALLY BECOME A BEST-IN-CLASS, MOST WELL-KNOWN
22	INSTITUTE SCIENCE WORLDWIDE. WE'VE ALSO HEARD QUITE
23	A BIT ABOUT SUSTAINABILITY AND WHAT CAN BE DONE TO
24	REALLY UNDERSTAND OVER THE LONG PERIOD OF TIME HOW
25	TO BEST PRIORITIZE THE ALLOCATION OF FUNDS.

1	WE'VE ALSO HAD SOME GOOD DISCUSSION AROUND
2	CONTINUING TO FEED THE SCIENTIFIC ENGINE SO THAT WE
3	CAN ALLOW OURSELVES TO ALSO FEED THE MEDICAL
4	ADVANCEMENTS AND THE CLINICAL OPPORTUNITIES. AND
5	THEN, LASTLY, SOME OF THE POINTS THAT WERE JUST MADE
6	AROUND THE RISKS, THE POLITICAL RISKS, SOME OF THE
7	CLINICAL TRIAL FAILURES THAT MAY EVENTUALLY COME TO
8	FRUITION THAT WE NEED TO BE PREPARED TO COMMUNICATE
9	AGAINST IN A POSITIVE MANNER.
10	SO SOME OF THE POINTS THAT WE'VE CAPTURED
11	THERE, AND I ALSO JUST WANT TO POINT TO THE ECONOMIC
12	COLUMN, THAT WE HAVEN'T TOUCHED IN A GREAT LEVEL OF
13	DETAIL SO FAR TODAY. I KNOW THAT A FEW PEOPLE HAVE
14	BROUGHT UP THE IDEA OF PARTNERING AND WHAT CAN BE
15	DONE TO BETTER PARTNER WITH INDUSTRY, WITH EMERGING
16	BIOTECHS, WITH OTHER INSTITUTE'S FUNDS IN
17	CALIFORNIA.
18	ARE THERE INNOVATIVE IDEAS OR CONCEPTS
19	THAT WE COULD SHARE WITH THE GROUP ON HOW TO BETTER
20	PARTNER AND DRIVE ECONOMIC DEVELOPMENT IN
21	CALIFORNIA?
22	DR. HAWGOOD: SOMEWHERE IN THAT GENERAL
23	AREA, I THINK WE'VE GOT TO DEAL WITH THE FACT THAT
24	HEALTHCARE COSTS ARE TOO HIGH IN THIS COUNTRY. THIS
25	FEELS AND SOUNDS LIKE A VERY EXPENSIVE ADDITION TO

Т	THAT PROBLEM; WHEREAS, IF IT ACTUALLY CURES CHRONIC
2	DISEASE, IT COULD BE THE OPPOSITE. SO SOMEWHERE IN
3	THERE WE'VE GOT TO BUILD THAT. AND I LIKE THE IDEA
4	OF BRINGING THE PAYERS INTO THAT CONVERSATION. SO
5	IT'S NOT TOTALLY ABOUT REVENUE ENHANCEMENT AND JOB
6	CREATION AND ECONOMIC GROWTH, BUT IT IS ALSO ABOUT
7	CONTROLLING THE COST OF HEALTHCARE.
8	MR. LIEPMAN: ANY IDEAS ON HOW TO ACTUALLY
9	DO THAT? WHEN WE MOVE FROM THE STRATEGY OF
10	CONTROLLING HEALTHCARE COSTS CONCERNS, ARE THERE ANY
11	TACTICS, ANYTHING THAT THE INSTITUTE CAN HAVE A PLAY
12	IN?
13	DR. LUBIN: I THINK WHAT SAM JUST SAID IS
14	REALLY IMPORTANT. I THINK MEETING WITH THE KEY
15	FINANCIAL COMPANIES THAT BENEFIT GREATLY FROM THE
16	OUTRAGEOUS COST OF HEALTHCARE AND SEE IF YOU CAN
17	PARTNER WITH THEM TO GET SUPPORT TO SOMETHING THAT
18	WILL DECREASE THE COST OF CARE BECAUSE WE'RE ALL
19	GOING TO HAVE TO ADDRESS DECREASING COST OF CARE.
20	AND MANY OF THE COMPANIES, BLUE CROSS ANTHEM AND
21	OTHERS, HAVE FUNDS THAT HELP SUPPORT RESEARCH, AND I
22	THINK WE HAVE TO CULTIVATE THAT AS AN OPPORTUNITY
23	THAT WE HAVEN'T DONE BEFORE AS IT RELATES TO STEM
24	CELLS AND CIRM.
25	MR. LIEPMAN: GREAT.
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	• — <del>—                                 </del>

1	DR. HAWGOOD: I THINK POTENTIALLY EVEN
2	FUNDING SOME HEALTH POLICY OR HEALTH ECONOMICS FOLKS
3	TO BEGIN TO GET THEIR ARMS AROUND WHAT THIS ACTUALLY
4	LOOKS LIKE AND WHERE THE BALANCE TIPS FROM BEING AN
5	ADDITIVE TO THE HEALTH COST PROBLEM TO A SOLUTION.
6	MR. LIEPMAN: WHERE IS THE BEST POINT OF
7	ENTRY FOR PARTNERSHIPS? OR IS IT SOMETHING THAT'S
8	DONE IN PARALLEL? DO WE WANT TO FOCUS MORE ON EARLY
9	STAGE TECHNOLOGY, SCIENTIFIC DEVELOPMENTS, OR IS
10	THIS SOMETHING THAT SHOULD BE FURTHER DOWNSTREAM
11	WITH LARGER COMMERCIALIZED COMPANIES, PAYERS?
12	AGAIN, IS THIS SOMETHING THAT SHOULD BE MORE BROADLY
13	CONSIDERED, OR IS THIS SOMETHING THAT WE START WITH
14	EARLIER STAGE ADVANCES AND THEN MOVE FORWARD
15	SEQUENTIALLY?
16	CHAIRMAN THOMAS: I'LL JUMP IN HERE.
17	WE'RE OBSERVING THE FACT THERE SEEMS TO BE A
18	SHIFTING DYNAMIC IN THE AREA OF R & D WITH LARGE
19	PHARMA, FOR EXAMPLE, WHERE THEY'VE HAD ENORMOUS
20	COSTS WITH NOT A LOT TO SHOW FOR IT OVER THE LAST
21	FEW YEARS. AND THEY ARE LOOKING POTENTIALLY, OR AT
22	LEAST SOME OF THEM ARE, TO ENGAGE WITH SMALLER,
23	EARLIER STAGE RESEARCH, WHETHER IT'S COMPANIES OR
24	RESEARCH INSTITUTIONS, TO PARTNER UP WITH THEM TO
25	GIVE THEM ACCESS TO OUTSIDE R & D. AND FROM THE
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1	STANDPOINT OF THE LITTLER, NIMBLER GUYS WHO ARE
2	DOING THIS EARLIER STAGE RESEARCH, IT'S A CHANCE
3	POTENTIALLY TO GET ALIGNED WITH SOMEBODY THAT CAN
4	PROVIDE DOWNSTREAM FUNDING AS THINGS PROGRESS.
5	AND WE'RE VERY AWARE OF THAT. WE'RE GOING
6	TO HAVE, IN FACT, A BRAINSTORMING SESSION ON THIS
7	COMING UP IN A COUPLE OF WEEKS, TRYING TO FIGURE OUT
8	HOW TO ENGAGE TO ARRANGE FOR THESE PARTNERSHIPS
9	AT AN EARLIER STAGE TO EVERYBODY'S POTENTIAL
10	BENEFIT.
11	DR. PIZZO: SO I'LL BE VERY INTERESTED TO
12	HEAR HOW THAT PROCEEDS. IT MAY BE DIFFERENT IN THE
13	STEM CELL SPACE THAN IN OTHER AREAS OF DEVELOPMENT.
14	BUT I'VE ACTUALLY BEEN INVOLVED WITH A NUMBER OF
15	ORGANIZATIONS IN LEADING DISCUSSIONS WITH INDUSTRY
16	ON ACADEMIC-INDUSTRY RELATIONS. AND WE JUST HAD A
17	BIG DISCUSSION ABOUT THIS IN OUR INSTITUTION A
18	COUPLE OF WEEKS AGO WITH INDUSTRY PARTNERS PRESENT.
19	THE ONE THING THAT HAS EVOLVED, AS WE ALL
20	KNOW, AND YOU STATED THIS, J.T., IS THAT INDUSTRY
21	HAS MOVED OUT OF THE EARLY DEVELOPMENT PHASE, AND
22	THEY'RE NOW AT A PLACE WHERE THEY'RE SAYING BRING US
23	THE PHASE II LEVEL STUDIES.
24	THIS IS A VERY UNREALISTIC PLACE FOR ANY
25	OF US TO BE. TO GET TO THAT LEVEL IS

1	EXTRAORDINARILY EXPENSIVE AND I THINK IS GOING TO
2	PROVOKE A WHOLE DIFFERENT DIALOGUE ABOUT HOW WE
3	BRIDGE THAT GAP. I THINK THERE MAY BE OPPORTUNITIES
4	IN THIS AREA THAT ARE DIFFERENT FROM OTHER AREAS OF
5	DEVELOPMENT, BUT I WOULD SAY THIS CHALLENGE IS NOT
6	ONLY YOU NEED CURE, BUT WHAT WE'VE HEARD FROM
7	INDUSTRY LEADERS IS, LOOK, WE'RE GOING TO DO THIS
8	WORK, THE WORK THEY'RE GOING TO DO, WE'RE GOING TO
9	DO IT GLOBALLY BECAUSE IT IS TOO EXPENSIVE TO DO
10	ANYWAY IN THE U.S. AND WHILE WE'VE BEEN TALKING
11	ABOUT U.S. PARTNERSHIPS, WE SHOULD ALSO, AND I KNOW
12	ALAN HAS THOUGHT ABOUT THIS, BE LOOKING AT GLOBAL
13	PARTNERS AS WELL TO CARRY OUT SOME OF THAT WORK AS
14	WELL.
15	CHAIRMAN THOMAS: DEAN PIZZO, ELONA HAS
16	CONVENED THIS MEETING ON NOVEMBER 8TH. AND IF
17	SOMEBODY FROM STANFORD WOULD BE AVAILABLE TO
18	PARTICIPATE, THAT WOULD BE VERY HELPFUL.
19	MR. LIEPMAN: BEFORE WE MOVE ON TO THE
20	LAST BUCKET OF QUESTIONS, I JUST WANT TO ASK AGAIN
21	ARE THERE ANY OTHER COMMENTS, IDEAS, QUESTIONS ON
22	THE ECONOMIC PIECE, THE SOCIAL PIECE, THE MEDICAL OR
23	SCIENCE HERE, WHAT WE'VE GOT CAPTURED ON THIS DRAFT
24	SET OF STRATEGIC OBJECTIVES?
25	MR. REED: I WOULD LIKE TO SEE A CONCRETE
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1	LIST OF ACCURATE STATISTICS WHICH WOULD BE AVAILABLE
2	TO EVERYBODY. FOR INSTANCE, LAST YEAR, 2009, \$1.65
3	TRILLION, CHRONIC DISEASE COST, DIRECT OUT-OF-POCKET
4	COST. THAT'S EQUALING THE NATIONAL DEFICIT, 1.6
5	TRILLION. IT'S MORE THAN ALL FEDERAL INCOME TAXES
6	PUT TOGETHER, 1.2 TRILLION. THOSE KIND OF
7	STATISTICS NEED TO BE AVAILABLE SO EVERY ADVOCATE
8	CAN USE THEM.
9	MR. HENRY: I'M EVAN HENRY. I'M ON THE
LO	UCI PATIENT ADVOCACY COMMITTEE. AND I WANT TO THANK
L1	CIRM FOR SPONSORING ME TO GO THE WORLD STEM CELL
L2	CONGRESS. IT WAS REALLY FUN UP IN PASADENA. WE GOT
L3	A LOT OF NETWORKING DONE AND MET A LOT OF GOOD
L4	PEOPLE THERE. SO I WAS ONE OF 37 ON THE LIST UP
L5	THERE.
L6	COUPLE THINGS I WANTED TO SAY AS
L7	OBSERVATIONS FROM THAT MEETING HAD TO DO WITH
L8	ADVOCACY AND IT HAS TO DO WITH THE INCREASING
L9	AWARENESS ONE. ONE OF THE THINGS THAT WAS VERY
20	CLEAR WAS THAT THE ADVOCATES IN THE ROOM, WHETHER
21	THEY WERE FROM OUT-OF-STATE OR MAKING PRESENTATIONS
22	OR THE ADVOCATES IN THE ROOM WHO WERE TRYING TO
23	LEARN THINGS, WE WERE ALL THERE FOR DIFFERENT
24	REASONS. SOME OF THEM WERE ADVOCATING FOR THE LAWS
25	AND REGULATIONS OR FIGHTING LAWS AND REGULATIONS.

1	SOME OF US ARE MORE ADVOCATING FOR AWARENESS AND
2	INVOLVEMENT IN THE RESEARCH, NOT NECESSARILY MAYBE
3	THE RESEARCH DIRECTIONS, BUT HELPING RESEARCHERS
4	UNDERSTAND WHETHER SOMETHING IS URGENT IN THEIR OWN
5	PERSONAL MINDS.
6	AND THEN ALSO THERE WAS THE WHOLE
7	FUND-RAISING ASPECT, AND ONE THAT CAME UP WAS ALSO
8	THE IDEA THAT PATIENT ADVOCATES COULD BE VERY
9	INSTRUMENTAL IN BUILDING A RESERVOIR OF PATIENTS
10	THAT COULD BE THEN USED OR THEN VOLUNTEER FOR
11	CLINICAL TRIALS. BECAUSE WE GET ALL THIS
12	TRANSLATIONAL STUFF GOING REALLY FAST ALL OF A
13	SUDDEN, THEN YOU'RE NOT GOING TO HAVE THE PATIENTS
14	TO BE ABLE TO TEST THEM OUT ON. SO THERE'S AN ARMY
15	THAT COULD BE OF ADVOCATES THAT COULD BE BROUGHT
16	TO BEAR TO HELP OUT IN THAT KIND OF AREA.
17	THE OTHER THING WAS THAT I DON'T THINK YOU
18	CAN PRESUME THAT THE DISEASE-RELATED ORGANIZATIONS,
19	WHETHER IT'S THE NATIONAL PARKINSON'S FOUNDATION OR
20	MULTIPLE SCLEROSIS, THEY'RE ALL GOING TO BE
21	ADVOCATING SPECIFICALLY FOR STEM CELLS. THEY HAVE A
22	LOT OF OTHER THINGS ON THEIR MINDS, AND SOME
23	ORGANIZATIONS MAY NOT EVEN HAVE A SPECIFIC FOCUS OR
24	WANT TO HAVE A SPECIFIC FOCUS ON STEM CELLS. SO WE
25	CAN'T JUST PRESUME THAT EVERYBODY IS ON BOARD WHEN
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1	THEY'RE ADVOCATING FOR THEIR PARTICULAR DISEASE AND
2	CURES IN THE STEM CELL SPACE.
3	THE LAST THING IS THAT OUR APPROACH AT UCI
4	HAS BEEN TO TRY TO PUT DOWN OUR SEPARATE LITTLE
5	BALKAN STATES, WHETHER WE'RE ADVOCATING FOR PD IN
6	OUR OWN PARKINSON'S DISEASE LIKE I HAVE IN OUR
7	OWN WORLDS OR WHETHER WE'RE ADVOCATING FOR
8	HUNTINGTON'S DISEASE. IT DOESN'T MATTER WHICH ONE
9	BECAUSE I FIRMLY BELIEVE THAT THE RISING TIDE FLOATS
10	ALL BOATS, AND THAT'S REALLY WHERE I THINK YOU
11	ALL UNDERSTAND THAT, BUT I THINK IT'S A MESSAGE THAT
12	ISN'T CLEARLY UNDERSTOOD WITH THE POPULATION. AND I
13	URGE YOU TO REALLY LOOK AT IT IN A BROAD MESSAGE,
14	BROAD POSITIVE MESSAGE, SO THAT ALL DIFFERENT KINDS
15	OF PATIENTS OR PEOPLE WHO HAVE HAD INJURIES REALLY
16	GET TO BE ABLE TO JUMP ON THE BOAT THEMSELVES.
17	THANKS.
18	MR. LIEPMAN: THANK YOU VERY MUCH. ANY
19	COMMENTS WITH RESPECT TO THAT?
20	MS. SAMUELSON: HE'S ABSOLUTELY RIGHT.
21	NOT EVERY PATIENT ORGANIZATION IS GOING TO BE
22	PLAYING AN ADVOCACY FUNCTION.
23	MR. LIEPMAN: GREAT. SO AS WE MOVE
24	TOWARDS CLOSING, I CAN SENSE THERE'S A LOT OF HUNGER
25	GROWING IN THE ROOM FOR LUNCH. I WANT TO SUMMARIZE
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1	A COUPLE OF THINGS AGAIN.
2	WE'VE HEARD A LOT TODAY ABOUT THE
3	TREMENDOUS PROGRESS THAT CIRM IS MAKING. WE'VE
4	HEARD A LOT ABOUT THE PARTNERSHIPS THAT ARE
5	BEGINNING TO REALLY FLOURISH AND THE SCIENCE
6	ADVANCES THAT ARE BEING MADE. BEFORE WE CLOSE THE
7	DISCUSSION, THOUGH, I DO WANT TO ASK AGAIN EVERYONE
8	HERE TODAY AND CERTAINLY THOSE THAT HAVEN'T SPOKEN
9	UP, PLEASE TAKE A CHANCE TO PROVIDE SOME COMMENTARY,
10	BUT WHAT CAN CIRM DO TO BETTER SERVE THE PATIENT
11	COMMUNITY, THE SCIENTIFIC COMMUNITY, ANY
12	STAKEHOLDERS INVOLVED REALLY IN THE APPLICATION OF
13	WHAT CIRM DOES?
14	THIS IS KIND OF THE FINAL QUESTION FOR US
15	TO THINK CREATIVELY ABOUT WHAT IS IT THAT CIRM COULD
16	DO BETTER, AND WE'D CERTAINLY LOVE TO CAPTURE THAT
17	AS A GROUP.
18	MS. GIBBONS: I THINK THAT WHEN YOU LOOK
19	AT HOW THIS INITIATIVE FIRST CAME TO LIFE, IT WAS BY
20	UNLEASHING A LOT OF THOUGHT INFLUENCERS AND KEY
21	LEADERS IN CERTAIN FIELDS WHO WERE STARS. SO WE HAD
22	ACTUAL POP CULTURE CELEBRITIES WHO HAD CREDIBILITY,
23	AND YOU HAD STARS IN RESPECTED FIELDS ALL KIND OF
24	COMING TOGETHER. I THINK THAT WE'LL NEED TO UTILIZE
25	THAT HOLISTIC APPROACH. THAT'S ONE THING WE CAN DO
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	±33

1	BETTER IS TO CREATE AN APPARATUS FOR OUR STARS, FOR
2	OUR INVOLVED ADVOCATES WHO SIT HERE EVERY WEEK, WHO
3	ARE OUT THERE AT THE MEETINGS. HOW CAN WE PROVIDE
4	THE VESSELS FOR THEM TO BE MORE EFFECTIVE? HOW CAN
5	WE CREATE PLATFORMS FOR THEM TO SHINE?
6	AND, YES, WE HAVE THE SPOTLIGHTS AND WE
7	HAVE OPPORTUNITIES, AND THAT'S FANTASTIC. IT'S JUST
8	NOT ENOUGH. BECAUSE IF WE GIVE THIS STORY BACK TO
9	THE PEOPLE WHO VOTED FOR THIS INITIATIVE, I AGREE
10	WITH JOAN AND OTHERS WHO HAVE SAID THEY WILL BE THE
11	CUSTODIANS OF OUR NEXT STEPS, BUT WE HAVE TO EMPOWER
12	THEM AND GIVE IT BACK TO THEM. IT'S NOT OUR STORY.
13	WE'RE NOT PROPRIETARY. IT'S THE STORY OF ALL THE
14	VOTERS OF WHICH WE ARE A PART OF THAT GROUP.
15	SO I THINK THAT'S ONE THING THAT WE'LL
16	HEAR A LOT MORE ABOUT TOO THAT WE'VE BEEN DISCUSSING
17	IS HOW DO WE AND WE'VE MADE TREMENDOUS STRIDES
18	RECENTLY AS WELL. I DON'T WANT TO BE DISMISSIVE OF
19	ANY OF THAT. WE HAVE MADE TREMENDOUS STRIDES AT
20	TAKING THAT DELICATE BALANCE OF HOW DO WE ACTIVATE
21	ALL THE TECHNOLOGIES. AND DON TALKED ABOUT THE
22	E-MAIL LIST. AND MAYBE WHEN WE LOOK AT THE
23	STRATEGY, E-MAIL WILL BE COMPLETELY DEFUNCT. WE
24	JUST DON'T KNOW, BUT ANTICIPATING WHAT ARE THE
25	STREAMS OF COMMUNICATION THAT WE NEED TO HAVE ACCESS

TO. AND WHATEVER THEY ARE, THEY HAVE TO BE
HEADLINED BY THE STARS WHO ARE THE PATIENTS WHO HAVE
THE STORIES WHO WILL CRYSTALLIZE THIS POLITICALLY,
ECONOMICALLY, AND WITH REGARD TO OUR SUSTAINABILITY.
WHETHER WE HAVE ACTIVE CURES AND TREATMENT
AS WE WANT, IF WE HAVE THOSE STORIES OUT THERE, I
THINK WE'RE ALL IN AGREEMENT THAT WE'RE GOING TO GET
TO THESE OTHER PLACES THAT WE'VE BEEN DISCUSSING. I
THINK WE CAN DO THAT BETTER.
MR. LIEPMAN: ANYONE ELSE? HOW ABOUT
THOSE ON THE PHONE OR THE PUBLIC COMMUNITY?
MR. REED: THERE ISN'T A WHOLE LOT THAT
COULD BE DONE BETTER. THIS IS A MAGNIFICENT THING.
THIS IS THE GREATEST THING IN THE WORLD.
(APPLAUSE.)
MS. HUA: SO ALAN CHARGED US LAST TIME I
FACILITATED A MEETING WITH HIM WITH A BIG INNOVATIVE
IDEA. AND HE CHARGED HIS TEAM WITH TRYING TO COME
UP WITH WHAT ARE THOSE BIG INNOVATIVE IDEAS. AND
NOW WE ARE GOING TO EMPOWER YOU GUYS TO SEE IF
THERE'S ANYTHING ELSE, BLUE SKY, CRAZY, OFF THE WALL
THINGS THAT WE SHOULD CONSIDER OR AT LEAST JUST
BRING UP TO DISCUSS BEFORE WE WRAP UP. I'M LOOKING
AT YOU.
MR. SHEEHY: I LIKE ANDY GROVES'
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1	PRESENTATION. WE SAW THAT AT THE WORLD STEM CELL
2	CONGRESS. AND I THINK ESPECIALLY STEM CELL RESEARCH
3	HAS HAD SOME VERY INTERESTING COMPONENTS. I THOUGHT
4	THE IDEA OF GETTING THE FDA TO GO BACK TO ITS
5	ORIGINAL MISSION OF JUST APPROVING SAFETY. KIND OF
6	WHAT HE DESCRIBED WAS A DISTRIBUTIVE TRIAL NETWORK
7	WHERE PATIENTS COULD BE ENROLLED IN A NUMBER OF
8	DIFFERENT SITES, AND THEN DATA THAT'S COLLECTED
9	SHARED WIDELY. BUT I MEAN REALLY I WOULD GO TO HIS
10	PRESENTATION AND TAKE SOME OF THE HIGH POINTS OUT
11	BECAUSE I THOUGHT IT WAS VERY THOUGHTFUL ABOUT THIS
12	PROCESS.
13	AND I THINK WHAT MAY BE TRUE IN CELL
14	THERAPY IS THAT YOU ARE GOING TO HAVE A LOT OF
15	DIFFERENT OUTCOMES, AND MAYBE THE CLASSIC CLINICAL
16	TRIAL MODALITY IS NOT GOING TO WORK. YOU'RE TAKING
17	LIVING THINGS AND PUTTING THEM INTO LIVING PEOPLE.
18	AND SO THE TRANSPLANT MODE IS GOING TO BE MORE OF
19	WHAT WE SEE. YOU ARE GOING TO HAVE A LOT'S GOING
20	TO DEPEND ON THE EXPERTISE OF THE PEOPLE DOING THE
21	PROCEDURES. SO THERE WILL BE PEOPLE WHO DO IT
22	BETTER. THERE WILL BE PEOPLE WHO ACCEPT CELLS
23	BETTER AND FIGURING OUT WHY THEY DO. THERE WILL BE
24	CERTAIN TYPES OF CELLS THAT WORK BETTER FOR CERTAIN
25	CONDITIONS.

1	SO IT'S REALLY NOT GOING TO THE CLASSIC
2	SMALL MOLECULE MODEL FOR APPROVING THERAPIES AND
3	DENYING THERAPIES TO PATIENTS WHO MIGHT BENEFIT AND
4	BE WILLING TO GO THROUGH THESE TRIALS UNTIL YOU GET
5	THE GOLD STANDARD RANDOMIZED CONTROLLED TRIAL. IT
6	MAY BE SIMPLY JUST GETTING THE INITIAL SAFETY CUT
7	MADE AND THEN LETTING PEOPLE MAKE THEIR OWN
8	DECISIONS, LETTING CLINICIANS AND PATIENTS DECIDE
9	THAT THEY WANT TO TRY THESE PROCEDURES, AND THEN
10	COLLECTING THE DATA FROM ALL THESE PATIENTS AND
11	TURNING IT INTO SOME SORT OF MASSIVE DATABASE, AND
12	THEN GOING BACK AND LOOKING AT WHAT'S HAPPENED WITH
13	THOSE OUTCOMES AND DOING SOME DISCOVERY RESEARCH ON
14	THAT. THAT'S TO ME THE BIG IDEA IS REALLY HOW THESE
15	THERAPIES ARE GOING TO BE APPROVED.
16	DR. STEWARD: I'VE SAID THIS BEFORE, AND
17	I'LL SAY IT AGAIN. I THINK THAT CIRM HAS DONE A
18	WONDERFUL JOB IN PUTTING TOGETHER A VARIETY OF
19	PROGRAMS THAT REALLY TARGET SPECIFIC AREAS OF
20	ADVANCEMENT. THE BASIC BIOLOGY, THE DISEASE TEAM
21	AWARDS, EACH ARE FOCUSED ON A PARTICULAR AREA.
22	THE ONE THING THAT I THINK THE
23	ORGANIZATION MAY STILL LACK IS THE ABILITY TO, IF
24	YOU WANT, HARVEST OUT-OF-THE-BOX IDEAS. SO WHAT
25	WE'RE TALKING ABOUT ARE A LOT OF THE BOXES OUT THERE

1	THAT THERE ARE REQUIREMENTS FOR AT A PARTICULAR
2	PHASE OF THE DEVELOPMENTAL PROCESS. AND WHAT WE
3	LACK IS THAT ABILITY TO PICK UP ON THINGS THAT ARE
4	OUT THERE RIGHT NOW THAT WE MAY NOT KNOW ABOUT, THAT
5	SOMEBODY WOULD JUST RAISE THEIR HAND AND SAY, HEY,
6	WE ARE READY RIGHT NOW. SOME COMPANY, FOR EXAMPLE,
7	WOULD SAY I KNOW RIGHT NOW I HAVE THE FOLLOWING
8	THINGS THAT I CAN MOVE FORWARD.
9	UNFORTUNATELY THERE'S A DIFFICULTY IN
10	DOING THAT BECAUSE WE ARE A STATE AGENCY. WE HAVE
11	TO PUT OUT RFP'S. WE HAVE TO GIVE EQUAL
12	OPPORTUNITIES TO PEOPLE TO APPLY FOR SUCH THINGS.
13	AND I DON'T KNOW THE SOLUTION. JUST TO SAY IT, I
14	THINK THAT THERE'S STILL A NEED OUT THERE FOR SOME
15	OF THESE AVENUES FOR OUT-OF-THE-BOX THINGS TO COME
16	IN UNPREDICTABLY WITHOUT RFP'S OR WHATEVER.
17	MS. HUA: TO BE NIMBLE ENOUGH.
18	MR. ROTH: I'D LOVE TO TAKE THIS AS MY
19	IDEA, BUT IT'S NOT. BUT ONE THAT I THINK WE SHOULD
20	PAY ATTENTION TO IS GOING TO COME OUT OF THE
21	PUBLICATION OF MIT'S INNOVATION AND FINANCE
22	LABORATORY. AND I HAD A PRELOOK AT THIS. AND IT'S
23	THE KIND OF THING THAT GETS TO WHAT THE FUTURE MODEL
24	FOR FINANCING INNOVATION IS GOING TO LOOK LIKE,
25	WHERE THE MONEY IS GOING TO COME FROM, AND IT'S A

1	VERY DIFFERENT APPROACH. IT HAPPENS TO BE IN LIFE
2	SCIENCES THAT ARE USED AS THE EXAMPLE AND I THINK
3	WILL IN THIS PAPER.
4	IF YOU THINK ABOUT IT, THE ORIGINAL SORT
5	OF INNOVATION IN AMERICA CAME FROM LARGE COMPANIES.
6	THEY WERE NOT VENTURE BACKED. THEY GOT STARTED WITH
7	A PRODUCT AND THEY BUILT UP, BUT THEY WERE 50,
8	HUNDRED-YEAR-OLD COMPANIES, AND THAT LASTED THROUGH
9	THE '70S. AND THEN IT BEGAN TO DISSIPATE BECAUSE OF
10	THINGS I WON'T GO INTO. IN THE '80S WITH BAYH-DOLE
11	WE SUDDENLY COULD DO THE START-UP MODEL. AND THE
12	START-UP MODEL WAS BASED PRIMARILY ON GOOD SCIENCE,
13	GOOD DISCOVERIES COMING OUT OF RESEARCH INSTITUTES,
14	PUT AN ADVISORY BOARD TOGETHER, HIRE A CEO, DO A
15	COUPLE OF VENTURE ROUNDS, BUY SOME EQUIPMENT, AND
16	THEN YOU COULD GO PUBLIC. SO THE TURN WAS PRETTY
17	QUICKLY.
18	THAT TODAY IS GONE. THERE IS NOT AN IPO
19	MARKET FOR PREREVENUE COMPANIES. AND IN HEALTHCARE
20	YOU'RE NOW LOOKING DOWN THE BARREL AT TEN, TWELVE
21	YEARS OF FUNDING VERSUS TWO OR THREE AND THEN
22	SOMEBODY OWNING IT AND THE UPS AND DOWNS. SO WHEN
23	YOU TAKE ALL THAT OUT, THE BIG IDEA IS GOING TO COME
24	FROM THOSE THAT FIGURE OUT WHERE THE NEXT MODEL IS
25	GOING TO BE AND HOW THAT'S GOING TO BE FUNDED. I

1	THINK FOR US WE HAVE TO BE PART OF THAT PROCESS
2	BECAUSE WE HAVE AN EVEN BIGGER PROBLEM. WE DON'T
3	HAVE PROVEN PRODUCTS. AND SO TO START A SINGLE
4	COMPANY ON EVERY SINGLE IDEA, WHICH IS WHAT WE'RE
5	STILL DOING, PROBABLY DOESN'T MAKE SENSE. AND I
6	THINK WHEN THIS ANDREW LOWE PAPER COMES OUT, WE
7	SHOULD BE READY AND POISED TO JUMP ON THAT IDEA.
8	MS. HUA: WELL, I WANT TO THANK YOU ON
9	BEHALF OF CAMPBELL AND BEHALF OF CIRM FOR YOUR
10	INPUT. IT WAS VERY INTERACTIVE, AS ELLEN SUGGESTED,
11	AND I JUST WANT TO CLOSE ON THIS NOTE.
12	I HAVE A SEVEN-MONTH-OLD SON, FIRST BORN.
13	AND I THINK ABOUT HIS FUTURE, I WOULD LOVE FOR HIM
14	TO SAY I DON'T WANT TO BE A POLICEMAN OR A FIREMAN,
15	BUT I WANT TO WORK IN STEM CELL RESEARCH. SO WITH
16	THAT SAID, I HOPE, I WISH YOU ALL THE BEST IN THIS
17	ENDEAVOR. THANK YOU.
18	(APPLAUSE.)
19	CHAIRMAN THOMAS: THANK YOU, EMILY AND
20	JEFF. THANK YOU FOR THAT THOUGHTFUL FACILITATION
21	AND HELP IN GUIDING OUR DISCUSSION.
22	WE HAVE ONE TWO-SECOND ITEM I'D LIKE TO
23	DISPENSE WITH BEFORE LUNCH, WHICH IS THE APPROVAL OF
24	THE AUGUST MINUTES.
25	MR. ROTH: MOTION TO APPROVE.

	DARRISTERS REPORTING SERVICE
1	MS. GIBBONS: SECOND.
2	CHAIRMAN THOMAS: ANY DISCUSSION? ALL IN
3	FAVOR PLEASE SAY AYE. OPPOSED? CARRIED
4	UNANIMOUSLY.
5	WE ARE GOING TO, BECAUSE OF THE FACT THAT
6	IT IS NOW LUNCHTIME SORRY, DAVID AND JEFF. GOING
7	TO HOLD YOU OVER A LITTLE BIT LONGER. WE'RE GOING
8	TO NOW BREAK FOR LUNCH. LUNCH IS NEXT DOOR. WE ARE
9	GOING TO BE HAVING LUNCH AND AT THE SAME TIME HAVING
10	A CLOSED SESSION.
11	MR. HARRISON: BECAUSE WE HAVE THREE
12	MEMBERS OF THE BOARD PARTICIPATING BY TELEPHONE, WE
13	NEED TO ASK THEM FOR THEIR VOTE ON THE VOICE VOTE
14	MOTION.
15	CHAIRMAN THOMAS: THANK YOU. ALL THOSE IN
16	FAVOR ON THE PHONE
17	MR. HARRISON: YOU NEED TO POLL THEM
18	INDIVIDUALLY.
19	CHAIRMAN THOMAS: MARIA, WOULD YOU.
20	DR. POMEROY: POMEROY. YES.
21	MS. BONNEVILLE: MARCY FEIT.
22	MS. FEIT: YES.
23	MS. BONNEVILLE: KRISTINA VUORI.
24	DR. VUORI: YES.
25	CHAIRMAN THOMAS: UNANIMOUSLY CARRIED.
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1	SO LUNCH NEXT DOOR. LIKE TO CONFINE THAT
2	TO 45 MINUTES. AS IT'S GOING TO BE A CLOSED SESSION
3	AS WELL, WOULD ASK STAFF FIRST TO GO OVER AND GET
4	YOUR LUNCH AND BRING IT BACK OVER HERE AND FOR THE
5	BOARD TO REMAIN IN THAT ROOM FOR CLOSED SESSION.
6	MR. HARRISON: FOR THE RECORD, THE BOARD
7	WILL BE CONVENING IN CLOSED SESSION TO DISCUSS
8	PERSONNEL PURSUANT TO GOVERNMENT CODE SECTION 11126
9	AND HEALTH AND SAFETY CODE SECTION
10	125290.30(F)(3)(D).
11	CHAIRMAN THOMAS: THANK YOU. WE WILL NOW
12	ADJOURN HERE FOR LUNCH, AND WE'LL COME BACK TO
13	DISCUSS THE COMMUNICATIONS PLAN.
14	(A RECESS WAS TAKEN.)
15	CHAIRMAN THOMAS: BOARD MEMBERS TAKE THEIR
16	SEATS. JAMES, DO WE HAVE ANYTHING TO REPORT OUT OF
17	CLOSED SESSION?
18	MR. HARRISON: THE BOARD TOOK NO ACTION,
19	SO THERE'S NOTHING TO REPORT.
20	CHAIRMAN THOMAS: OKAY. SO WE WANT TO
21	MOVE ALONG HERE. WE'RE LOSING A NUMBER OF OUR BOARD
22	IN ABOUT 40 MINUTES. SO WE WANT TO GET THROUGH AS
23	MUCH OF THE REMAINING AGENDA AS WE CAN.
24	JAMES, IF WE LOSE SEVERAL MEMBERS GOING TO
25	THE AIRPORT, WHAT'S THAT GOING TO DO TO OUR QUORUM,

1	ETC., AND ABILITY TO VOTE ON THE VARIOUS ACTION
2	ITEMS?
3	MR. HARRISON: I BELIEVE WE HAVE LOST ONE
4	MEMBER. SO WE'RE DOWN TO 21 MEMBERS PROVIDED THE
5	THREE ON THE PHONE HAVE REJOINED US I'M SORRY
6	22 MEMBERS. SO WE HAVE A THREE-MEMBER MARGIN.
7	CHAIRMAN THOMAS: OKAY. AND WHO IS
8	LEAVING AT 2:30? FOUR. THAT'S A PROBLEM. LET'S
9	GET MOVING.
10	DR. TROUNSON: JON, WE NEED THOSE CONCEPT
11	APPROVALS. THAT'S REALLY, REALLY URGENT.
12	CHAIRMAN THOMAS: OKAY. SO I WONDER HOW
13	QUICKLY WE CAN GET THROUGH. SO JUST IN TWO SECONDS
14	OR LESS, WE ALL KNOW, AS WE'VE HEARD IN NUMEROUS
15	MEETINGS IN THE PAST, AS WAS REITERATED TODAY, THAT
16	WE ARE MOVING INTO A NEW PHASE OF COMMUNICATIONS AT
17	WHICH WE AIM TO VERY ACTIVELY LET ALL STAKEHOLDERS
18	KNOW THE FULL EXTENT OF THE EXTRAORDINARY WORK
19	THAT'S BEING UNDERTAKEN BY OUR FUNDED SCIENTISTS.
20	AND TOWARDS THAT END, WE HAVE DEVELOPED AN
21	AMBITIOUS COMMUNICATIONS PLAN. WE CONTEMPLATE
22	BRINGING IN A NEW DIRECTOR OF PUBLIC COMMUNICATIONS
23	AND PATIENT ADVOCATE OUTREACH WHICH IS GOING TO,
24	AMONG OTHER THINGS, EMPHASIZE OUR RECOMMITMENT TO
25	INVOLVING THE PATIENT ADVOCATE COMMUNITY TO AN EVEN

1	GREATER EXTENT GOING FORWARD IN ALL ASPECTS OF
2	COMMUNICATIONS AS WELL AS OTHERWISE. AND WE HAVE
3	COMMISSIONED A COMMUNICATIONS AUDIT TO BE DONE,
4	WHICH YOU WILL HEAR ABOUT HERE PROMPTLY, ALL OF THIS
5	UNDER THE AUSPICES OF OUR AUGUST COMMUNICATIONS
6	SUBCOMMITTEE CHAIRMAN SENATOR TORRES.
7	MR. TORRES: THANK YOU. I'D LIKE TO CALL
8	ON THE FIRM OF TOWNSEND AND RAIMUNDO TO COME FORWARD
9	AND MAKE THEIR PRESENTATION AND GET TO THE
10	RECOMMENDATIONS AS QUICKLY AS YOU CAN GIVEN THE TIME
11	FACTOR THAT WE HAVE, AND THEN WE CAN OPEN IT UP.
12	THE SUBCOMMITTEE MET LAST NIGHT. THERE
13	WAS NO ACTION TAKEN BECAUSE WE DID NOT HAVE A
14	QUORUM. SO THE CONSENSUS WAS TO APPROVE THIS REPORT
15	AS WELL AS TO APPROVE THE DUTY STATEMENT OF THE
16	QUALIFICATIONS FOR THIS NEW DIRECTOR OF PUBLIC
17	COMMUNICATIONS AND PATIENT ADVOCACY. MR. TOWNSEND.
18	MR. TOWNSEND: THANK YOU, SENATOR. I WILL
19	ABBREVIATE MY THREE-HOUR REMARKS, SO THAT PEOPLE CAN
20	CATCH THEIR AIRPLANES, TO ABOUT FIVE MINUTES. AND
21	THEN MY COLLEAGUE, JEFF RAIMUNDO, WILL COME UP AND
22	GIVE OUR RECOMMENDATIONS.
23	FIRST OF ALL, VERY QUICKLY, TOWNSEND,
24	RAIMUNDO, BESLER, & USHER, JEFF RAIMUNDO, ONE OF MY
25	COLLEAGUES, 20 YEARS AS A REPORTER, 20 YEARS IN THE

1	PUBLIC RELATIONS, PUBLIC AFFAIRS BUSINESS. CHRIS
2	DEUTSCHMAN, WHO ALSO WORKED ON THIS PROJECT, 15
3	YEARS IN PUBLIC RELATIONS. MYSELF, ALMOST 40 YEARS
4	IN BOTH PUBLIC AFFAIRS, PUBLIC RELATIONS, AND
5	POLITICAL CONSULTING, AND HAVING PASSED SEVERAL BOND
6	MEASURES MYSELF.
7	WE LOOKED AT THIS ASSIGNMENT WHICH WAS
8	GIVEN TO US WHICH WAS TO CREATE A PLAN AND A
9	STRUCTURE TO MAXIMIZE STRONG RESPONSIVE
10	COMMUNICATIONS AND TO BROADEN THE EFFORT OF CIRM.
11	AS YOU SAW IN THE STRATEGIC PLAN PRESENTED THIS
12	MORNING, AND YOU READ OUR REPORT, THEY FIT LIKE A
13	GLOVE BECAUSE FRANKLY WE'VE BEEN WORKING VERY
14	CLOSELY WITH THE COMMUNICATIONS STAFF. OUR
15	METHODOLOGY WAS TO INTERVIEW EVERYBODY IN THE
16	COMMUNICATIONS STAFF, ALL THE OUTREACH CONSULTANTS,
17	SENIOR MANAGEMENT, SOME OF THE FOLKS FROM THE
18	PATIENT ADVOCACY GROUPS.
19	AND THE MODEL WE USED WAS CALPERS. WE
20	HELPED SEVERAL YEARS AGO DEVELOP THEIR ENTIRE
21	COMMUNICATIONS PROGRAM. AND THE REASON WE SETTLED
22	ON THE CALPERS SITUATION IS CALPERS DEALS WITH VERY
23	DISTINCT POPULATIONS. THEY HAVE THE WHOLE
24	INVESTMENT SIDE. IT'S VERY COMPLICATED AND YOU HAVE
25	TO BE VERY CAREFUL WHAT'S SAID OR NOT SAID IN THE
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1	INVESTMENT COMMUNITY.
2	AND THEN WE HAVE THE WHOLE HEALTHCARE SIDE
3	WHERE CALPERS PROVIDES HEALTHCARE FOR ITS MEMBERS.
4	AND SO WE HAD TO BLEND TOGETHER THAT COMMUNICATIONS
5	DEPARTMENT AND FIGHT THE TENDENCY IN COMMUNICATIONS
6	FOR PEOPLE TO SILO INTO THEIR EXPERTISE. AND SO
7	THAT'S WHAT WE'VE DONE HERE.
8	WE ALSO DID A REVIEW OF THE MAINSTREAM
9	MEDIA. WE DID A REVIEW OF THE TRADE AND SCIENCE
10	MEDIA. WE TOOK TRADITIONAL COMMUNICATIONS
11	STRUCTURE. WE TOOK AND APPLIED THOSE PRINCIPLES TO
12	WHAT YOU ALREADY HAD BECAUSE WHAT YOU ALREADY HAD
13	WAS DOING A HECK OF A JOB CONSIDERING THE SIZE OF
14	THE SHOP AND THE MAGNITUDE OF THE INFORMATION THAT
15	NEEDS TO BE DISTRIBUTED.
16	AND SO THE SYNTHESIS OF TRADITIONAL, HOW
17	WE DEALT WITH CALPERS, AND WHAT YOU ALREADY HAVE
18	HERE LED TO THE RECOMMENDATIONS THAT MY COLLEAGUE
19	JEFF IS GOING TO PRESENT.
20	WE BOTH WERE SMILING IN THE BACK BECAUSE
21	OUR PRESENTATION WAS BASICALLY GIVEN BY YOU, THE
22	BOARD MEMBERS. WE HAD SO MANY VERY STRONG ADVOCATES
23	FOR WHAT WE ABSOLUTELY BELIEVE WE HAVE TO DO. WE
24	HAVE TO BROADEN IF YOU DON'T TELL YOUR STORY,
25	NOBODY KNOWS ABOUT IT. AND YOU HAVE A WONDERFUL

1	STORY, AND IT NEEDS TO BE TOLD, AND THAT'S WHAT THIS
2	PLAN IS ABOUT. SO I WOULD URGE YOU TO TAKE A
3	SECOND, READ THE PLAN. AND I'LL HAVE JEFF GIVE A
4	FEW RECOMMENDATIONS AND WE'LL MOVE QUICKLY SO THAT
5	PEOPLE CAN CATCH THEIR PLANES. THANK YOU VERY MUCH
6	FOR LETTING US WORK WITH YOU.
7	MR. TORRES: YOU HAVE TWO MINUTES, MR.
8	RAIMUNDO.
9	MR. RAIMUNDO: SINCE EVERYBODY HAS ALREADY
10	MADE THE CASE ON THE BOARD, THANK YOU, MR. VICE
11	CHAIRMAN. I'LL JUST POINT OUT REAL QUICKLY THAT
12	WHAT WE'RE SEEING HERE IN THE NEW STRATEGIC PLAN AS
13	WELL AS BOARD COMMENTS WE DO BELIEVE SHOWS A NEW
14	A COMMITMENT TO THE VERY THINGS THAT WE WERE GOING
15	TO BE RECOMMENDING TO YOU, WHICH IS COMMUNICATIONS
16	THAT ENHANCE THE SUSTAINABILITY OF WHAT YOU DO.
17	SO WHAT WE DID IS WE YOU HAVE BEFORE
18	YOU OUR REPORT. SO I WON'T GO INTO THAT DETAIL, BUT
19	I WOULD LIKE TO GO OVER THE RECOMMENDATIONS.
20	MR. TORRES: VERY QUICKLY.
21	MR. RAIMUNDO: THE RECOMMENDATIONS ARE
22	THAT WE BELIEVE THAT THE SILOS THAT DAVID REFERRED
23	TO HAVE BEEN A CONTRIBUTING FACTOR TO SOME
24	DYSFUNCTION IN THE COMMUNICATIONS ARENA OVER THE
25	LAST FEW YEARS, AS WELL AS A LACK OF COMMITMENT,
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1	FRANKLY, IN YOUR STRATEGIC PLANS IN THE PAST TO THAT
2	MAINSTREAM MEDIA PUBLIC OUTREACH. SO OUR
3	RECOMMENDATIONS ARE TO COMBAT THOSE.
4	ON PAGE 6 OF OUR RECOMMENDATIONS, WE
5	RECOMMEND THAT YOU CENTRALIZE THE MANAGEMENT AND
6	COMMUNICATIONS ACTIVITIES UNDER A MORE STRUCTURED
7	ARRANGEMENT THAT FOCUSES EVERYTHING IN A CENTRALIZED
8	WAY. YOU WILL SEE THE DETAILS THERE.
9	MR. TORRES: IT'S ON PAGE 7, MEMBERS. GO
10	AHEAD.
11	MR. RAIMUNDO: IN FRONT OF YOU AND ON THE
12	BOARD HERE IS WHAT WE BELIEVE IS THE BEST PRACTICE
13	FOR THIS ORGANIZATION IN THE WAY OF POSSIBLY
14	STRUCTURING YOUR COMMUNICATIONS STAFF. YOU WILL
15	NOTICE THAT IT IS ORGANIZED DIFFERENTLY AND FOCUSED
16	UNDER THE MANAGEMENT OR, IF YOU WILL ALLOW ME, UNDER
17	THE DIRECTION OF THE VICE CHAIRMAN FOR
18	COMMUNICATIONS AND THE SENIOR VICE PRESIDENT FOR
19	RESEARCH AND DEVELOPMENT, ELLEN AND ART. AND THE
20	SENIOR DIRECTOR OF PUBLIC COMMUNICATIONS AND PATIENT
21	ADVOCATE OUTREACH WOULD HAVE THE RESPONSIBILITY FOR
22	SUPERVISING STAFF.
23	YOU WILL ALSO SEE AND THE
24	COMMUNICATIONS EFFORT AT CIRM, SOMETHING THAT REALLY
25	DOESN'T EXIST RIGHT NOW. UNDER HIM OR HER YOU WILL
	1/18

1	SEE SEVERAL OTHER STAFF POSITIONS, SOME OF WHICH
2	CURRENTLY EXIST AND SOME WHICH ARE ADDITIONAL. WE
3	DO BELIEVE THAT YOU HAVE A BANDWIDTH ISSUE ON YOUR
4	STAFF, AND YOU COULD AUGMENT THAT STAFF TO GREAT
5	ADVANTAGE FOR YOURSELVES.
6	ANOTHER ONE OF OUR RECOMMENDATIONS IS TO
7	REBRAND CIRM AS THE STEM CELL INSTITUTE. YOU SAW
8	SOME OF THAT STARTING ALREADY TODAY IN THE STRATEGIC
9	PLAN. CALIFORNIA IS THE STEM CELL CAPITAL OF THE
10	WORLD REALLY. SO THE CALIFORNIA INSTITUTE FOR
11	REGENERATIVE MEDICINE JUST DOESN'T TELL THE STORY TO
12	YOUR GREATER AUDIENCE.
13	FOURTH RECOMMENDATION IS TO REQUIRE AN
14	ANNUAL SUBMISSION OF A COMMUNICATIONS PLAN. YOU'VE
15	HAD TWO SIGNIFICANT COMMUNICATIONS PORTIONS TO YOUR
16	STRATEGIC PLAN, ONE OF WHICH WAS NOT ADOPTED. SO WE
17	THINK THERE NEEDS TO BE A MORE REGULAR AND UPDATED
18	COMMUNICATIONS STRATEGY.
19	AND THEN WE RECOMMEND THAT YOU ESTABLISH A
20	SOLID MESSAGE PLATFORM THAT TELLS YOUR STORY. SOME
21	OF THE BOARD MEMBERS ALREADY REFERRED TO THAT.
22	MR. TORRES: PAGE 10 REFLECTS THAT.
23	MR. RAIMUNDO: AND PAGE 10 REFLECTS THAT.
24	SO I WILL LET IT GO AT THAT. IF ANYBODY HAS ANY
25	QUESTIONS, DAVID AND I WOULD BE HAPPY TO ANSWER
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1	THEM.
2	DR. JUELSGAARD: IN TERMS OF CALLING THIS
3	THE STEM CELL INSTITUTE, SO DID YOU TAKE INTO
4	ACCOUNT PROPOSITION 71 AND THE FACT THAT THE
5	CALIFORNIA CONSTITUTION WAS AMENDED TO CREATE AN
6	ORGANIZATION CALLED THE CALIFORNIA INSTITUTE OF
7	REGENERATIVE MEDICINE? HOW DO YOU COUPLE THOSE TWO?
8	MR. RAIMUNDO: YOU WOULD STILL USE THE
9	FORMAL NAME, CALIFORNIA INSTITUTE FOR REGENERATIVE
10	MEDICINE, WITHIN THE CONFINES OF THE EXISTING LAW.
11	BUT THEN ALL THE PUBLIC RELATIONS EFFORTS YOU MAKE,
12	MAYBE EVEN IN YOUR LETTERHEAD, YOU HAVE A
13	SUBSTATEMENT OF WHO ARE YOU ARE. IT'S A STATEMENT
14	OF WHAT YOU DO.
15	CHAIRMAN THOMAS: THINK OF IT AS A
16	NICKNAME, MR. JUELSGAARD.
17	MR. RAIMUNDO: MORE OF A NICKNAME, YEAH.
18	SO IT WOULD STILL ACKNOWLEDGE THE FACT THAT IN LAW
19	YOU'RE THE CIRM.
20	DR. PIZZO: CAN I JUST MAKE A POINT? SO
21	IN THIS JUST IN TERMS OF THAT, IN THESE POLITICAL
22	TIMES WHEN WE ARE THINKING ABOUT THE FUTURE AND HOW
23	WE'RE GOING TO COMMUNICATE ACROSS THE NATION, AND
24	FOLLOWING I DON'T KNOW IF THIS IS WHERE STEVE WAS
25	GOING, BUT IT SEEMS TO ME, DESPITE ALL THE VALUE
	150
	±30

1	THAT WE PUT INTO STEM CELL RESEARCH, AND TO CALL OUR
2	OWN INSTITUTE STEM CELL RESEARCH, REGENERATIVE
3	MEDICINE IS A MORE ACCEPTABLE TERM WITH LESS
4	POLITICAL CHARGE AROUND IT. SO I JUST WONDER
5	WHETHER OR NOT AT THE HIGHEST LEVEL OF OUR
6	COMMUNICATION STRATEGY WHAT YOU'VE THOUGHT ABOUT
7	THAT IN TERMS OF THE RISK-BENEFIT RATIO OF ONE
8	VERSUS THE OTHER.
9	MR. RAIMUNDO: TWO THINGS OCCUR. ONE IS
10	THAT I THINK THE VOTERS WERE ENTIRELY AWARE OF THAT
11	AT THE TIME THEY APPROVED BY A FAIRLY SIGNIFICANT
12	MARGIN THE CREATION OF THE ORGANIZATION IN THE FIRST
13	PLACE. AND SO THAT IS THEIR AFFIRMATION OF THEIR
14	WILLINGNESS TO PLUNGE IN TO STEM CELL RESEARCH.
15	AND THEN SECOND THING IS THAT I THINK YOU
16	STILL HAVE TO COMMUNICATE TO THEM WHAT YOU DO. I'M
17	NOT SURE AS A TERM OF ART, REGENERATIVE MEDICINE
18	IS PROBABLY GOOD, BUT IT'S A TERM FOR PUBLIC
19	RELATIONS. I DON'T THINK MOST PEOPLE CONNECT WITH
20	IT.
21	MR. ROTH: I'M NOT GOING TO BELABOR, BUT I
22	WANT TO AGREE WITH PHIL ON THIS, THAT YOU THINK
23	CAREFULLY ABOUT THAT.
24	MR. RAIMUNDO: SURE. AND ONE OF OUR
25	RECOMMENDATIONS, YOU WILL NOTICE LATER ON, IS

1	ADDITIONAL POLLING AND VOTER BOTH POLLING AND
2	FOCUS GROUPS, AND WE CAN TEST THAT OBVIOUSLY.
3	MR. TORRES: ANY OTHER COMMENTS?
4	MS. GIBBONS: I THINK THAT WE PERPETUATE
5	THE POLARIZATION OF STEM CELL BY AVOIDING IT. I
6	THINK IT NEEDS TO BECOME VERNACULAR. I THINK WE
7	NEUTRALIZE IT. AND IF WE MAKE IT MORE CONVERSANT
8	KIND OF IN THE EVERYDAY LEXICON, THAT THE PEOPLE DO
9	GET IT. I AGREE THAT THERE MAY BE POLITICAL
10	BENEFITS TO REGENERATIVE MEDICINE, BUT I THINK IN
11	THE COURT OF PUBLIC OPINION, THAT WE SHOULD JUST OWN
12	IT, CLAIM IT, NAME IT, AND LIVE BY IT BECAUSE THAT'S
13	WHAT IT IS.
14	MR. RAIMUNDO: I WOULD JUST ADD ONE LAST
15	THING IS THAT WE HAVE TO LOOK AT YOUR POLITICAL AND
16	SOCIAL PRESENCE AS AN INSTITUTION IN CALIFORNIA.
17	AND, YES, I THINK ON A NATIONAL STAGE, THAT IS MUCH
18	MORE TO BE WARY OF, BUT I THINK IN CALIFORNIA WE
19	HAVE A POPULATION THAT'S ALREADY DEMONSTRATED ITS
20	ACCEPTANCE.
21	DR. PIZZO: I ACCEPT I THINK THE POINTS
22	YOU MAKE, LEEZA, ARE VERY APPROPRIATE. I ACCEPT
23	THOSE TOTALLY. I WAS THINKING ON A NATIONAL STAGE,
24	AND I DO AGREE WITH YOU THAT WE DON'T WANT TO AVOID
25	WHAT WE'RE ABOUT. I'M JUST TRYING TO THINK IN TERMS
	150

1	OF WHAT THE PUBLIC OUTSIDE OF THE WORLD WE LIVE IN
2	IS GOING TO THINK AS WELL. WE DO TEND TO I KNOW
3	I DO AND WE OFTEN LIVE IN A KIND OF BUBBLE WHERE WE
4	THINK EVERYONE FEELS THE SAME THAT WE DO. THIS IS
5	YOUR WORLD. YOU KNOW IT FAR BETTER THAN I, BUT
6	THAT'S NOT ALWAYS THE AFFIRMATION.
7	I GOT INTO THIS GREAT DEBATE ONCE WITH
8	PAUL BERG WHEN WE WERE FIRST STARTING THIS PHASE
9	BECAUSE OF THE WORD "CLONING." AND HE WAS ADAMANT
10	THAT WE SHOULD JUST PUSH THAT INTO THE PUBLIC DOMAIN
11	BECAUSE IT WAS WHAT WE DID, AND WE SHOULDN'T ASSIGN
12	NEGATIVE TONALITY TO IT. BUT EVENTUALLY WE MOVED
13	AWAY FROM THAT, AND I THINK THAT WAS A GOOD STRATEGY
14	BECAUSE CLONING CARRIES SOME EXTRA MEANING.
15	I THINK WE SHOULD I TAKE YOUR POINT,
16	BUT I WOULD ARGUE THAT AS WE THINK ABOUT THIS ON A
17	NATIONAL STAGE, WHICH IS WHERE WE WANT TO BE IF
18	WE'RE GOING TO BE ULTIMATELY SUCCESSFUL, WE THINK
19	ABOUT BOTH ASPECTS.
20	MS. GIBBONS: WE'RE NOT LOSING CIRM. A,
21	WE CAN'T LEGALLY. AND, B, THERE'S TIMES WHEN IT'S
22	EXPEDIENT TO KEEP CIRM.
23	MR. RAIMUNDO: WE'RE THINKING ABOUT MORE
24	AS A MARKETING IMAGE PIECE. AND I DON'T WANT TO BE
25	TOO DEFENSIVE ABOUT WHAT YOU ARE SAYING. OF COURSE,

1	IN OUR STRATEGIC MOVING FORWARD STRATEGICALLY, WE'LL
2	ALWAYS KEEP THAT IN MIND.
3	DR. PIZZO: I USED STEM CELL BIOLOGY ALL
4	THE TIME WHEN I WAS SPEAKING ABOUT IT.
5	CHAIRMAN THOMAS: I'D LIKE TO CLOSE BY
6	SAYING IT'S A BIT UNFORTUNATE THAT THIS IS A RUSHED
7	DISCUSSION BECAUSE THERE WAS A LOT OF WORK THAT WENT
8	INTO THIS. I WOULD LIKE TO NOTE THAT JEFF SHEEHY
9	PARTICIPATED BECAUSE OF HIS EXPERTISE IN
10	COMMUNICATIONS A GREAT DEAL IN THE DISCUSSIONS ON
11	THIS PLAN AS WELL. WE THINK THIS IS A VERY GOOD
12	PLAN. WE COMMEND DAVID AND JEFF AND CHRIS AND THEIR
13	WORK. WE THINK IT ACHIEVES THE GOALS OF REALLY
14	PUSHING FORWARD A VERY COORDINATED, HIGHLY UNIFIED
15	COMMUNICATIONS EFFORT THAT PAYS ATTENTION BOTH TO
16	THE PUBLIC SIDE AND FULLY ATTENDS TO THE NEEDS OF
17	THE SCIENCE STAFF AND THEIR COMMUNICATIONS AS WELL.
18	SO, MR. CHAIR, I THINK IT'S TIME.
19	DR. PRIETO: ASK ONE QUESTION. I HAD A
20	QUESTION BECAUSE I THOUGHT THIS WAS A CHANGE FROM
21	WHAT WE HAD DISCUSSED RECENTLY. WHY THE SENIOR
22	DIRECTOR OF COMMUNICATIONS APPEARS TO REPORT BOTH TO
23	THE VICE CHAIR OF THE BOARD WHO HEADS THE
24	COMMUNICATIONS SUBCOMMITTEE AND TO THE SENIOR VP FOR
25	RESEARCH AND DEVELOPMENT. IT WOULD SEEM TO ME TO BE
	154

1	MORE APPROPRIATE TO HAVE A SINGLE REPORT, AND THAT
2	SCIENTIFIC ISSUES WOULD BE VETTED BY THE VP FOR
3	R & D.
4	MR. SHESTACK: I WAS CONFUSED BY THAT SAME
5	ISSUE. I THOUGHT ONE OF THE OBJECTS OF THE
6	REORGANIZATION WAS TO REORGANIZE TO AVOID JOINT
7	REPORTS. WAS I JUST INCORRECT ABOUT THAT?
8	CHAIRMAN THOMAS: CAN I ANSWER THAT VERY
9	QUICKLY? THE THINKING WAS AS OF LAST SPRING, THE
10	BOARD HAD VOTED TO MOVE THE PUBLIC COMMUNICATIONS TO
11	THE CHAIR'S OFFICE, BUT THE REST OF THE
12	COMMUNICATIONS STAFF WAS STILL OVER IN THE SCIENCE
13	SIDE OF THE LEDGER. IT WAS MY OPINION, BASED ON
14	ADVICE OF OUR CONSULTANTS AND IN MUCH DISCUSSION,
15	THAT THIS SHOULD ALL BE CONSOLIDATED. ALL MEMBERS
16	OF THE COMMUNICATIONS TEAM SHOULD BE IN THE OFFICE
17	OF THE CHAIR, BUT IN SO DOING, IN AN EFFORT TO MAKE
18	SURE THAT THE NEEDS OF THE SCIENCE STAFF WERE LOOKED
19	AFTER FULLY, WE CAME UP WITH THIS REPORTING SCENARIO
20	WHERE THE VICE PRESIDENT OF RESEARCH AND
21	DEVELOPMENT, IN THIS CASE DR. FEIGAL, WILL BE
22	INTEGRALLY INVOLVED WITH RESPECT TO SCIENTIFIC
23	CONTENT AND SUBSTANCE AND LOOKING TO SEE THAT THE
24	SCIENCE STAFF'S NEEDS ARE TAKEN CARE OF. ALL OTHER
25	MATTERS IN TERMS OF REPORTING WILL GO UP TO THE VICE

1	CHAIRMAN, IN THIS CASE SENATOR TORRES, AND THAT'S
2	WHY IT'S A LITTLE BIT OF AN UNUSUAL STRUCTURE, BUT
3	IT WAS AN ATTEMPT TO PULL TOGETHER EVERYTHING IN
4	SUCH A WAY THAT IT COULD WORK. AND MUCH DISCUSSION.
5	THIS HAS HAD A LOT OF DISCUSSION, AS YOU CAN
6	IMAGINE, BELIEVE THAT THIS WILL BE A VERY WORKABLE
7	SOLUTION.
8	MR. TORRES: I THINK IF WE MOVE NEXT TO
9	THE I WILL TAKE A MOTION FOR THE ENTIRE REPORT
10	RATHER THAN AD SERIATIM. IF WE MOVE TO THE DUTY
11	STATEMENT, I THINK SOME OF THE ISSUES THAT DR.
12	PRIETO AND JONATHAN HAVE RAISED ARE APPROPRIATE, AND
13	THAT'S WHY THE LANGUAGE ON PAGE 2 REALLY DELINEATES
14	THE SCIENTIFIC CONTENT ISSUES THAT THE CHAIRMAN HAS
15	JUST ARTICULATED AND WAS OF A CONCERN BY THE
16	PRESIDENT AND THE SENIOR VICE PRESIDENT OF OUR
17	INSTITUTION.
18	CAN YOU GIVE US A QUICK COMPARISON, MR.
19	HARRISON, BETWEEN WHAT WE HAD ADOPTED BEFORE AS TO
20	THESE QUALIFICATIONS TO HOW THIS IS DIFFERENT TODAY
21	BEFORE THE BOARD?
22	MR. HARRISON: YES. AS CHAIRMAN THOMAS
23	MENTIONED, IN JUNE THE BOARD ADOPTED WHAT WAS
24	ESSENTIALLY A BIFURCATED COMMUNICATIONS STRUCTURE
25	WITH SCIENTIFIC AND EDUCATION COMMUNICATIONS
	150

1	REPORTING TO THE PRESIDENT AND PUBLIC COMMUNICATIONS
2	REPORTING TO THE CHAIR. WITH THIS REPORT AT HAND
3	AND WITH OUR NEW CHAIR, WE HAVE DEVELOPED A UNIFIED
4	STRUCTURE WITH THE JOINT REPORT THAT HAS BEEN
5	ALLUDED TO.
6	AND WHAT THIS POSITION DESCRIPTION DOES IS
7	TO DEFINE THOSE AREAS FOR WHICH VICE CHAIR TORRES
8	WILL HAVE OVERSIGHT RESPONSIBILITY AND THOSE AREAS
9	AS TO WHICH DR. FEIGAL WILL HAVE OVERSIGHT
10	RESPONSIBILITY, AS WELL AS AREAS IN WHICH EACH OF
11	THEM WILL HAVE RESPONSIBILITY FOR WORKING DIRECTLY
12	WITH THE DIRECTOR OF COMMUNICATIONS TO ENSURE THAT
13	WE HAVE A UNIFIED MESSAGE.
14	MR. TORRES: IT'S ALSO IMPORTANT TO NOTE
15	THAT THE THREE POSITIONS THAT ARE ON THE CHART ON
16	PAGE 7, SCIENCE AND EDUCATION, GRAPHIC AND
17	MULTIMEDIA, AND INTERNAL AND DIGITAL ARE CURRENT
18	EMPLOYEES AT CIRM, AND THERE IS NO INTENT TO REMOVE
19	THEM FROM SUCH POSITION UNLESS THEY CHOOSE TO LEAVE.
	THEM FROM SUCH POSITION UNLESS THEY CHOOSE TO LEAVE.
20	THE ONLY NEW PERSON THAT WE WILL HAVE TO LOOK FOR IS
20 21	
	THE ONLY NEW PERSON THAT WE WILL HAVE TO LOOK FOR IS
21	THE ONLY NEW PERSON THAT WE WILL HAVE TO LOOK FOR IS ON POLICY AND PATIENT ADVOCATE OUTREACH.
21 22	THE ONLY NEW PERSON THAT WE WILL HAVE TO LOOK FOR IS ON POLICY AND PATIENT ADVOCATE OUTREACH. CHAIRMAN THOMAS: AND IT'S NOT JUST NO
21 22 23	THE ONLY NEW PERSON THAT WE WILL HAVE TO LOOK FOR IS  ON POLICY AND PATIENT ADVOCATE OUTREACH.  CHAIRMAN THOMAS: AND IT'S NOT JUST NO  INTENT TO REMOVE. WE THINK THEY'VE BEEN DOING A

	BINNISTENS REPORTING SERVICE
1	PROGRAM AND PART OF THIS UNIFIED EFFORT.
2	MR. TORRES: HAPPY TO STAY ON. ALL RIGHT.
3	ANY OTHER COMMENTS ON THIS POSITION DUTY STATEMENT
4	OR THE COMMUNICATIONS PLAN BY MEMBERS OF THE BOARD?
5	ANY PUBLIC COMMENT? THERE BEING NONE, THE CHAIR
6	WILL NOW ENTERTAIN A MOTION THAT SHOULD READ AS
7	FOLLOWS, MR. HARRISON.
8	MR. HARRISON: THE MOTION WOULD BE TO
9	APPROVE THE PROPOSAL IN THE COMMUNICATIONS PLAN TO
10	RESTRUCTURE THE COMMUNICATIONS FUNCTION AT CIRM AND
11	TO APPROVE THE REVISED POSITION DESCRIPTION FOR THE
12	SENIOR DIRECTOR OF PUBLIC COMMUNICATIONS AND PATIENT
13	ADVOCATE OUTREACH.
14	MR. TORRES: AND TO DIRECT THE STAFF TO
15	MR. HARRISON: I FORGOT MY OWN ADDITION.
16	AND TO DIRECT THE STAFF TO CONFORM THE INTERNAL
17	GOVERNANCE POLICY TO THE CHANGES REFLECTED IN THE
18	COMMUNICATIONS PLAN.
19	CHAIRMAN THOMAS: THANK YOU, MR. HARRISON.
20	MS. GIBBONS: SO MOVED.
21	MR. TORRES: IS THERE A SECOND?
22	DR. HAWGOOD: SECOND.
23	MR. HARRISON: VOICE VOTE EXCEPT AS TO
24	THOSE ON THE PHONE.
25	MR. TORRES: ALL THOSE IN FAVOR PLEASE
	150
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1	SIGNIFY BY SAYING AYE. OPPOSED? ABSTENTIONS?
2	WOULD YOU CALL THOSE ON THE PHONE, PLEASE, MARIA.
3	MS. BONNEVILLE: MARCY FEIT.
4	MS. FEIT: YES.
5	MS. BONNEVILLE: CLAIRE POMEROY.
6	DR. POMEROY: YES.
7	MS. BONNEVILLE: KRISTINA VUORI.
8	DR. VUORI: YES.
9	MR. TORRES: THE MOTION CARRIES
10	UNANIMOUSLY.
11	CHAIRMAN THOMAS: THANK YOU. WE NOW HAVE
12	ABOUT SIX ITEMS TO GET THROUGH IN 20 MINUTES OR
13	WE'RE GOING TO SET A LAND SPEED RECORD GOING
14	FORWARD. WE'RE GOING TO TAKE THEM A LITTLE OUT OF
15	ORDER. LET'S START WITH NUMBER I WANT TO MAKE
16	SURE WE GET THROUGH CERTAIN THINGS ABSOLUTELY FIRST.
17	NO. 12, CONSIDERATION OF CONCEPT APPROVAL
18	OF THE CREATIVITY AWARDS. MIKE OR PAT, ONE OF YOU
19	DOING THIS? DR. MANI VESSAL.
20	DR. VESSAL: MR. CHAIRMAN, MEMBERS OF THE
21	BOARD, PUBLIC, I KNOW WE'RE RUNNING LOW ON TIME, SO
22	I'LL MAKE THIS QUICK. I'M HERE TO INTRODUCE YOU TO
23	THE CONCEPT PROPOSAL FOR AN RFA FOR CREATIVITY
24	AWARDS, WHICH REALLY HAS THE FOLLOWING AIMS, WHICH
25	IS TO EXPOSE THE NEXT GENERATION OF CALIFORNIANS TO
	159
	±33

1	THE STEM CELL SCIENCE BY INTRODUCING HIGH SCHOOL
2	STUDENTS TO CUTTING-EDGE MEDICAL RESEARCH IN THE
3	FIELD OF STEM CELL SCIENCE.
4	WE'RE DOING THIS THROUGH SYNERGIZING WITH
5	EXISTING PROGRAMS AT CALIFORNIA INSTITUTIONS AND
6	WOULD AIM TO PROMOTE THE INVOLVEMENT OF STUDENTS
7	REPRESENTING THE DIVERSITY OF CALIFORNIA'S
8	POPULATION AND FOSTER CREATIVITY BY ENCOURAGING
9	PURSUIT OF A SECOND DISCIPLINE. AGAIN, I'LL USE A
10	QUICK EXAMPLE OF JUST STEVE JOBS, PASSING, WHO TOOK
11	CALLIGRAPHY, AND WE SAW HOW THAT REALLY PLAYED A
12	ROLE IN HIS DESIGN OF ALL THE PRODUCTS THAT HE CAME
13	UP WITH AND IN THE CREATION OF FONT. SO WE KNOW
14	THAT THIS ACTUALLY HAS WORKED IN THIS FIELD OF
15	SCIENCES AND TECHNOLOGY AND ENGINEERING.
16	THIS, OF COURSE, WAS BASED ON A PILOT
17	PROGRAM THAT WE RAN PAST SUMMER OF 2011, WHICH
18	ENROLLED 22 JUNIOR AND SENIOR STUDENTS FROM
19	CALIFORNIA HIGH SCHOOLS THAT WERE SELECTED BY FOUR
20	PARTICIPATING INSTITUTIONS. AND THEY WERE ACCEPTED
21	INTO THESE PROGRAMS BASED EITHER ON ACADEMIC
22	ACHIEVEMENT AND/OR ON THEIR SOCIOECONOMIC STATUS.
23	THEY PRESENTED THEIR RESULT OF THE
24	RESEARCH THAT THEY CARRIED OUT THROUGHOUT THE SUMMER
25	ON AUGUST 2D AT CHILDREN'S HOSPITAL IN OAKLAND, AND
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	100

1	SELECT STUDENTS GAVE TALKS. THERE WAS A TWO-MINUTE
2	VIDEO CLIP THAT I WAS GOING TO SHOW, BUT WE'RE
3	RUNNING LOW ON TIME, SO I WOULD SKIP THAT, BUT I
4	WILL REFER TO IT. IT IS ACTUALLY AVAILABLE ON OUR
5	WEBSITE FOR THOSE WHO ARE INTERESTED OF THIS POSTER
6	DAY.
7	WE DID A FOLLOW-UP SURVEY WHICH WE
8	CONDUCTED BY BOTH THE PARTICIPATING STUDENTS, BUT AS
9	WELL AS THE DIRECT MENTORS WHO WERE THE POST DOCS
10	AND THE SENIOR GRADUATE STUDENTS. AND WE HAD ABOUT
11	A 75-PERCENT RESPONSE RATE FOR THESE SURVEYS, AND
12	THEY WERE UNANIMOUSLY POSITIVE AND VERY ENTHUSIASTIC
13	TOWARDS THE PROGRAM.
14	THE PILOT PROGRAM, BUT ALSO THE UPCOMING
15	RFA WOULD ENTAIL FOUR FULL-TIME RESEARCH AND
16	TRAINING ACTIVITIES IN THE MENTORING PI'S LABORATORY
	TRAINING ACTIVITIES IN THE MENTORING IT S EABORATORY
17	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE
17 18	
	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE
18	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE
18 19	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE AND/OR DEVELOPMENTAL BIOLOGY AND WEEKLY LECTURES.
18 19 20	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE AND/OR DEVELOPMENTAL BIOLOGY AND WEEKLY LECTURES.  DISCUSSIONS AND MEETINGS WOULD BE HELD AS PART OF
18 19 20 21	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE AND/OR DEVELOPMENTAL BIOLOGY AND WEEKLY LECTURES.  DISCUSSIONS AND MEETINGS WOULD BE HELD AS PART OF THE CURRICULUM OF THESE PROGRAMS THAT ARE ALREADY
18 19 20 21 22	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE AND/OR DEVELOPMENTAL BIOLOGY AND WEEKLY LECTURES. DISCUSSIONS AND MEETINGS WOULD BE HELD AS PART OF THE CURRICULUM OF THESE PROGRAMS THAT ARE ALREADY EXISTING IN THESE INSTITUTIONS. OF COURSE, WE
18 19 20 21 22 23	WITH A DURATION OF SIX TO EIGHT WEEKS THROUGHOUT THE SUMMER. THE FOCUS WOULD BE ON STEM CELL SCIENCE AND/OR DEVELOPMENTAL BIOLOGY AND WEEKLY LECTURES. DISCUSSIONS AND MEETINGS WOULD BE HELD AS PART OF THE CURRICULUM OF THESE PROGRAMS THAT ARE ALREADY EXISTING IN THESE INSTITUTIONS. OF COURSE, WE ENCOURAGE PARTICIPATION IN A SECOND DISCIPLINE,

1	ELIGIBILITY FOR THE PROGRAM, THE PROGRAM
2	DIRECTOR WOULD BE AUTHORIZED BY THE APPLICANT
3	INSTITUTION TO OVERSEE AND MANAGE THE ENTIRE SUMMER
4	RESEARCH INTERNSHIP PROGRAM. THE INSTITUTIONS WOULD
5	BE NONPROFIT INSTITUTIONS IN CALIFORNIA WITH A
6	PREEXISTING SUMMER HIGH SCHOOL RESEARCH INTERNSHIP
7	PROGRAM, AND, OF COURSE, THEY MUST HOLD ACTIVE
8	RESEARCH LABS IN STEM CELL SCIENCE AND/OR
9	DEVELOPMENTAL BIOLOGY AND HAVE PARTICIPATING FACULTY
10	MEMBERS TO MENTOR THESE STUDENTS.
11	THE AWARDS WE'RE PLANNING ON ARE
12	APPROXIMATELY TEN AWARDS, THREE-YEAR AWARDS, UP TO
13	TEN STUDENTS PER AWARD PER YEAR. TOTAL OF 300
14	STUDENTS WOULD BE FUNDED AT THE END OF THE PROGRAM
15	WITH A DIRECT PROJECT COST OF UP TO 67,500 PER YEAR
16	AND A TOTAL ESTIMATED COST OF THE PROGRAM UP TO \$2.2
17	MILLION.
18	PROVISIONAL TIMETABLE, RELEASE OF RFA
19	WOULD BE NEXT NOVEMBER, NEXT MONTH. APPLICATIONS
20	WILL DUE IN JANUARY OF 2012. THE REVIEW OF
21	APPLICATIONS BY THE GRANTS WORKING GROUP WILL TAKE
22	PLACE IN FEBRUARY, AND WE WILL BRING THEIR
23	RECOMMENDATIONS BEFORE YOU FOR YOUR APPROVAL TO FUND
24	IN MARCH OF 2012.
25	SO IN SUMMARY, WE WOULD LIKE TO REQUEST
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1	FOR THE APPROVAL OF CONCEPT FOR CIRM CREATIVITY
2	AWARDS, WHICH IS A THREE-YEAR PROGRAM SUPPORTING
3	SUMMER RESEARCH INTERNSHIPS FOR HIGH SCHOOL STUDENTS
4	WITH A FUNDING OF APPROXIMATELY TEN AWARDS, A TOTAL
5	PROGRAM COST OF 2.2 MILLION.
6	MR. TORRES: SO MOVED.
7	MR. GOLDBERG: SECOND.
8	CHAIRMAN THOMAS: THIS, FOR EVERYBODY'S
9	BENEFIT, WAS A LIGHTS-OUT SUCCESS. DR. TROUNSON HAS
10	SAID ON A NUMBER OF OCCASIONS THAT HE THOUGHT HE WAS
11	TALKING TO POST DOCS WHEN HE WAS SPEAKING TO THE
12	HIGH SCHOOL KIDS AT THE END OF THEIR SESSION. THIS
13	IS EMINENTLY WORTH DOING AND A GREAT PROGRAM.
14	DR. LUBIN: I'M ALL FOR THIS. I'M SORRY.
15	WHAT IS THE STIPEND FOR EACH STUDENT? YOU MIGHT
16	HAVE SAID THAT AND I MISSED IT.
17	DR. VESSAL: NO, I HAVEN'T. I WILL GIVE
18	YOU THE BREAK. STUDENTS GET \$2,000. THE ACTUAL
19	STUDENTS GET \$2,000.
20	DR. LUBIN: FOR ALL SUMMER?
21	DR. VESSAL: FOR THE SUMMER AND THE
22	MENTORS, THE POST DOC, OR THE GRADUATE STUDENT WOULD
23	GET A \$1,000.
24	DR. LUBIN: THAT'S GOING TO EXCLUDE
25	MINORITIES FROM APPLYING TO THIS BECAUSE MOST OF THE

1	KIDS THAT WE HAVE IN OUR SUMMER PROGRAM, WHICH WE'VE
2	HAD FOR 30 YEARS, ALSO HELP SUPPORT THEIR FAMILIES.
3	THERE'S NO WAY THEY'RE GOING TO BE ABLE TO DO A
4	FULL-TIME JOB FOR 2,000 FOR THE SUMMER.
5	DR. VESSAL: I HAVE TO SAY THAT WE HAVE
6	MADE UP FOR THAT POPULATION OF STUDENTS. WE'VE MADE
7	AN EXCEPTION, FOR INSTANCE, FOR UCSF WHERE THEY DO
8	COME THAT SOCIOECONOMIC BACKGROUND WAS THEIR MAIN
9	CRITERIA FOR EXCEPTION. WE DID MAKE AN EXCEPTION
10	AND THEY DID 20 HOURS A WEEK BECAUSE THEY HAD TO
11	HOLD ANOTHER JOB FOR THAT.
12	WE HAD A PUSHBACK FROM ALL THE
13	INSTITUTIONS WITH THE PROGRAMS BECAUSE THEY THOUGHT
14	ANY FIGURE ABOVE 2,000 WAS UNREASONABLE BECAUSE
15	THEIR FUNDING LEVELS WERE NOT EVEN AT 2,000, AND SO
16	THE DISCREPANCY BETWEEN OUR FUNDING AND THEIR LEVEL
17	WOULD HAVE BEEN
18	DR. LUBIN: NIH FUNDS AT 6,000 FOR TWO
19	MONTHS, 3,000 A MONTH.
20	DR. VESSAL: FOR A SIX TO EIGHT WEEK.
21	DR. LUBIN: WE'VE HAD A PROGRAM FOR 30
22	YEARS FUNDED BY NHLBI THAT FUNDS 20 STUDENTS NOW
23	IT FUNDS 20 STUDENTS EVERY SUMMER, AND THEY GET
24	6,000 A STUDENT, 3,000 A MONTH FOR TWO MONTHS. THEY
25	HAVE TO WORK FULL TIME, AND IT'S FOR

SOCIOECONOMICALLY CHALLENGED STUDENTS.
CHAIRMAN THOMAS: IS THERE ANY REASON THAT
WE CAN'T INCREASE THE AMOUNT?
DR. JUELSGAARD: INCREASE THE AMOUNT FOR
EVERYBODY OR JUST THOSE THAT REACH A CERTAIN
SOCIOECONOMIC STATUS?
DR. PRIETO: OR MAKE SOME KIND OF
ALLOWANCE WITHIN THE PROGRAM TO ALLOW IT.
CHAIRMAN THOMAS: TO TAKE INTO ACCOUNT
SOCIOECONOMIC STATUS.
DR. LUBIN: WE HAVE ANOTHER 20 STUDENTS
THAT VOLUNTEER WHO COME FROM GROUPS THAT DON'T NEED
THE STIPEND, BUT WANT TO DO THE WORK.
DR. PIZZO: I ACCEPT THE POINTS THAT ARE
BEING MADE. I THINK THAT THIS IS A REAL ISSUE THAT
DR. LUBIN IS REFERRING TO. WE DO ALSO HAVE SUCH
PROGRAMS, HAVE HAD THEM FOR A VERY LONG TIME. WE
DON'T PAY AS MUCH, AND MANY OF THEM, MOST OF THEM
ARE SOCIOECONOMICALLY DEPRIVED STUDENTS AND THEY'VE
DONE FINE WITH IT. SO I THINK THERE ARE WAYS OF
DOING IT. IF THERE'S FLEXIBILITY IN THAT REGARD, I
THINK THAT WOULD BE GREAT.
THE POINT I WAS GOING TO MAKE JUST VERY
QUICKLY IS THAT WHEN YOU'RE LOOKING FOR A METRIC OF
SUCCESS OF CIRM GOING FORWARD, THIS IS ANOTHER GREAT
165

1	ONE TO UNDERSCORE BECAUSE REGARDLESS OF WHAT
2	HAPPENS, I THINK WE ALL KNOW THIS IS GOING TO CHANGE
3	LIVES AND CHANGE CAREERS IN A VERY SIGNIFICANT WAY.
4	AND I WOULD REALLY INCLUDE THAT IN OUR REGISTER OF
5	GOOD THINGS TO DO.
6	CHAIRMAN THOMAS: WE HAVE A MOTION ON THE
7	FLOOR. I GUESS THE QUESTION IS CAN WE AMEND THAT TO
8	DIRECT STAFF PROVISIONALLY APPROVE THIS, DIRECT
9	STAFF TO DEVELOP SOME FLEXIBILITY WHICH TAKES INTO
10	ACCOUNT SOCIOECONOMIC
11	DR. LUBIN: SO I WOULD PROPOSE THAT YOU
12	CAN GIVE THE SAME AWARD TO EACH PLACE FOR TEN, BUT
13	WE MIGHT DECIDE WE ONLY WANT FIVE STUDENTS, BUT USE
14	THE TEN AWARDS THAT WE GET TO COVER MORE STIPEND FOR
15	THE STUDENTS, AND THAT THE REVIEW PROCESS COULD
16	CONSIDER WHETHER THAT MAKES SENSE.
17	DR. PIZZO: I WOULD DISAGREE WITH YOU
18	THERE. I WOULD LOVE TO SEE MORE STUDENTS BE
19	SUPPORTED. SO I WOULD SUGGEST THAT WE TRY AND LOOK
20	AT THE FLEXIBILITY OF THE FUNDING.
21	DR. VESSAL: AGAIN, AS I SAID, WE MADE THE
22	EXCEPTION FOR UCSF EVEN FOR THE PILOT PROGRAM. WE
23	DID THAT. IT WOULD BE NO ISSUE TO MAKE THAT
24	FLEXIBILITY AND TO RAISE IT, BUT WE WOULD NEED MORE
25	MONEY IN THE BUDGET, IN THE TOTAL BUDGET.

1	DR. PIZZO: WHY DON'T YOU LOOK AT THAT.
2	CHAIRMAN THOMAS: SINCE WE WANT TO GET THE
3	RFA'S OUT IN NOVEMBER, JAMES, HOW DO WE HANDLE THIS?
4	HOW DO WE PHRASE IT IN A WAY THAT WE CAN PASS
5	SOMETHING TODAY WHICH GIVES SOME FLEXIBILITY FOR
6	DRAFTING TO TAKE INTO ACCOUNT THESE COMMENTS?
7	MR. HARRISON: I THINK YOU APPROVE THE
8	CONCEPT PLAN FOR CREATIVITY AWARDS WITH A DIRECTION
9	TO STAFF TO CONSIDER ADDING FLEXIBILITY TO TAKE INTO
10	ACCOUNT SOCIOECONOMIC STATUS OF APPLICANTS AND
11	APPROVE A BUDGET OF UP TO \$3 MILLION SO THEY HAVE
12	THAT KIND OF FLEXIBILITY.
13	CHAIRMAN THOMAS: DR. LUBIN, DOES THAT
14	WORK FOR YOU?
15	DR. LUBIN: THAT'S FINE.
16	CHAIRMAN THOMAS: WHO MADE THE ORIGINAL
17	MOTION?
18	MR. TORRES: I DID.
19	CHAIRMAN THOMAS: SENATOR, DO YOU ACCEPT
20	THE AMENDMENT?
21	MR. TORRES: MOVE AS AMENDED. SECOND?
22	MR. GOLDBERG: I ACCEPT.
23	CHAIRMAN THOMAS: ANY PUBLIC COMMENT ON
24	THIS TOPIC?
25	MS. FEIT: I JUST WANT TO SAY THAT I AGREE
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	DANNISTERS REPORTING SERVICE
1	WITH DR. PIZZO, THAT I THINK THIS IS A PROGRAM THAT
2	WILL GET US A LOT OF RECOGNITION IN THE GENERAL
3	PUBLIC. ANY TIME WE'RE HELPING THE UNDERSERVED MOVE
4	AHEAD, THIS IS A GOOD THING.
5	CHAIRMAN THOMAS: THANK YOU, MARCY. ANY
6	OTHER COMMENTS BY THE BOARD? ALL THOSE IN FAVOR OF
7	THE MOTION PLEASE SAY AYE. OPPOSED? MOTION PASSED.
8	SORRY. MOTION NOT YET PASSED.
9	MS. BONNEVILLE: MARCY FEIT.
10	MS. FEIT: YES.
11	MS. BONNEVILLE: CLAIRE POMEROY.
12	DR. POMEROY: YES.
13	MS. BONNEVILLE: KRISTINA VUORI.
14	DR. VUORI: YES.
15	CHAIRMAN THOMAS: MOTION PASSED.
16	AGENDA ITEM 13, BASIC BIOLOGY IV CONCEPT
17	APPROVAL. HEARING FROM EITHER MICHAEL OR PAT. OH,
18	IT'S DR. MANI AGAIN.
19	DR. PIZZO: I RECOMMEND APPROVAL. I LOVE
20	IT.
21	CHAIRMAN THOMAS: ANY DISCUSSION IN
22	ADVANCE OF THE PRESENTATION? DR. MANI, WE HAVE TEN
23	MINUTES FOR FIVE ITEMS.
24	DR. VESSAL: ABSOLUTELY. I WILL MAKE IT
25	QUICK. MR. CHAIRMAN, MEMBERS OF THE BOARD, AGAIN,
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1	MY PLEASURE TO BE INTRODUCING THE SECOND CONCEPT FOR
2	THE FOURTH ROUND OF BASIC BIOLOGY RFA. AS YOU KNOW,
3	THIS IS ONE OF CIRM'S CORE AND REPEATING RFA'S WHICH
4	FOSTERS CUTTING-EDGE RESEARCH.
5	AGAIN, IT'S BEEN REITERATED ENOUGH, I
6	THINK, TODAY IN DISCUSSIONS IN THE MORNING THAT
7	BASIC BIOLOGY IS REALLY A CORE NECESSITY FOR CIRM'S
8	MISSION AND ALSO IN STEM CELL BIOLOGY. SO I WILL
9	NOT GET INTO THE DETAILS OF THAT.
10	SOME OF THE FOCUS AREAS THAT HAVE ALREADY
11	BEEN IN THE PREVIOUS ROUNDS THAT WE ARE CONTINUING,
12	OF COURSE, WITH THIS ROUND AS WELL HAVE BEEN HUMAN
13	PLURIPOTENT AND ADULT STEM CELL BIOLOGY, STUDYING
14	MOLECULAR DETERMINANTS FOR CELL FATE, AND, OF
15	COURSE, UTILIZING STEM CELLS TO STUDY MECHANISMS OF
16	DISEASE. BUT FOLLOWING UP THE CEREBRAL PALSY
17	WORKSHOP AND THE RECOMMENDATIONS THAT CAME OUT OF
18	THAT, WE'VE ADDED, OF COURSE, AN ENCOURAGING SORT OF
19	FACTOR TO THIS BULLET FOCUS OF ENCOURAGING THOSE WHO
20	STUDY JUVENILE NEUROLOGICAL DISORDERS TO ALSO APPLY
21	AND TO STUDY THE MECHANISMS AND USING STEM CELLS TO
22	STUDY THE MECHANISMS OF THAT SPECTRUM OF DISEASE.
23	ANOTHER NEW ADDITION IS IMMUNOGENICITY OF
24	HUMAN STEM CELL DERIVATIVES, AND IN TRANSPLANTATION,
25	AGAIN, THIS A BOTTLENECK IN THE TRANSLATIONAL SORT

1	OF PIPELINE. AND BASIC BIOLOGY, OF COURSE, IS THERE
2	TO INFORM THE MECHANISMS OF ACTION THAT TAKE PLACE,
3	OF COURSE, AND FEED INTO IT, AS DR. FEIGAL SHOWED
4	EARLIER ON THAT CHEVRON. SO, AGAIN, THEY'RE
5	INTERLINKED.
6	ANOTHER NEW AREA THAT WE ARE INCLUDING AS
7	A FOCUS AREA IS TISSUE ENGINEERING TO STUDY THE
8	CELLULAR INTERACTIONS IN AN ARTIFICIAL ENVIRONMENT,
9	WHICH WOULD, AGAIN, SHED LIGHT, AND THERE'S A LOT OF
10	INTEREST IN THE FIELD NOW IN TISSUE ENGINEERING, AND
11	SO WE'RE REALLY JUST MOVING ON WITH THE FIELD AND
12	THE TREND AND COVERING THE AREAS THAT ARE NECESSARY
13	FOR BASIC BIOLOGY TO INFORM.
14	ELIGIBILITY, AS ALWAYS, THE PRINCIPAL
15	INVESTIGATOR MUST HOLD A PH.D. OR M.D. OR EQUIVALENT
16	DEGREE, AUTHORIZED BY THE APPLICANT INSTITUTION TO
17	CONDUCT THE PROPOSED RESEARCH IN CALIFORNIA, AND
18	MUST COMMIT A MINIMUM OF 20-PERCENT EFFORT.
19	INSTITUTIONS CAN BE EITHER NONPROFIT AND/OR
20	FOR-PROFIT INSTITUTIONS.
21	WE'RE PLANNING ON APPROXIMATELY 25 AWARDS,
22	THREE-YEAR AWARDS, AND DIRECT PROJECT COST OF UP TO
23	\$300,000 PER YEAR, AND AN ESTIMATED TOTAL PROGRAM
24	COST OF UP TO 35 MILLION. AND, OF COURSE, WE'RE
25	GOING TO BE ASSUMING A PREAPPLICATION REVIEW

1	PROCESS.
2	PROVISIONAL TIMETABLE, THE RELEASE OF RFA
3	WOULD BE NEXT MONTH IN NOVEMBER. PREAPPLICATIONS
4	WILL BE DUE IN JANUARY OF 2012. FULL APPLICATIONS
5	WILL BE DUE APRIL OF 2012. AND THE GRANTS WORKING
6	GROUP WILL REVIEW THE APPLICATIONS IN SUMMER OF
7	2012, AND WE WILL BRING THEIR RECOMMENDATIONS BEFORE
8	YOU FOR APPROVAL TO FUND IN FALL OF 2012.
9	SO IN SUMMARY, WE'D LIKE TO REQUEST FOR
10	CIRM BASIC BIOLOGY IV AWARDS TO BE FUNDED FOR UP TO
11	\$35 MILLION.
12	DR. JUELSGAARD: SO IF I READ THE REPORT,
13	THERE'S \$22.5 MILLION TOTAL OF DIRECT PROJECT COSTS.
14	THAT'S THE 300 TIMES THREE YEARS TIMES 25
15	INSTITUTIONS, IF I HAVE MAY MATH RIGHT. SO IF
16	THAT'S RIGHT, THERE'S AN ADDITIONAL 12.5 MILLION
17	WITHIN THAT 35 MILLION THAT'S NOT GOING TO DIRECT
18	PROJECT COST. WHERE DOES THAT MONEY GO?
19	DR. VESSAL: THE INDIRECTS.
20	DR. OLSON: FACILITIES COST AND INDIRECTS.
21	THESE ARE THE COMMON ONES THAT WE USE. THE
22	FACILITIES COSTS ARE BASED ON NEGOTIATED NIH RATES,
23	AND THEN THE INDIRECTS ARE CALCULATED ON TOP OF THAT
24	AT A RATE OF 20 PERCENT.
25	DR. JUELSGAARD: SO THAT'S PRETTY TYPICAL,

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1	THAT THE INDIRECT COSTS ARE ROUGHLY HALF OF THE
2	DIRECT COST OR A LITTLE BIT MORE?
3	DR. OLSON: YES. AND IT VARIES AMONG THE
4	INSTITUTIONS AND WITH THE NEGOTIATED RATE WITH THE
5	NIH OF FACILITIES DIRECT.
6	DR. LUBIN: CAN I JUST GET A CLARIFICATION
7	ON THE DEFINITION OF STEM CELLS FOR THIS PEDIATRIC
8	NEUROLOGIC OR THE CHILDHOOD BECAUSE AT THE CP
9	MEETING, A LOT OF CORD BLOOD STEM CELLS WERE USED.
10	IS THAT EXCLUDED BECAUSE IN THE PAST THERE'S BEEN
11	QUESTION WHETHER THAT'S REASONABLE TO APPLY OR NOT?
12	I JUST WAS CURIOUS WHETHER CIRM WAS CHANGING THEIR
13	ATTITUDE ABOUT THAT OR INCLUSION OF THOSE STEM CELLS
14	IN THIS PROCESS.
15	DR. VESSAL: WE'RE NOT REALLY BEING
16	EXCLUSIVE FOR ANY CELL TYPE AS LONG THEY'RE TRULY
17	STEM CELLS THAT ARE BEING UTILIZED TO STUDY THE
18	MECHANISMS. NOW, THAT'S NOT TO SAY THAT AGAIN,
19	IT'S GRANTS WORKING GROUP THAT WILL MAKE THAT
20	JUDGMENT AND OUR EXTERNAL REVIEWERS THAT WILL MAKE
21	THAT JUDGMENT ON WHETHER IT'S A VALID STUDY TO GO
22	FORWARD WITH OR NOT AND THE RIGHT TYPE OF CELLS TO
23	BE USED.
24	DR. LUBIN: THE STUDY GROUP HAS IN THE
25	PAST SAID THAT'S REALLY NOT AN EMBRYONIC STEM CELL
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1	OR AN IPS-DERIVED. IS CORD BLOOD GOING TO BE
2	INCLUDED AS A SOURCE OF STEM CELLS BASED UPON THE CP
3	WORKSHOP?
4	DR. OLSON: FOR THIS PARTICULAR RFA,
5	THERE'S NO EXCLUSION AS TO CELL TYPE WHATSOEVER.
6	DR. LUBIN: THANK YOU.
7	DR. PIZZO: JUST ONE QUESTION ON THE
8	PERCENT EFFORT. I ASSUME THAT THE GUIDANCE, THAT IF
9	THERE WAS A LESSER PERCENT EFFORT SUGGESTED, THAT
10	THIS COULD BE DONE WITH THE APPROVAL OF THE
11	PRESIDENT, IS THAT STILL THE CASE?
12	DR. VESSAL: YES.
13	DR. PIZZO: I JUST WANT TO BE SURE THAT WE
14	HAVEN'T LOST SIGHT OF THAT.
15	DR. STEWARD: THANKS. THIS IS GOING TO
16	ACTUALLY GO BACK TO ONE OF THE EARLIER COMMENTS. I
17	ALWAYS WORRY ABOUT BOXES, AND IN THIS CASE BOXES ARE
18	THE FOCUS AREAS. WHAT DO YOU MEAN FOCUS AREAS?
19	MAYBE I MISSED THAT.
20	DR. VESSAL: WELL, AGAIN, THESE ARE NOT
21	PRIORITIES BY ANY MEANS. SO WE'RE NOT THIS IS
22	NOT TO SAY THAT THIS LIST IS A LIST OF PRIORITIES
23	FOR THE REVIEWERS TO PRIORITIZE THE PROJECTS OVER.
24	THE FOCUS AREAS BEING THE SORT OF PILLAR THE
25	FIRST TWO BULLET POINTS BEING REALLY WHAT HAS BEEN

TEM CELL ION. THAT. I GUESS IN A DISH SORT ILIZING STEM REALLY WITH YING JUVENILE AUSE IT'S BEEN AT ALL IN OUR
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OCUS AREAS

1	TALKED TO PEOPLE, WE'VE LOOKED AT WHAT WE CONSIDER
2	TO BE AREAS WHERE WE THINK THAT THERE IS SOME NEED
3	TO DO SOME WORK. SO WE HAVE SUGGESTED THAT THESE
4	ARE AREAS THAT WE'RE PARTICULARLY LOOKING FOR
5	APPLICATIONS IN. WHAT WE HAVE NOT SAID IS WE HAVE
6	NOT EXCLUDED APPLICATIONS FROM OTHER AREAS.
7	SO OBVIOUSLY IF A VERY COMPELLING PROPOSAL
8	COMES FORWARD IN AN AREA THAT DOESN'T FALL IN THE
9	LIST THAT'S ESSENTIALLY DEFINED BY THAT, THAT IS
10	OBVIOUSLY SUBJECT TO GRANTS WORKING GROUP REVIEW.
11	BUT I THINK WHAT WE'RE TRYING TO SAY IS WE HAVE
12	LOOKED AT THE FIELD, WE'VE SURVEYED THE FIELD, WE'RE
13	PARTICULARLY INTERESTED IN SEEING APPLICATIONS IN
14	THESE AREAS.
15	DR. STEWARD: SO MAYBE IF YOU CAN SAY
16	LIKE AGAIN, I'M JUST CONCERNED ABOUT THE CHANCE
17	OF MISSING SOMETHING OUT THERE THAT WE MAY NOT BE
18	AWARE OF AND IT'S SUPER. THE DEVILS ARE IN THE
19	DETAILS HERE.
20	DR. VESSAL: WE ACTUALLY HAVE LANGUAGE IN
21	THE RFA ITSELF THAT ACTUALLY STATES THAT SO THAT
22	PEOPLE ARE NOT DISCOURAGED FROM APPLYING.
23	MS. SAMUELSON: MY MEMORY IS THAT IN THE
24	LAST ROUND FOR THE BASIC BIOLOGY GRANTS, THAT THE
25	TOTAL APPLICANTS WERE DOWN. IS THAT RIGHT?

1	DR. VESSAL: NO. WE HAD 289 PREAPPS THAT
2	WERE SUBMITTED, AND 65 WERE RECOMMENDED FOR FUNDING.
3	WE'RE EXPECTING WE WELL OVER 300 FOR THIS ROUND. SO
4	IT'S DEFINITELY FULL APPLICATIONS, 65 FULL
5	APPLICATIONS WERE INVITED WHICH IS REALLY AT OUR
6	CAPACITY.
7	MS. SAMUELSON: THAT WAS PRETTY MUCH
8	CONSISTENT WITH THE ONE BEFORE. OKAY. GREAT.
9	CHAIRMAN THOMAS: ANY OTHER COMMENTS? DO
10	WE HAVE ANY COMMENTS FROM THE PUBLIC? HEARING NONE,
11	ALL THOSE
12	MR. HARRISON: THE MOTION, AS I UNDERSTAND
13	IT, IS TO APPROVE THE BASIC BIOLOGY IV CONCEPT
14	APPROVAL. BUT WE WERE UNABLE TO CATCH THE SECOND
15	FOR THE RECORD. SO IF YOU COULD REMIND US WHO THE
16	SECOND ON THE MOTION WAS.
17	CHAIRMAN THOMAS: WHO WAS THE SECOND ON
18	THE MOTION? WHO WOULD LIKE TO BE THE SECOND?
19	DR. PIZZO: I'LL SECOND.
20	CHAIRMAN THOMAS: SECONDED BY THE ENTIRE
21	BOARD.
22	MR. HARRISON: DR. PULIAFITO WILL GET
23	CREDIT.
24	CHAIRMAN THOMAS: YES. HE WAS QUICKEST.
25	ALL THOSE IN FAVOR OF THIS MOTION PLEASE SAY AYE.
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1	OPPOSED?
2	MS. BONNEVILLE: MARCY FEIT.
3	MS. FEIT: YES.
4	MS. BONNEVILLE: CLAIRE POMEROY.
5	DR. POMEROY: YES.
6	MS. BONNEVILLE: KRISTINA VUORI.
7	DR. VUORI: YES.
8	CHAIRMAN THOMAS: OKAY. MOTION PASSED.
9	THE NEXT ITEM IS VERY IMPORTANT. IT'S THE
10	STRATEGIC PARTNERSHIP ELEMENT OF THE OPPORTUNITY
11	FUND COMING FROM THE IP AND INDUSTRY SUBCOMMITTEE.
12	MR. JUELSGAARD, WE HAVE ABOUT TWO MINUTES.
13	DR. JUELSGAARD: SO WE DISCUSSED THE
14	STRATEGIC PARTNERSHIP PROGRAM AT THE LAST MEETING,
15	AND THE IP SUBCOMMITTEE, WHICH WE'LL TALK ABOUT
16	RENAMING IN JUST A MOMENT, HAS TAKEN THAT UP. AFTER
17	TALKING ABOUT THIS, OUR PROPOSAL IS TO FUND THIS
18	PROGRAM TO THE FULL EXTENT OF \$30 MILLION. SO THERE
19	IS ACTUALLY A PROGRAM CREATED BEFORE THAT HAD THREE
20	ELEMENTS TO IT AND \$30 MILLION SET ASIDE TO ADDRESS
21	ALL THREE ELEMENTS, AND THEN FIVE MILLION DOLLARS
22	WAS TAKEN FROM THAT 30 AND PUT TO THE TECHNOLOGY
23	TRANSFER PROCESS, LEAVING \$25 MILLION TO ADDRESS
24	THREE AREAS.
25	SO QUICKLY, THE REASON THAT WE FELT IT WAS
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1	ESSENTIAL TO DO \$30 MILLION FOR THIS PROGRAM IS
2	TWOFOLD. FIRST, THIS IS LIKELY TO BE AN EXPENSIVE
3	PROGRAM IN THE SENSE OF ATTRACTING INDUSTRY. AND I
4	CAN GIVE YOU THE PARTICULARS AS TO WHY I BELIEVE
5	THAT'S TRUE. BUT IN ADDITION TO THAT, I THINK THERE
6	ARE ALSO THE ISSUES OF POTENTIAL CONFLICTS IF YOU
7	TRY AND FUND THREE DIFFERENT EFFORTS FROM ONE SINGLE
8	FUND BECAUSE AT ANY POINT IN TIME, NOBODY IS EXACTLY
9	SURE WHAT COMMITMENT SOMEBODY ELSE IS MAKING IN A
10	DIFFERENT DIRECTION. SO IT CAN MAKE IT A LITTLE
11	HARD TO MAKE COMMITMENTS TO SOMEBODY ELSE ABOUT
12	FUNDING IN THE ABSENCE OF KNOWING THAT FUNDS MIGHT
13	HAVE ALREADY BEEN COMITTED ONE OR TWO OTHER
14	DIRECTIONS.
15	SO WE THOUGHT BETTER JUST, TO CREATE
16	CLARITY, TO CREATE A SEPARATE FUND FOR THIS TO THE
17	TUNE OF \$30 MILLION.
18	MS. BAUM: AND TO KEEP IT SHORT AND SWEET,
19	I JUST HAVE ONE SLIDE, AND THAT IS THE CONCEPT. I'M
20	HAPPY TO GO THROUGH THE DIFFERENT PARAMETERS OF THE
21	CONCEPT VERY QUICKLY BECAUSE I KNOW TIME IS OF THE
22	ESSENCE.
23	AS YOU'VE SEEN BEFORE ON AT LEAST ONE
24	OCCASION, AND SOME OF YOU ON A NUMBER OF OCCASIONS,
25	THAT WILL ENTAIL A PROGRAM ANNOUNCEMENT THAT WILL BE

1	AVAILABLE SUBMISSIONS WILL BE AVAILABLE ON A
2	ROLLING BASIS WITH THE GRANTS WORKING GROUP
3	APPROXIMATELY TWO TIMES A YEAR. THE ELIGIBILITY
4	WILL BE FOR PROJECTS IN GOOD STANDING AND NEW
5	PROJECTS AS LONG AS THEY ARE CALIFORNIA RESEARCHERS.
6	THE PROJECTS WILL SPAN BASIC RESEARCH THROUGH AND
7	INCLUDING PHASE II CLINICAL TRIALS. THEY WILL
8	REQUIRE SOME FORM OF OUTSIDE COMMERCIAL VALIDATION
9	THAT CAN BE IN THE FORM OF AN INDUSTRY PARTNERSHIP
LO	COMMITMENT FROM A, FOR INSTANCE, CO-FUNDING FROM A
L1	LARGE BIOPHARMA, ETC., OR FROM VENTURE CAPITAL.
L2	AS STEVE SAID, THE FUNDING AMOUNT FOR THE
L3	FULL PROGRAM IS \$30 MILLION, \$10 MILLION A PROJECT
L4	UNLESS THE IP SUBCOMMITTEE RECOMMENDS AN ADDITIONAL
L5	AMOUNT. THE TERM WILL BE FOUR YEARS, AGAIN, UNLESS
L6	THE IP SUBCOMMITTEE APPROVES A LONGER PERIOD.
L7	AND I THINK THAT'S THE SUM AND SUBSTANCE
L8	OF IT. IN DECEMBER THE GOAL IS TO HAVE THE OTHER
L9	PARTS OF THE OPPORTUNITY FUND THAT WAS PRESENTED IN
20	JUNE COME BEFORE THIS BOARD FOR DIFFERENT FUNDING
21	APPROVAL AMOUNTS.
22	CHAIRMAN THOMAS: THIS IS ANOTHER THING
23	THAT HAS TAKEN A WHOLE LOT OF WORK BY ELONA, A WHOLE
24	LOT OF WORK BY STEVE AND THE IP SUBCOMMITTEE. SO
25	IT'S GETTING A LITTLE BIT OF QUICK AND SHORT SHRIFT

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1	HERE, BUT IT HAS HAD CONSIDERABLE INPUT. ANY
2	COMMENTS BY MEMBERS OF THE BOARD?
3	DR. STEWARD: JUST TO POINT OUT THAT IT
4	WAS ALSO REVIEWED BY THE SCIENCE SUBCOMMITTEE IN
5	TERMS OF THE REVIEW PROCESS.
6	CHAIRMAN THOMAS: THANK YOU FOR CLARIFYING
7	THAT. I DID NOT MEAN TO OMIT THAT. THEY SPENT
8	QUITE BIT OF TIME ON THIS AS WELL.
9	DO WE HEAR A MOTION TO APPROVE?
10	MR. TORRES: MOVED.
11	DR. PIZZO: SECOND.
12	CHAIRMAN THOMAS: ANY COMMENTS BY MEMBERS
13	OF THE PUBLIC? HEARING NONE, ANY FURTHER COMMENT BY
14	MEMBERS OF THE BOARD? ALL THOSE IN FAVOR PLEASE SAY
15	AYE. OPPOSE?
16	MS. BONNEVILLE: MARCY FEIT.
17	MS. FEIT: YES.
18	MS. BONNEVILLE: CLAIRE POMEROY.
19	DR. POMEROY: YES.
20	MS. BONNEVILLE: KRISTINA VUORI.
21	DR. VUORI: YES.
22	CHAIRMAN THOMAS: MOTION IS PASSED. VERY
23	QUICKLY, WANT TO TAKE UP ITEM 14, CONSIDERATION OF
24	APPOINTMENT OF NEW MEMBERS TO THE SCIENTIFIC AND
25	MEDICAL ACCOUNTABILITY STANDARDS WORKING GROUP. DR.
	180
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	DARRISTERS REPORTING SERVICE
1	FEIGAL.
2	DR. FEIGAL: THANK YOU VERY MUCH. THIS IS
3	BASICALLY REPLACING TWO MEMBERS ON THE STANDARDS
4	WORKING GROUP FOR TWO PEOPLE WHO HAVE LEFT, JOSE
5	CIBELLI AND JACK KRACKAUER. AND THE PROPOSED
6	MEMBERS ARE IN YOUR BINDER.
7	DR. PIZZO: DOES THIS REQUIRE A VOTE?
8	RECOMMEND APPROVAL.
9	CHAIRMAN THOMAS: YES, IT DOES. LET'S
10	MAKE THIS REALLY QUICK. WE'RE ABOUT TO LOSE FOUR
11	PEOPLE.
12	DR. PIZZO: RECOMMEND APPROVAL. WE'VE
13	ALREADY LOOKED AT THE NAMES.
14	MR. TORRES: SECOND.
15	CHAIRMAN THOMAS: ANY FURTHER DISCUSSION
16	BY MEMBERS OF THE BOARD? ANY COMMENTS BY MEMBERS OF
17	THE PUBLIC? ALL THOSE IN FAVOR PLEASE SAY AYE.
18	OPPOSED?
19	MS. BONNEVILLE: MARCY FEIT.
20	MS. FEIT: YES.
21	MS. BONNEVILLE: CLAIRE POMEROY.
22	DR. POMEROY: YES.
23	MS. BONNEVILLE: KRISTINA VUORI.
24	DR. VUORI: YES.
25	CHAIRMAN THOMAS: MOTION PASSED. WE'RE
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1	LOSING OUR MEMBERS HERE. THANK YOU, DEANS HAWGOOD
2	AND PIZZO, MR. GOLDBERG. WE'RE LOSING SOMEBODY
3	ELSE. DEAN PULIAFITO. LET'S THANK YOU ALL FOR
4	ATTENDING. WE GREATLY APPRECIATE YOUR INPUT AND
5	WORK AS ALWAYS.
6	WHAT DO WE DO, JAMES, WITH RESPECT TO THE
7	ITEMS 11 AND 15 WHICH ARE ACTION ITEMS?
8	MR. HARRISON: I THINK THAT GIVEN THE FACT
9	THAT WE'VE LOST OUR QUORUM, WE SHOULD DEFER THOSE
10	ITEMS UNTIL THE DECEMBER MEETING.
11	CHAIRMAN THOMAS: OKAY. IS DR. SLADEK
12	HERE TODAY?
13	MR. HARRISON: HE IS NOT.
14	CHAIRMAN THOMAS: WE CAN DEFER BOTH OF
15	THESE TO THE DECEMBER MEETING THEN?
16	MR. HARRISON: YES.
17	CHAIRMAN THOMAS: OKAY. IS THERE ANY
18	PUBLIC COMMENT ON ANY ITEMS THAT ANYBODY WOULD CARE
19	TO SAY ANYTHING ABOUT?
20	MS. GIBBONS: WHAT DATE IS THE DECEMBER
21	MEETING?
22	CHAIRMAN THOMAS: DECEMBER 8TH, AND IT IS
23	AT CEDARS-SINAI.
24	DR. LUBIN: SO I WOULD LIKE TO MAKE A
25	REQUEST FOR THOSE OF US THAT DIDN'T CHANGE OUR PLANE
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1	RESERVATION EARLIER AND TOOK A DAY OUT TO BE ON THE
2	CIRM BOARD, WHICH WE AGREED TO BE, THAT MEMBERS
3	SHOULD STAY FOR THE ENTIRE MEETING, AND WE SHOULD
4	NOT BE COMPRESSED BY REARRANGING FLIGHTS TO AN
5	EARLIER FLIGHT WHICH IS MORE CONVENIENT.
6	AND, J.T., IF YOU WROTE A NICE NOTE SAYING
7	FOR THOSE OF US THAT DID BLOCK OUT THE DAY SO THAT
8	WE COULD BE HERE TILL THE END, WHICH WE WERE
9	REQUESTED TO DO, THAT WE KINDLY CONSIDER THAT FOR
10	THE REST OF THE MEETINGS.
11	CHAIRMAN THOMAS: WE WILL CONVEY THAT
12	MESSAGE.
13	DR. LUBIN: DON'T PUT MY NAME ON THAT,
14	PLEASE.
15	CHAIRMAN THOMAS: IT'S ON THE RECORD AS
16	ANONYMOUSLY PUT FORTH.
17	ANY OTHER ITEMS FOR DISCUSSION? HEARING
18	NONE, DO I HEAR A MOTION TO ADJOURN? ALL IN FAVOR
19	AYE. OPPOSED? WE ARE ADJOURNED. THANK YOU VERY
20	MUCH. THANK YOU TO THOSE ON THE PHONE AS WELL FOR
21	STICKING WITH US. WE'LL SEE YOU ALL IN DECEMBER.
22	(THE MEETING WAS THEN CONCLUDED AT
23	02:39 P.M.)
24	
25	
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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 PROCEEDINGS BEFORE THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD AT THE LOCATION INDICATED BELOW

UNIVERSITY OF CALIFORNIA IRVINE PACIFIC BALLROOM D, STUDENT CENTER IRVINE, CALIFORNIA ON WEDNESDAY, OCTOBER 26, 2011

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.

BETH C. DRAIN, CSR 7152 BARRISTER'S REPORTING SERVICE 1072 BRISTOL STREET SUITE 100 COSTA MESA, CALIFORNIA (714) 444-4100