#### BEFORE THE

INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE TO THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE ORGANI ZED PURSUANT TO THE CALIFORNIA STEM CELL RESEARCH AND CURES ACT

#### REGULAR MEETING

#### VOLUME II

LOCATION: UNIVERSITY OF CALIFORNIA IRVINE

IRVINE, CALIFORNIA

DATE: WEDNESDAY, DECEMBER 10, 2008

10: 01 A. M.

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

BRS FILE NO.: 79821

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1	IRVINE, CALIFORNIA; WEDNESDAY, DECEMBER 10, 2008
2	10: 01 A. M.
3	
4	CHAIRMAN KLEIN: ALL RIGHT. THANK YOU
5	VERY MUCH. APPRECIATE EVERYONE BEING HERE. WE'RE
6	CONVENING THIS MORNING. I WOULD LIKE TO AGAIN
7	REEMPHASIZE HOW TREMENDOUS IT IS TO BE HERE AT UC
8	IRVINE. CERTAINLY WE HAVE TO RECOGNIZE THAT THE
9	HOST INSTITUTION ALWAYS PUTS A GREAT DEAL OF EFFORT
10	INTO BRINGING US TOGETHER IN A PUBLIC FORUM. AND
11	CERTAINLY THANKS TO DR. SUSAN BRYANT, A MEMBER OF
12	THE BOARD, AND DR. OS STEWARD, A MEMBER OF THE
13	BOARD, FOR HOSTING OUR INSTITUTION AT THEIR
14	UNIVERSITY RESEARCH CAMPUS.
15	IT IS ALSO IMPORTANT FOR THOSE WHO WERE
16	NOT HERE YESTERDAY TO REALIZE THAT WE HAVE A NEW
17	BOARD MEMBER, SECOND TO MY RIGHT, DR. CARMEN
18	PULIAFITO, THE DEAN OF MEDICINE AT USC. AND WE HAVE
19	TO MY FAR LEFT DR. BRENNER'S NEW ALTERNATE, DR.
20	GORDON GILL. HE IS THE FOURTH DOWN. VERY
21	DISTINGUISHED GENTLEMAN WITH GLASSES.
22	I WOULD LIKE TO BEGIN THIS MEETING,
23	MELISSA, IF WE COULD HAVE A FLAG SALUTE. BUT BEFORE
24	THAT, I WOULD LIKE TO SAY TO LEEZA GIBBONS AND THE
25	SCIENTISTS, WHO MADE THE PRESENTATION TODAY WITH THE
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	· · ·

	DARRISTERS REPORTING SERVICE
1	PATIENT ADVOCATES, WONDERFUL, BEAUTIFUL PRESENTATION
2	VERY INSIGHTFUL, AND THANK YOU VERY MUCH. I'D LIKE
3	TO ALSO THANK LYNN HARWELL ON OUR STAFF WHO
4	COORDINATED THIS AND PUT IT TOGETHER. TREMENDOUS
5	EFFORT. THANK YOU VERY MUCH.
6	LIKE TO GO FORWARD, MELISSA, INTO THE
7	PLEDGE OF ALLEGIANCE FOLLOWED BY THE ROLL CALL.
8	(THE PLEDGE OF ALLEGIANCE.)
9	MS. KING: RICARDO AZZIZ. ROBERT PRICE
10	FOR ROBERT BIRGENEAU.
11	DR. PRI CE: HERE.
12	MS. KING: FLOYD BLOOM. GORDON GILL FOR
13	DAVID BRENNER.
14	DR. GILL: HERE.
15	MS. KING: SUSAN BRYANT.
16	DR. BRYANT: HERE.
17	MS. KING: KIM WITMER FOR MARSHA CHANDLER.
18	DR. WITMER: HERE.
19	MS. KING: MARCY FEIT.
20	MS. FEIT: HERE.
21	MS. KING: MICHAEL FRIEDMAN.
22	DR. FRIEDMAN: HERE.
23	MS. KING: LEEZA GIBBONS.
24	MS. GIBBONS: HERE.
25	MS. KING: MICHAEL GOLDBERG.
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	DARRISTERS REFORTING SERVICE
1	MR. GOLDBERG: HERE.
2	MS. KING: SAM HAWGOOD.
3	DR. HAWGOOD: HERE.
4	MS. KING: BOB KLEIN.
5	CHAIRMAN KLEIN: HERE.
6	MS. KING: SHERRY LANSING.
7	MS. LANSING: HERE.
8	MS. KING: GERALD LEVEY.
9	DR. LEVEY: HERE.
10	MS. KING: TED LOVE. ED PENHOET.
11	DR. PENHOET: HERE.
12	MS. KING: PHIL PIZZO.
13	DR. PI ZZO: HERE.
14	MS. KING: CLAIRE POMEROY.
15	DR. POMEROY: HERE.
16	MS. KING: FRANCISCO PRIETO.
17	DR. PRI ETO: HERE.
18	MS. KING: CARMEN PULIAFITO.
19	DR. PULI AFI TO: HERE.
20	MS. KING: ROBERT QUINT.
21	DR. QUINT: HERE.
22	MS. KING: JEANNIE FONTANA FOR JOHN REED.
23	DR. FONTANA: HERE.
24	MS. KING: DUANE ROTH.
25	MR. ROTH: HERE.
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1	
1	MS. KING: JOAN SAMUELSON.
2	MS. SAMUELSON: HERE.
3	MS. KING: DAVID SERRANO-SEWELL.
4	MR. SERRANO-SEWALL: HERE.
5	MS. KING: JEFF SHEEHY.
6	MR. SHEEHY: HERE.
7	MS. KING: JONATHAN SHESTACK.
8	MR. SHESTACK: HERE.
9	MS. KING: AND OSWALD STEWARD.
10	DR. STEWARD: HERE.
11	MS. KING: AND FOR THE RECORD WE DO HAVE A
12	QUORUM.
13	CHAIRMAN KLEIN: THANK YOU VERY MUCH FOR
14	THIS MORNING'S BEGINNING. WE ENDED THE EVENING LAST
15	NIGHT HAVING DONE AN IN-DEPTH REVIEW OF THE TOOLS
16	AND TECHNOLOGY PROPOSED APPLICATIONS WITH
17	RECOMMENDATIONS IN THREE DIFFERENT CATEGORIES FROM
18	THE PEER REVIEW WORKING GROUP.
19	AT THE END OF THE EVENING, WE CAME TO A
20	POINT OF RECOGNIZING THAT AS THE STATE BUDGET CRISIS
21	IS VERY MUCH AN ENVIRONMENT THAT WE MUST ALWAYS TAKE
22	INTO EFFECT, WE MUST PROPERLY HUSBAND OUR FUNDS AND
23	RECOGNIZE THAT WE HAVE SET ASIDE FUNDS IN OUR BOND
24	ACCOUNT THAT WILL TAKE US ALL THE WAY THROUGH TO
25	JUNE AND LEAVE US A RESERVE. BUT THAT RESERVE NEEDS
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1	TO BE SIZED AND MAINTAINED BASED UPON REAL-TIME
2	DEVELOPING INFORMATION THAT THE TREASURER AND THE
3	OTHER CONSTITUTIONAL OFFICERS, THE DIRECTOR OF THE
4	DEPARTMENT OF FINANCE, AND THE GOVERNOR ARE TRYING
5	TO DEAL WITH DAILY.
6	IN THE END OF JANUARY, WHEN OUR BOARD
7	MEETING OCCURS, WE WILL HAVE MORE INFORMATION. AND
8	THERE WAS A DISCUSSION AT THE END OF THE EVENING
9	LAST NIGHT THAT POTENTIALLY WE SHOULD LIMIT OUR
10	APPROVALS ON TOOLS AND TECHNOLOGIES IN THIS BOARD
11	MEETING TO ESSENTIALLY OUR BUDGETED AMOUNT,
12	THEREFORE, NOT INVADING OUR RESERVE AMOUNTS, AND
13	CARRYING OVER THE OTHER APPLICATIONS TO THE JANUARY
14	MEETING, AT SUCH TIME WE'LL HAVE ADDITIONAL
15	I NFORMATI ON.
16	AS JEFF SHEEHY SAID, THERE'S A NUMBER OF
17	EXCELLENT, HIGH QUALITY, AND VERY PROMISING
18	TECHNOLOGIES THAT ARE COMING OUT OF THE TOOLS AND
19	TECHNOLOGY WORKING GROUP REVIEW AND THE APPLICANT
20	CYCLE, BUT THEY GO BEYOND OUR BUDGET. AND THE
21	DISCUSSION FOCUSED ON CAPTURING THE BEST OF THOSE,
22	IF POSSIBLE, IF WE HAD A BETTER HANDLE ON THE ACCESS
23	TO AUTHORIZED FUNDS OF THIS AGENCY, BUT FUNDS THAT
24	HAVE NOT BEEN REALIZED INTO BOND CASH ACCOUNTS. SO
25	ON A CASH FLOW BASIS, THEY'RE NOT IMMEDIATELY
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1	AVAI LABLE TO US.
2	NOW, THE ANNOUNCEMENT IN THE LAST COUPLE
3	OF DAYS, THAT THE CONTROLLER IS FREEZING THE POOLED
4	MONEY INVESTMENT ACCOUNTS, IS NOT SOMETHING THAT'S
5	IMPACTING OUR ABILITY TO DEAL WITH THESE BUDGETING
6	DECISIONS. OUR FUNDS ARE IN A SEGREGATED BOND
7	ACCOUNT. SO THE POOLED MONEY INVESTMENT FUNDS THAT
8	WE DREW DOWN LAST APRIL WE UTILIZED FOR FUNDING
9	MAJOR FACILITIES, WHICH, AS YOU REMEMBER, WE HAD TO
10	OBTAIN A DISCOUNT FOR FRONT-END FUNDING. AND THE
11	FUNDS THAT ARE NOW AVAILABLE THAT TAKE US THROUGH TO
12	JUNE ARE IN A SEGREGATED BOND ACCOUNT.
13	WITH THAT GENERAL SUMMARY OF WHAT OCCURRED
14	YESTERDAY, WE ENDED THE EVENING WITH A PROPOSED
15	MOTION. IF THE MOTION IS MADE AND SECONDED, THEN
16	THERE COULD BE DISCUSSION BY THE BOARD AND PUBLIC
17	COMMENT. SO I WOULD ASK, IN OPENING THIS SESSION,
18	IS THERE ANYONE THAT WOULD LIKE TO MAKE A MOTION TO
19	ADDRESS THE OUTCOME OF LAST NIGHT'S SESSION, AND
20	WE'LL SEE IF WE CAN PROCEED FROM THERE. JAMES.
21	MR. HARRISON: I JUST WANTED TO REMIND YOU
22	THAT WHEN WE ADJOURNED LAST NIGHT, THERE WAS A
23	MOTION PENDING TO NOT FUND THOSE APPLICATIONS IN
24	TIER 3. THE MOTION WAS MADE BY MEMBER ROTH AND
25	SECONDED BY MEMBER GIBBONS.

1	CHAIRMAN KLEIN: ALL RIGHT. SO, AGAIN,	
2	THAT MOTION WAS IN THE CONTEXT OF THE FUNDING WE	
3	HAVE AVAILABLE AND LIVING WITHIN OUR BUDGETARY	
4	CONSTRAINTS. SO WE HAVE A PENDING MOTION. IS THERE	
5	DISCUSSION ON THAT MOTION? SEEING NO DISCUSSION	
6	FROM THE BOARD ON THAT MOTION, IS THERE DISCUSSION	
7	FROM THE PUBLIC?	
8	SEEING NO DISCUSSION FROM THE PUBLIC,	
9	JAMES HARRISON, COULD YOU INSTRUCT THE MEMBERS,	
10	GIVEN THAT WE HAVE A COUPLE OF NEW MEMBERS ON THE	
11	BOARD, ON HOW THE VOTING ON THIS MOTION WILL BE	
12	CONDUCTED, PLEASE.	
13	MR. HARRISON: BECAUSE YOU WILL BE	
14	CONSIDERING THE APPLICATIONS IN TIER 3 EN BLOC, WE	
15	WOULD ASK THAT YOU VOTE EITHER FOR OR AGAINST THE	
16	MOTION WITH THE EXCEPTION OF THOSE APPLICATIONS IN	
17	WHICH YOU HAVE A CONFLICT OF INTEREST.	
18	CHAIRMAN KLEIN: SO YOU'RE SPECIFICALLY	
19	REPEATING THAT PHRASEOLOGY. AND FOR THE PUBLIC TO	
20	UNDERSTAND, THE LAWYERS AND THE STAFF, IN TAKING THE	
21	VOTE, WILL ONLY RECORD THE VOTE FOR EACH INDIVIDUAL	
22	AS TO THOSE INDIVIDUAL APPLICATIONS FOR WHICH THEY	
23	DO NOT HAVE A CONFLICT, RIGHT? SO COULD WE HAVE THE	
24	ROLL CALL, PLEASE.	
25	MS. KING: ROBERT PRICE.	
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		DARRISTERS REPORTING SERVICE
1		DR. PRICE: YES, EXCEPT FOR THOSE WITH
2	WHICH I	HAVE A CONFLICT.
3		MS. KING: GORDON GILL.
4		DR. GILL: YES, EXCEPT FOR THOSE WITH
5	WHICH I	HAVE A CONFLICT.
6		MS. KING: SUSAN BRYANT.
7		DR. BRYANT: YES, EXCEPT FOR THOSE WITH
8	WHICH I	HAVE A CONFLICT.
9		MS. KING: KIM WITMER.
10		DR. WITMER: YES, EXCEPT FOR THOSE WITH
11	WHICH I	HAVE A CONFLICT.
12		MS. KING: MARCY FEIT.
13		MS. FEIT: YES, EXCEPT FOR THOSE WITH
14	WHICH I	HAVE A CONFLICT.
15		MS. KING: MICHAEL FRIEDMAN.
16		DR. FRIEDMAN: YES, EXCEPT FOR THOSE WITH
17	WHICH I	HAVE A CONFLICT.
18		MS. KING: LEEZA GIBBONS.
19		MS. GIBBONS: YES.
20		MS. KING: MICHAEL GOLDBERG.
21		MR. GOLDBERG: YES, EXCEPT FOR THOSE WITH
22	WHI CH I	HAVE A CONFLICT.
23		MS. KING: SAM HAWGOOD.
24		DR. HAWGOOD: YES, EXCEPT FOR THOSE WITH
25	WHICH I	HAVE A CONFLICT.
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	DARRISTERS REPORTING SERVICE
1	MS. KING: BOB KLEIN.
2	CHAIRMAN KLEIN: YES.
3	MS. KING: SHERRY LANSING.
4	MS. LANSING: YES, EXCEPT FOR THOSE WITH
5	WHICH I HAVE A CONFLICT.
6	MS. KING: GERALD LEVEY.
7	DR. LEVEY: YES, EXCEPT FOR THOSE WITH
8	WHICH I HAVE A CONFLICT.
9	MS. KING: ED PENHOET.
10	DR. PENHOET: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: PHIL PIZZO.
13	DR. PIZZO: YES, EXCEPT FOR THOSE WITH
14	WHICH I HAVE A CONFLICT.
15	MS. KING: CLAIRE POMEROY.
16	DR. POMEROY: YES, EXCEPT FOR THOSE WITH
17	WHICH I HAVE A CONFLICT.
18	MS. KING: FRANCISCO PRIETO.
19	DR. PRIETO: YES, EXCEPT FOR THOSE WITH
20	WHICH I HAVE A CONFLICT.
21	MS. KING: CARMEN PULIAFITO.
22	DR. PULIAFITO: YES, EXCEPT FOR THOSE WITH
23	WHICH I HAVE A CONFLICT.
24	MS. KING: ROBERT QUINT.
25	DR. QUINT: YES, I HAVE NO CONFLICTS.
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	Diministra in ordina deri in ordina
1	MS. KING: JEANNIE FONTANA.
2	DR. FONTANA: YES, EXCEPT FOR THOSE WITH
3	WHICH I HAVE A CONFLICT.
4	MS. KING: DUANE ROTH.
5	MR. ROTH: YES.
6	MS. KING: JOAN SAMUELSON.
7	MS. SAMUELSON: YES.
8	MS. KING: DAVID SERRANO-SEWELL. JEFF
9	SHEEHY.
10	MR. SHEEHY: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: JONATHAN SHESTACK.
13	MR. SHESTACK: YES.
14	MS. KING: AND OSWALD STEWARD.
15	DR. STEWARD: YES, EXCEPT FOR THOSE WITH
16	WHICH I HAVE A CONFLICT.
17	MS. KING: WE CAN SAFELY SAY THAT MOTION
18	CARRI ED.
19	CHAIRMAN KLEIN: OKAY. THANK YOU. SO AT
20	THIS POINT WOULD COUNSEL LIKE TO SUMMARIZE OR WOULD
21	GIL SAMBRANO LIKE TO SUMMARIZE THE OUTCOMES OF THE
22	DISCUSSIONS OF LAST EVENING TO INDICATE WHICH
23	APPLICATIONS WERE TENTATIVELY BEFORE A VOTE MOVED
24	OUT OF TIER 1 INTO TIER 2?
25	DR. SAMBRANO: THERE WERE TWO APPLICATIONS
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1	THAT WERE MOVED FROM TIER 1 INTO TIER 2. THESE
2	REPRESENT APPLICATIONS 1062 AND 1050. THEY HAD
3	SCORES OF 71 FOR 1050 AND 72 FOR 1062.
4	CHAIRMAN KLEIN: THANK YOU. AND MY
5	UNDERSTANDING, JUST FOR THE BENEFIT OF EVERYONE
6	HERE, IS THAT THERE WEREN'T ANY APPLICATIONS THEN
7	MOVED FROM TIER 2 INTO TIER 1.
8	DR. SAMBRANO: THAT'S CORRECT.
9	CHAIRMAN KLEIN: THAT STATEMENT WAS THAT
10	WAS CORRECT. DR. PRI ETO.
11	DR. PRIETO: I GUESS I'M JUST CURIOUS,
12	SINCE I FEEL THAT THERE'S SOME VERY MERITORIOUS
13	APPLICATIONS IN TIER 2, WHAT OUR EXACT MECHANISM IS
14	GOING TO BE TO KEEP THESE IN SUSPENSION OR TO BE
15	ABLE TO BRING THEM BACK IN JANUARY.
16	CHAIRMAN KLEIN: SO THE PROPER MOTION, LET
17	ME PULL COUNSEL INTO THIS DISCUSSION, THE PROPER
18	MOTION WOULD BE TO MOVE THAT WE WE CAN DO IT AS
19	ONE OR TWO MOTIONS THAT WE MOVE TO APPROVE THE
20	APPLICATIONS IN TIER 1 AND THAT WE CARRY OVER FOR
21	FURTHER CONSIDERATION AT OUR MEETING AT THE END OF
22	JANUARY 2009 APPLICATIONS IN 2010 SUBJECT TO OUR
23	ANALYSIS AT THAT TIME OF THE AVAILABILITY OF FUNDS
24	TO REEXAMINE THE POTENTIAL TO AWARD ADDITIONAL FUNDS
25	FOR TIER 2.
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i	Diministers her only oblive
1	DR. PRIETO: AND THAT MOTION NEEDS TO BE
2	MADE BY SOMEONE WITHOUT A CONFLICT.
3	CHAIRMAN KLEIN: YES.
4	DR. PIZZO: SHOULDN'T IT BE DONE AS TWO
5	SEPARATE MOTIONS?
6	CHAIRMAN KLEIN: WE CAN CERTAINLY DO IT AS
7	TWO SEPARATE MOTIONS. SO WE'LL DO IT FIRST. IS
8	THERE A MOTION TO APPROVE THE TIER 1 AS CURRENTLY
9	MODIFIED FOR SESSION 1 AND SESSION 2?
10	MR. ROTH: I'LL MAKE THE MOTION TO APPROVE
11	TIER 1.
12	MR. SERRANO-SEWELL: SECOND.
13	CHAIRMAN KLEIN: MADE BY DUANE ROTH,
14	SECONDED BY DAVID SERRANO-SEWELL. IS THERE A
15	DISCUSSION? IS THERE A PUBLIC DISCUSSION? SEEING
16	NONE, WOULD YOU CALL THE ROLL? AND, AGAIN, THE NEW
17	MEMBERS, THE SAME REGIMEN, APPROVED OR DENIED EXCEPT
18	FOR THOSE WITH WHICH YOU HAVE A CONFLICT.
19	MS. KING: ROBERT PRICE.
20	DR. PRICE: YES, EXCEPT FOR THOSE WITH
21	WHICH I HAVE A CONFLICT.
22	MS. KING: GORDON GILL.
23	DR. GILL: YES, EXCEPT FOR THOSE WITH
24	WHICH I HAVE A CONFLICT.
25	MS. KING: SUSAN BRYANT.
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	DARRISTERS REPORTING SERVICE
1	DR. BRYANT: YES, EXCEPT FOR THOSE WITH
2	WHICH I HAVE A CONFLICT.
3	MS. KING: KIM WITMER.
4	DR. WITMER: YES, EXCEPT FOR THOSE WITH
5	WHICH I HAVE A CONFLICT.
6	MS. KING: MARCY FEIT.
7	MS. FEIT: YES, EXCEPT FOR THOSE WITH
8	WHICH I HAVE A CONFLICT.
9	MS. KING: MICHAEL FRIEDMAN.
10	DR. FRIEDMAN: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: LEEZA GIBBONS.
13	MS. GIBBONS: YES.
14	MS. KING: MICHAEL GOLDBERG.
15	MR. GOLDBERG: YES, EXCEPT FOR THOSE WITH
16	WHICH I HAVE A CONFLICT.
17	MS. KING: SAM HAWGOOD.
18	DR. HAWGOOD: YES, EXCEPT FOR THOSE WITH
19	WHICH I HAVE A CONFLICT.
20	MS. KING: BOB KLEIN.
21	CHAIRMAN KLEIN: YES.
22	MS. KING: SHERRY LANSING.
23	MS. LANSING: YES, EXCEPT FOR THOSE WITH
24	WHICH I HAVE A CONFLICT.
25	MS. KING: GERALD LEVEY.
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		DIMMOTERS REFORMING SERVICE
1		DR. LEVEY: YES, EXCEPT FOR THOSE WITH
2	WHI CH I	HAVE A CONFLICT.
3		MS. KING: ED PENHOET.
4		DR. PENHOET: YES, EXCEPT FOR THOSE WITH
5	WHI CH I	HAVE A CONFLICT.
6		MS. KING: PHIL PIZZO.
7		DR. PIZZO: YES, EXCEPT FOR THOSE WITH
8	WHI CH I	HAVE A CONFLICT.
9		MS. KING: CLAIRE POMEROY.
10		DR. POMEROY: YES, EXCEPT FOR THOSE WITH
11	WHI CH I	HAVE A CONFLICT.
12		MS. KING: FRANCISCO PRIETO.
13		DR. PRIETO: YES, EXCEPT FOR THOSE WITH
14	WHI CH I	HAVE A CONFLICT.
15		MS. KING: CARMEN PULIAFITO.
16		DR. PULIAFITO: YES, EXCEPT FOR THOSE WITH
17	WHI CH I	HAVE A CONFLICT.
18		MS. KING: ROBERT QUINT.
19		DR. QUINT: YES, I HAVE NO CONFLICTS.
20		MS. KING: JEANNIE FONTANA.
21		DR. FONTANA: YES, EXCEPT FOR THOSE WITH
22	WHI CH I	HAVE A CONFLICT.
23		MS. KING: DUANE ROTH.
24		MR. ROTH: YES.
25		MS. KING: JOAN SAMUELSON.
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DARRISTERS REFURITING SERVICE
MS. SAMUELSON: YES.
MS. KING: DAVID SERRANO-SEWELL.
MR. SERRANO-SEWELL: YES.
MS. KING: JEFF SHEEHY.
MR. SHEEHY: YES, EXCEPT FOR THOSE WITH
WHICH I HAVE A CONFLICT.
MS. KING: JONATHAN SHESTACK.
MR. SHESTACK: YES.
MS. KING: AND OSWALD STEWARD.
DR. STEWARD: YES, EXCEPT FOR THOSE WITH
WHICH I HAVE A CONFLICT.
MS. KING: AND THAT MOTION CARRIES.
CHAIRMAN KLEIN: THANK YOU. SO WE NOW
HAVE IN ORDER A SUBSEQUENT MOTION IF ANYONE WOULD
LIKE TO MOVE THAT WE CARRY OVER THE REMAINING GRANTS
IN CATEGORY 2 FOR SESSION 1 AND SESSION 2 TO THE
JANUARY MEETING TO ANALYZE WHETHER WE HAVE ADEQUATE
MONEY TO FUND ANY OF THE OUTSTANDING GRANT
APPLICATIONS STILL REMAINING IN THOSE CATEGORIES.
MS. GIBBONS: SO MOVED.
MR. ROTH: SECOND.
CHAIRMAN KLEIN: MOVED BY LEEZA GIBBONS,
SECONDED BY DUANE ROTH. IS THERE DISCUSSION ON THIS
MOTION? SEEING NO DISCUSSION, IS THERE PUBLIC
COMMENT ON THE MOTION?
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1	MR. SIMPSON: JOHN SIMPSON, CONSUMER
2	WATCHDOG. JUST VERY QUICKLY I WANTED TO MAKE THE
3	POINT THAT ONE OF THE THINGS LAST NIGHT THAT REALLY
4	HANDICAPPED YOUR ABILITY TO JUDGE THESE IN CONTEXT
5	WAS THE LACK OF ADEQUATE FINANCIAL INFORMATION. AND
6	I'M HOPING THAT WHEN THIS DOES GET CARRIED FORWARD
7	AND BROUGHT UP, THAT SITUATION WILL BE RECTIFIED AND
8	THAT WILL ALL BE AVAILABLE IN ADVANCE TO THE PUBLIC
9	AND OBVIOUSLY TO THE BOARD MEMBERS. SO I WANTED TO
10	GET THAT ON THE RECORD. THANK YOU.
11	CHAIRMAN KLEIN: ABSOLUTELY. MY LAST
12	DISCUSSION WITH THE TREASURER WAS ABOUT 36 HOURS AGO
13	AT 9 P.M. OR MAYBE 9:30 P.M. AND IT IS AN EVOLVING
14	TOPIC WHERE THE INFORMATION IS CHALLENGING, BUT WE
15	ARE REALLY GOING TO TRY IN REAL-TIME TO MOVE WITH IT
16	AND TO DISTRIBUTE IT TO THE PUBLIC AT THE EARLIEST
17	POSSIBLE TIME.
18	IF WE COULD CALL THE ROLL, PLEASE.
19	MS. KING: ROBERT PRICE.
20	DR. PRICE: YES, EXCEPT FOR THOSE WITH
21	WHICH I HAVE A CONFLICT.
22	MS. KING: GORDON GILL.
23	DR. GILL: YES, EXCEPT FOR THOSE WITH
24	WHICH I HAVE A CONFLICT.
25	MS. KING: SUSAN BRYANT.
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1	DR. BRYANT: YES, EXCEPT FOR THOSE WITH
2	WHICH I HAVE A CONFLICT.
3	MS. KING: KIM WITMER.
4	DR. WITMER: YES, EXCEPT FOR THOSE WITH
5	WHICH I HAVE A CONFLICT.
6	MS. KING: MARCY FEIT.
7	MS. FEIT: YES, EXCEPT FOR THOSE WITH
8	WHICH I HAVE A CONFLICT.
9	MS. KING: MICHAEL FRIEDMAN.
10	DR. FRIEDMAN: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: LEEZA GIBBONS.
13	MS. GI BBONS: YES.
14	MS. KING: MICHAEL GOLDBERG.
15	MR. GOLDBERG: YES, EXCEPT FOR THOSE WITH
16	WHICH I HAVE A CONFLICT.
17	MS. KING: SAM HAWGOOD.
18	DR. HAWGOOD: YES, EXCEPT FOR THOSE WITH
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19	WHICH I HAVE A CONFLICT.
20	MS. KING: BOB KLEIN.
21	CHAIRMAN KLEIN: YES.
22	MS. KING: SHERRY LANSING.
23	MS. LANSING: YES, EXCEPT FOR THOSE WITH
24	WHICH I HAVE A CONFLICT.
25	MS. KING: GERALD LEVEY.
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	Difficulties Religional distriction
1	DR. LEVEY: YES, EXCEPT FOR THOSE WITH
2	WHICH I HAVE A CONFLICT.
3	MS. KING: ED PENHOET.
4	DR. PENHOET: YES, EXCEPT FOR THOSE WITH
5	WHICH I HAVE A CONFLICT.
6	MS. KING: PHIL PIZZO.
7	DR. PIZZO: YES, EXCEPT FOR THOSE WITH
8	WHICH I HAVE A CONFLICT.
9	MS. KING: CLAIRE POMEROY.
10	DR. POMEROY: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: FRANCISCO PRIETO.
13	DR. PRIETO: YES, EXCEPT FOR THOSE WITH
14	WHICH I HAVE A CONFLICT.
15	MS. KING: CARMEN PULIAFITO.
16	DR. PULIAFITO: YES, EXCEPT FOR THOSE WITH
17	WHICH I HAVE A CONFLICT.
18	MS. KING: ROBERT QUINT.
19	DR. QUINT: YES, I HAVE NO CONFLICTS.
20	MS. KING: JEANNIE FONTANA.
21	DR. FONTANA: YES, EXCEPT FOR THOSE WITH
22	WHICH I HAVE A CONFLICT.
23	MS. KING: DUANE ROTH.
24	MR. ROTH: YES.
25	MS. KING: JOAN SAMUELSON.
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1	MS. SAMUELSON: YES.
2	MS. KING: DAVID SERRANO-SEWELL.
3	MR. SERRANO-SEWELL: YES.
4	MS. KING: JEFF SHEEHY.
5	MR. SHEEHY: YES, EXCEPT FOR THOSE WITH
6	WHICH I HAVE A CONFLICT.
7	MS. KING: JONATHAN SHESTACK.
8	MR. SHESTACK: YES.
9	MS. KING: AND OSWALD STEWARD.
10	DR. STEWARD: YES, EXCEPT FOR THOSE WITH
11	WHICH I HAVE A CONFLICT.
12	MS. KING: AND THAT MOTION CARRIES.
13	CHAIRMAN KLEIN: THANK YOU. THANK YOU
14	VERY MUCH. AND FOR THOSE MEMBERS OF THE PUBLIC THAT
15	WERE NOT HERE LAST NIGHT, WE HAD A VERY ROBUST
16	DEBATE LEADING UP TO THESE MOTIONS, AND THAT WILL BE
17	FULLY AVAILABLE IN THE TRANSCRIPT, WHICH IS POSTED
18	ON THE WEBSITE OF THE AGENCY.
19	MS. SAMUELSON: BOB, MAY I ASK A QUESTION?
20	THE ACTION YOU MENTIONED WAS TAKEN BY THE TREASURER,
21	CAN YOU SUMMARIZE WHAT OF STEM CELL FUNDING MONEY IS
22	FROZEN BY THAT AND WHAT IS NOT? WHAT PART OF OUR
23	AGENDA WAS STILL FUNDABLE?
24	CHAIRMAN KLEIN: ALL RIGHT. SO OUR FUNDS
25	ARE SITTING IN A BOND ACCOUNT. A BOND ACCOUNT UNDER
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	I 7U

1	THE INITIATIVE, ONCE THE BONDS ARE ISSUED, IS A
2	SEGREGATED ACCOUNT. SO OUR FUNDS ARE NOT IN THE
3	POOLED MONEY INVESTMENT SHORT-TERM LOAN ACCOUNTS
4	THAT HE IS FREEZING.
5	MS. SAMUELSON: SO WE'RE FREE TO CONTINUE
6	TO SPEND AT THE MOMENT.
7	CHAIRMAN KLEIN: THAT'S RIGHT.
8	MS. SAMUELSON: PRESUMABLY THERE ARE OTHER
9	EVENTS THAT COULD IMPACT IN THE FUTURE, BUT NOTHING
10	AT THE MOMENT.
11	CHAIRMAN KLEIN: AT THIS TIME I CAN TELL
12	YOU THAT UNDER THE INITIATIVE FUNDS RAISED BY OUR
13	BONDS ARE IN A SEGREGATED ACCOUNT, AND THEY REMAIN
14	DEDICATED BY THE VOTERS TO THE SPECIFIC USE OF WHICH
15	WE WERE COMMISSIONED TO CARRY OUT OUR MISSION
16	OBLI GATI ONS.
17	SO I WOULD LIKE TO NOW GO TO ITEM 9. AND
18	IMMEDIATELY FOLLOWING ITEM 9, I'M GOING TO TAKE A
19	SPECIAL PUBLIC COMMENT OF THREE MINUTES BECAUSE I
20	UNDERSTAND THAT THE INDIVIDUALS NEED TO LEAVE. AND
21	WE'RE VERY INDEBTED FOR OUR PATIENT ADVOCATES AT ALL
22	TIMES BEING HERE.
23	ITEM 9 IS AN APPLICATION THAT HAS GONE
24	THROUGH OUR APPEALS PROCESS. AND IF I COULD HAVE
25	DR. GIL SAMBRANO; IS THAT CORRECT? DR. SAMBRANO IS
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1	GOING TO ADDRESS THIS ITEM OR IS DR. TROUNSON? DR.
2	TROUNSON, WOULD YOU LIKE TO INTRODUCE THIS ITEM AND
3	GIVE US THE CONTEXT FOR IT? THE NEW CELL LINE
4	APPLICATION THAT WAS REREVIEWED.
5	DR. TROUNSON: THANKS, CHAIR. IN THE RFA
6	ON NEW CELL LINES, IN RESPONSE TO THE REVIEWERS'
7	REPORTS AND THE SUMMARIES BY THE STAFF, A PI, ONE
8	PI, PROPOSED THAT THERE WAS A CONCERN, A MAJOR
9	CONCERN FOR HIMSELF ABOUT A POTENTIAL PERSONAL
10	CONFLICT OF INTEREST.
11	I TOOK A LOOK THAT THIS PARTICULAR PROJECT
12	AND THE DISCUSSIONS THAT HAD ENSUED DURING THE
13	JUDGMENT OF THE PROJECT AND ALSO ON THE VOTING ON
14	THE PROJECT. AND I FELT THAT, IN MY OWN VIEW, THERE
15	WAS GROUNDS FOR A CONCERN THAT THE PROJECT HAD BEEN
16	FAIRLY REVIEWED, PROPERLY AND FAIRLY REVIEWED.
17	AND SO I APPROACHED THE CHAIRMAN OF THE
18	GRANTS WORKING GROUP AND PUT TO HIM THAT IT WOULD
19	BE IN MY INTEREST, IT WOULD BE BETTER IF WE'RE
20	ABLE TO HAVE A REREVIEW OF THAT PARTICULAR PROJECT
21	TO ENSURE THAT THE PROJECT RECEIVED A FAIR AND
22	REASONABLE REVIEW.
23	AND AS SUCH, THE CHAIRMAN OF THE GRANTS
24	WORKING GROUP AGREED WITH ME, AND WE ENTERED A
25	PROCESS THAT WAS ENJOINED BY THE PATIENT ADVOCATES

1	TO REREVIEW THAT PARTICULAR PROJECT.
2	CHAIRMAN KLEIN: THAT'S RIGHT. SO WHO
3	WOULD YOU LIKE ON THE STAFF TO REPORT THE RESULTS
4	AND SCORE FROM THE REREVIEW?
5	DR. TROUNSON: I WONDER IF I COULD ASK
6	DR. GRIESHAMMER TO PROVIDE THAT INFORMATION TO THE
7	BOARD.
8	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
9	DR. GRIESHAMMER: SO THIS WAS THE REREVIEW
10	OF APPLICATION RL-642. AND THE REVIEWERS ENDED UP
11	WITH A UNANIMOUS SCORE OF 80 FOR THIS APPLICATION.
12	AND THIS PARTICULAR INVESTIGATOR IS
13	INTERESTED IN THE POSSIBILITY OF DERIVING IMPROVED
14	HUMAN EMBRYONIC STEM CELL LINES BASED ON THE IDEA
15	THAT IT'S ACTUALLY WELL KNOWN IN THE FIELD THAT
16	MOUSE AND HUMAN EMBRYONIC STEM CELL LINES DEPEND ON
17	DIFFERENT FACTORS FOR THEIR SELF-RENEWAL. AND IT IS
18	THE HOPE OF THIS INVESTIGATOR THAT BY APPLYING SMALL
19	MOLECULES EITHER, ONE, DURING THE DERIVATION PROCESS
20	OF HUMAN EMBRYONIC STEM CELLS FROM A BLASTOCYST, IF
21	COMPOUNDS ALREADY KNOWN IN MOUSE SMALL MOLECULES TO
22	SUPPORT SELF-RENEWAL, IF THESE COMPOUNDS WERE
23	APPLIED DURING THE DERIVATION PROCESS WOULD LEAD TO
24	HUMAN EMBRYONIC STEM CELL LINES THAT MORE RESEMBLE
25	MOUSE EMBRYONIC STEM CELL LINES.

1	THE INVESTIGATOR IS ALSO PROPOSING TO USE
2	EXISTING HUMAN EMBRYONIC STEM CELL LINES, APPLY THE
3	MOLECULES THAT ARE KNOWN TO IMPROVE SELF-REMOVAL IN
4	MOUSE TO THE EXISTING HUMAN EMBRYONIC STEM CELL
5	LINES, AND HOPEFULLY TURN THEM INTO CELL LINES THAT
6	MORE RESEMBLE MOUSE EMBRYONIC STEM CELL LINES.
7	IN THE FINAL AIM, THE INVESTIGATOR
8	PROPOSES, THEN, TO CHARACTERIZE THESE NEW CELL LINES
9	FOR THEIR PLURIPOTENCY.
10	THE REVIEWERS BASICALLY IN PRINCIPLE
11	THOUGHT THAT WAS AN INTERESTING CONCEPT PROPOSED BY
12	THE INVESTIGATOR TO DERIVE HUMAN EMBRYONIC STEM CELL
13	LINES MORE RESEMBLING THOSE FROM MOUSE, BUT DID
14	WONDER WHETHER THERE WAS IF THOSE NEW CELL LINES
15	WOULD REALLY PROVE SUPERIOR NECESSARILY OVER THE
16	EXISTING HUMAN EMBRYONIC STEM CELL LINES.
17	THEY DID MENTION ONE BENEFIT THAT COULD
18	DERIVE FROM THIS IS THAT IF WE HAD HUMAN EMBRYONIC
19	STEM CELL LINES MORE SIMILAR TO THE MOUSE ONES IN
20	THE REQUIREMENTS, PERHAPS THE HUGE AMOUNT OF DATA
21	THAT HAS ALREADY BEEN GENERATED ON MOUSE EMBRYONIC
22	STEM CELL LINE SELF-RENEWAL COULD BE MORE EASILY
23	TRANSFERRED TO THE HUMAN WORK AS A POTENTIAL
24	ADVANTAGE. BUT LIKE I SAID, THEY WEREN'T SURE IF
25	THE NEW CELL LINES WOULD INDEED BE SUPERIOR TO
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THE REVIEWERS ALSO CRITICIZED THAT THE
WHOLE APPROACH WAS NOT PARTICULARLY NOVEL OR
INNOVATIVE, BUT FELT THAT THE COMBINATION OF
CHEMISTRY, HIGH THROUGHPUT SCREENING, AND BIOLOGY
WAS ACTUALLY QUITE MERITORIOUS IN THIS APPLICATION.
AND THEN THE MAIN DISCUSSION REALLY OF THE
RESEARCH DESIGN REVOLVED AROUND AIM 2 WHERE THE
INVESTIGATOR WANTS TO TURN HUMAN EMBRYONIC STEM CELL
LINES INTO MOUSE-LIKE, NOT INTO MOUSE LINES
OBVIOUSLY, BUT INTO CELL LINES THAT RESEMBLE THE
MOUSE LINES. THE REVIEWERS FELT THE OTHER TWO AIMS
WERE QUITE SOLID AND STRAIGHTFORWARD AND FEASIBLE,
BUT HAD VARIOUS POSITIVE AND NEGATIVE COMMENTS ABOUT
THIS AIM 2. AND PERHAPS MOST IMPORTANTLY, ONE
REVIEWER FELT THAT ACTUALLY AIM THIS AIM, AIM 2,
LOOKING FOR NEW MOLECULES TO CHANGE EXISTING LINES
SHOULD BE PRIORITIZED OVER AIM 1 WHERE THE
INVESTIGATOR IS LOOKING FOR DERIVATION OF NEW CELL
LINES. WHEREAS, ANOTHER REVIEWER FELT WHY EVEN DO
AIM 2 UNTIL YOU KNOW WHETHER THE MOLECULES THAT ARE
KNOWN TO WORK IN MOUSE ACTUALLY WORK IN HUMANS.
SO OVERALL THEY FELT THAT AIM 2 WAS,
INDEED, SOMEWHAT HIGH RISK, AND THEY HAD, LIKE I
SAID, DIFFERENT OPINIONS ABOUT ITS PRIORITY. VERY
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1	POSITIVE COMMENTS WERE MADE ABOUT THE INVESTIGATOR
2	HIMSELF OR HERSELF. THIS PERSON IS A WELL-KNOWN
3	CHEMICAL BIOLOGIST WITH A GOOD TRACK RECORD IN THE
4	FIELD OF HIGH THROUGHPUT SCREENING IN STEM CELLS.
5	AND THE REVIEWERS FELT THAT THERE WAS A HIGH CHANCE
6	OF SUCCESS OF THIS PROJECT. AND I'LL LEAVE IT AT
7	THAT.
8	CHAIRMAN KLEIN: ALL RIGHT. THANK YOU.
9	QUESTIONS FROM THE BOARD?
10	DR. PENHOET: WHERE WOULD THE SCORE OF 80
11	PLACE THIS WITHIN THE GRANTS WE MADE WHEN THIS GROUP
12	OF GRANTS WAS APPROVED? WHERE WAS 80 RANKED?
13	DR. GRIESHAMMER: IT PLACES IT SOLIDLY IN
14	TIER 1. THE ORIGINAL CUTOFF FOR TIER 1 WAS 75.
15	DR. TROUNSON: MR. CHAIRMAN, IT WOULD
16	ALTER THE PERSPECTIVE FROM BEING IN TIER 2 TO TIER
17	1.
18	CHAIRMAN KLEIN: OKAY. DUANE ROTH.
19	MR. ROTH: PROBABLY MISSED IT, BUT I JUST
20	WANTED TO CLARIFY. THE GRANT WAS REREVIEWED WITHOUT
21	ANY ALTERATION, RIGHT? THERE'S NO NEW DATA?
22	DR. TROUNSON: THAT'S CORRECT.
23	CHAIRMAN KLEIN: ADDITIONAL DISCUSSION FOR
24	THE BOARD?
25	MR. HARRISON: I JUST WANTED TO REMIND THE
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BOARD OF THOSE MEMBERS WHO CANNOT PARTICIPATE IN
THIS DISCUSSION.
CHAIRMAN KLEIN: ALL RIGHT.
MR. HARRISON: THEY'RE MEMBERS PRICE,
WITMER, BLOOM, AND FONTANA.
CHAIRMAN KLEIN: THANK YOU.
DR. STEWARD: CAN YOU REMIND US WHAT THE
BUDGET WAS FOR THIS RFP AND HOW MANY WHAT THE
TOTAL AMOUNT IS THAT WE HAVE ALREADY APPROVED FOR
FUNDI NG?
DR. GRIESHAMMER: YES. SO MELISSA JUST
REMINDED ME TO TELL YOU THAT YOU CAN FIND THIS UNDER
TAB 9 IN YOUR BINDERS, BUT NOT THIS PARTICULAR
INFORMATION. SO THE INFORMATION YOU JUST ASKED FOR,
ORIGINALLY THIS BOARD APPROVED TO FUND 16, UP TO 16
APPLICATIONS, AND PROVIDED UP TO \$25 MILLION FOR
THIS RFA. WE HAVE AWARDED 16 APPLICATIONS, BUT THEY
ONLY AMOUNT TO \$23.1 OR .2 MILLION. THIS PARTICULAR
APPLICATION HAS A REQUEST FOR A TOTAL OF A LITTLE
MORE THAN 1.7 MILLION, WHICH IF IT WERE FUNDED,
WOULD BRING THE TOTAL TO \$24.9 MILLION.
CHAIRMAN KLEIN: AND I WOULD
MS. LANSING: IT WOULD BE WITHIN THE
BUDGET?
DR. GRIESHAMMER: YES.
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1	CHAIRMAN KLEIN: SO THIS WAS NOT SOME ACT
2	OF GENIUS BY THE SCIENTIFIC STAFF OR THE BOARD, BUT
3	IT IS INTERESTING THAT IT, IN FACT, LANDS US RIGHT
4	IN THE BUDGET. THANK YOU VERY MUCH FOR THE
5	EXCELLENT PRESENTATION, DOCTOR.
6	SO ADDITIONAL DISCUSSION ON THIS ITEM?
7	ADDITIONAL PUBLIC DISCUSSION ON THIS ITEM?
8	MR. SIMPSON: JOHN SIMPSON FROM CONSUMER
9	WATCHDOG. I JUST WANT TO CLARIFY THIS WAS
10	REREVIEWED UNDER THE PROVISIONS OF THE GAP THAT
11	ALLOW FOR POTENTIAL CONFLICT OF INTEREST; IS THAT
12	CORRECT?
13	DR. TROUNSON: THAT IS CORRECT, JOHN. I
14	BELIEVE THAT THERE WAS GROUNDS TO CONSIDER THAT
15	THERE MAY HAVE BEEN A CONFLICT OF INTEREST.
16	DIFFICULT TO PROVE AS A PERSONAL ISSUE, BUT I
17	BELIEVE THERE WERE GROUNDS.
18	MR. SIMPSON: COULD WE BE ENLIGHTENED A
19	LITTLE BIT MORE?
20	CHAIRMAN KLEIN: THIS IS A PERSONAL
21	CONFLICT, ISSUE, NOT FINANCIAL CONFLICT.
22	MR. SIMPSON: I UNDERSTAND THE
23	DISTINCTION. I'M JUST WONDERING IF WE COULD HAVE A
24	LITTLE MORE EDIFICATION ABOUT WHAT MEASURES ARE IN
25	PLACE SO THAT THESE THINGS GET CAUGHT. WE HOPE THIS
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IS AN UNUSUAL CIRCUMSTANCE, AND WE'RE GLAD THAT IT
DID, BUT MAYBE WE COULD HAVE A LITTLE MORE
ENLIGHTENMENT ABOUT THE MEASURES THAT ARE IN PLACE
TO PREVENT PERSONAL, PROFESSIONAL, AND FINANCIAL
CONFLI CTS.
CHAIRMAN KLEIN: CERTAINLY. SO LET ME TRY
AND SUMMARIZE WHERE WE ARE TODAY WITH OUR SYSTEM,
AND PERHAPS DR. TROUNSON WOULD AUGMENT THAT. BUT
CLEARLY THE FACT THAT THIS APPEAL IS COMING BEFORE
US IS DOCUMENTATION THAT OUR APPEALS PROCESS WORKS.
AS WE DISCUSSED LAST NIGHT, IT IS POSSIBLE TO GET A
COPY OF THE ROSTER OF THE GRANTS WORKING GROUP
REVIEW PANEL. SO IF SOMEONE IS AWARE THAT THERE IS
A THEY HAVE A PERSONAL CONFLICT, THEY CAN CALL IT
TO THE ATTENTION OF THE STAFF. THE STAFF, AS THEY
DID HERE, WILL PROVIDE AN OBJECTIVE REVIEW. IF THEY
FEEL IN THE OVER ABUNDANCE OF THE NEED FOR FAIRNESS
THAT WE NEED TO HAVE A SUBSECTION REVIEW OR A NEW
REVIEW OF THE GRANTS WORKING GROUP, THEY WILL TAKE
IT THROUGH A NEW REVIEW JUST AS THEY DID HERE.
SO WE HAVE A VERY EFFECTIVE SYSTEM HERE,
AND INDIVIDUALS ARE KNOWLEDGEABLE. IT DEPENDS ON
THE INDIVIDUAL ASKING THE APPLICANT ASKING FOR A
REREVIEW, BUT THEY CERTAINLY HAVE THE INFORMATION TO
IDENTIFY WHETHER ANYONE ON THAT PANEL MIGHT BE
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1	SOMEONE WITH WHOM THEY HAVE A SIGNIFICANT PERSONAL
2	CONFLICT OFTEN OVER PASSIONATE DIFFERENCES ON THE
3	SCIENTIFIC VIEWS OF HOW THEY APPROACH A SUBJECT.
4	AND WHEN THAT PASSION GETS TO A CERTAIN LEVEL THAT
5	IT MIGHT IMPACT THE OBJECTIVENESS OF THE REVIEW, OUR
6	STAFF CAN LOOK AT THAT AND DECIDE THAT, OUT OF
7	FAIRNESS, WE SHOULD GO THROUGH THE PROCESS AS THEY
8	HAVE WITH THIS APPLICATION.
9	DR. TROUNSON: THAT'S CORRECT, CHAIR. I
10	THINK IN THE AREA OF PERSONAL CONFLICT OF INTEREST,
11	IT CAN BE DIFFICULT BECAUSE IT MAY NOT BE RECOGNIZED
12	BY BOTH SIDES. AND IF IT'S NOT PUBLIC, IT'S NOT
13	NECESSARILY EASY TO KNOW OR ABLE TO BE KNOWN. AND I
14	THINK WHAT WE DO IN A DILIGENT PROCESS IS EXAMINE
15	WHETHER THERE WAS ANY EVIDENCE OF AN UNBIASED
16	APPROACH, AN UNBLASED MARKING. AND IF THERE WAS
17	NONE, THEN WE CAN CONCLUDE THAT THE PROJECT WAS
18	NOT IN OTHER PROJECTS THAT MIGHT HAVE BEEN
19	CLAIMED AS CONFLICTS, THERE WAS NO CONFLICT EVIDENT
20	IN THOSE CIRCUMSTANCES.
21	BUT WHERE THERE WAS STRONG DISCUSSION OR
22	DISAGREEMENT AND IF THE MARK WAS PRIMARILY DIVERGENT
23	FROM THE MEAN, THAT WOULD CONCERN ME AND IT WOULD
24	CONCERN STAFF.
25	CHAIRMAN KLEIN: AND I WOULD POINT OUT
	206

1	THAT PRIOR TO ANY WORKING SESSION, ALL THREE LEVELS
2	OF POTENTIAL CONFLICTS ARE SCREENED. THERE ARE A
3	LIST SET UP. ANYONE WITH A PERSONAL OR FINANCIAL OR
4	ANY TYPE OF A CONFLICT OR PERCEIVED CONFLICT IS
5	ESCORTED FROM THE ROOM. THERE'S A LOGBOOK TAKEN OF
6	THAT. THEY'RE ONLY ALLOWED BACK IN THE ROOM AFTER
7	THAT APPLICATION IS DISCUSSED. SO WE HAVE BOTH AN
8	INITIAL FIREWALL TO PROTECT THE SYSTEM, WE HAVE THE
9	SECONDARY FALLBACK SYSTEM TO PROTECT THE SYSTEM,
10	AND, AGAIN, THE FACT THAT THIS HAS BEEN BEFORE US IN
11	THE COURSE OF OUR PROPER APPEALS PROCESS IS EVIDENCE
12	THAT IT IS WORKING.
13	ALL RIGHT.
14	MR. ROTH: IF YOU COULD JUST TAKE THAT,
15	BECAUSE THIS CAME UP LAST NIGHT, ONE OF THE COMMENTS
16	IN THE PUBLIC WAS AROUND THIS CONFLICT OF INTEREST
17	AND FINDING OUT WHO ACTUALLY REVIEWED THE PAPER.
18	AND I THOUGHT WE SAID THAT YOU COULDN'T FIND THAT
19	OUT. YOU COULD ONLY KNOW THE GROUP, THE TOTAL, NOT
20	THE INDIVIDUAL.
21	CHAIRMAN KLEIN: SO IF YOU KNOW THE GROUP
22	IN TOTAL, THEN YOU CAN WRITE A LETTER, IF YOU FEEL
23	YOUR MARK IS DIVERGENT, TO THE STAFF, AND THEY CAN
24	EXAMINE WHO REVIEWED THE PAPER AND WHAT THE EFFECT
25	WAS OF EACH SCORE. AND IF THE SCORE, FOR EXAMPLE,

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1	OF THAT PERSON ON WHICH YOU HAVE DOCUMENTED HISTORY
2	OF PERSONAL CONFLICT IS DIVERGENT, IT RAISES THE
3	ISSUE OF OBJECTIVITY, AND THE STAFF WILL WEIGH THAT.
4	MANY TIMES BECAUSE YOU HAVE 15 DIFFERENT
5	PEOPLE PUTTING SCORES IN, IT WON'T CREATE A
6	DIVERGENCE EFFECTIVELY IN THE SCORE TO MAKE A
7	DIFFERENCE. BUT WHEN IT DOES, THE STAFF CAN
8	CERTAINLY HAVE A REREVIEW, AS THEY DID HERE, TO
9	PROTECT THE SYSTEM AND THE OBJECTIVITY AND MAKE SURE
10	WE GET THE BEST SCIENCE.
11	DR. BRYANT: I HAVE A QUESTION ABOUT THE
12	APPLICATION SINCE I NEVER APPLIED FOR A CIRM GRANT.
13	BUT IS IT POSSIBLE FOR SOMEONE APPLYING FOR A GRANT
14	TO LIST PEOPLE THAT THEY WOULD PREFER NOT TO HAVE
15	REVIEW IT? I KNOW THAT YOU CAN FOR NSF GRANTS AND
16	OTHER KINDS OF GRANTS. WHEN YOU HAVE A KNOWN
17	HISTORY OF THAT KIND OF THING.
18	DR. TROUNSON: I WANT TO MAKE SURE WE
19	COVER THAT OVER ALL THE YEARS, SUSAN, THAT YOU'RE
20	ASKI NG.
21	DR. SAMBRANO: SO THERE ISN'T A FORMAL
22	PROCESS BY WHICH APPLICANTS DO THAT, BUT I DO OFTEN
23	GET CALLS ABOUT PARTICULAR INDIVIDUALS WHO AN
24	APPLICANT MIGHT FEEL THEY HAVE A CONFLICT. SO WE DO
25	TAKE THOSE INTO CONSIDERATION DEPENDING ON THE
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1	NATURE OF THE CONFLICT WHEN WE THEN MAKE SPECIFIC
2	ASSIGNMENTS. SO THAT IS NOTED. BASICALLY IF
3	THERE'S A PROCESS, IT'S BASICALLY TO CONTACT ME.
4	DR. BRYANT: SO IT MIGHT BE FAIRER IF WE
5	MADE THAT JUST A GENERAL STATEMENT. I REALIZE THIS
6	IS AN ADDITIONAL STEP; BUT I THINK, GIVEN THAT WE'VE
7	HAD ONE OF THESE, I THINK IT WOULD BE MIGHT HELP
8	TO REDUCE THE NUMBER OF POTENTIAL CONFLICTS.
9	CHAIRMAN KLEIN: ALL RIGHT. DR. PIZZO.
10	DR. PIZZO: IS IT SAFE TO SAY, ALAN, THAT
11	WE DON'T REALLY KNOW THAT A CONFLICT INFLUENCED THE
12	OUTCOME OF THE SECOND REVIEW?
13	IN OTHER WORDS, BEFORE WE GO DOWN THE
14	PATHWAY OF TRYING TO DO SYSTEMIC FIXES FOR CONFLICT,
15	DO WE KNOW THAT THAT WAS THE CASE? I REALIZE THAT
16	THAT OPENS UP ANOTHER PANDORA'S BOX OF QUESTIONS,
17	BUT I WONDER IF YOU COULD RESPOND TO THAT.
18	DR. TROUNSON: PHIL, I THINK IN THIS
19	CIRCUMSTANCE THERE WAS CIRCUMSTANTIAL EVIDENCE THAT
20	WOULD SUGGEST THAT THE PROJECT MAY NOT HAVE BEEN
21	FAIRLY REVIEWED. WHETHER IN A COURT OF LAW I COULD
22	SUSTAIN THAT AS A GENUINE PERSONAL CONFLICT OF
23	INTEREST, MY ADVICE FROM MY LAWYER COLLEAGUES WAS
24	THAT WAS UNKNOWN, BUT THERE WAS SUFFICIENT
25	DR. PIZZO: I THINK IT'S AN IMPORTANT
	200
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1	POINT BECAUSE IF IT IS THE CASE, THEN I THINK THAT
2	MANY OF THE COMMENTS THAT WE'VE BEEN HEARING ABOUT
3	WOULD COMPEL US TO LOOK CAREFULLY AT POTENTIAL
4	CONFLICT. WERE IT NOT THE CASE, IT WOULD OPEN UP
5	ANOTHER SET OF ISSUES ABOUT THE WHOLE PROCESS ITSELF
6	AND WHETHER FROM ONE GROUP TO ANOTHER THERE'S A SET
7	OF VALIDATIONS THAT TAKE PLACE IN TERMS OF
8	SEQUENTIAL PEER REVIEW. AND I THINK WHAT I HEAR YOU
9	SAYING IS THAT IT WASN'T REALLY A FUNCTION OF THE
10	PEER REVIEW, BUT MORE A FUNCTION OF POTENTIAL
11	INDIVIDUAL ADVERTENT OR INADVERTENT BLAS.
12	DR. TROUNSON: THAT'S CORRECT. I THINK IT
13	WASN'T NECESSARILY RECOGNIZED ON BOTH SIDES THAT
14	THERE MIGHT HAVE BEEN A CONFLICT. SO, YOU KNOW,
15	UNDER THOSE CIRCUMSTANCES, IT'S VERY DIFFICULT.
16	CHAIRMAN KLEIN: SO I WOULD ASK THE STAFF
17	TO COME BACK AND BRING BACK TO THIS BOARD A PROPOSAL
18	RESPONSIVE TO DR. BRYANT'S SUGGESTION. AND WE WILL
19	AT THIS POINT GO FORWARD. DR. PENHOET.
20	DR. PENHOET: WELL, I WOULD JUST LIKE TO
21	POINT OUT TO MEMBERS OF THE AUDIENCE WHO MAY NOT
22	HAVE PARTICIPATED IN SUCH THINGS, THE APPEARANCE OF
23	A PERSONAL CONFLICT OF INTEREST DOES NOT MEAN THAT
24	THE INDIVIDUAL IN THE FIRST CASE ACTED WITH MALICE.
25	THERE ARE HONEST SCIENTIFIC DISPUTES, AND SCIENTISTS

1	OFTEN FEEL VERY STRONGLY ABOUT THEIR POINT OF VIEW
2	VERSUS SOMEONE ELSE'S POINT OF VIEW. SO THIS DOES
3	NOT MEAN THAT THE FIRST REVIEW WAS CONDUCTED IN BAD
4	FAITH, BUT IT DOES INDICATE THAT THERE WAS A
5	POTENTIAL FOR A STRONGLY DIFFERENT POINT OF VIEW
6	TAKEN BY SOMEONE WHO MIGHT HAVE HAD SIGNIFICANT
7	INTERACTION WITH THE APPLICANT AT SOME POINT IN THE
8	PAST GENUINELY ARGUING OVER SCIENCE.
9	DR. PIZZO: I AGREE WITH THAT, OF COURSE.
10	I THINK WE ALL DO, BUT I THINK IT MAY BE AS SIMPLE
11	AS SIMPLY REMINDING THE SCIENTIFIC WORKING GROUPS
12	WHEN THEY NEXT MEET ABOUT THIS EVENT AND JUST
13	SAYING, REMINDING ALL OF US AGAIN THAT WE NEED TO
14	APPROACH THESE GRANTS WITH TRYING TO REMOVE THAT
15	CONFLICT. BUT DR. PENHOET'S COMMENT IS TRUE. IT'S
16	VERY HARD FOR ANY OF US TO LOOK AT DATA WITHOUT SOME
17	PRECONCEIVED CONSTRUCT ABOUT HOW WE INTERPRET IT.
18	DR. TROUNSON: AND I WOULD BE LOATH TO
19	TAKE AWAY THAT ELEMENT OF ROBUST ARGUMENT AND
20	DIFFERENCE OF OPINION. AND I THINK WE HAVE MINORITY
21	REPORTS AND OTHER WAYS OF DEALING WITH THIS. BUT I
22	THINK IT'S REALLY AN IMPORTANT PART OF THE PEER
23	REVIEW PROCESS. AND I THINK OCCASIONALLY WE MIGHT
24	BE A LITTLE CONCERNED THAT IT WAS SOME PROJECT
25	MIGHT HAVE BEEN UNFAIRLY REVIEWED. I THINK IN THIS

1	CASE THERE WAS EVIDENCE THAT IT CAME UP SUFFICIENT
2	POINTS TO APPEAR IN ANOTHER CATEGORY. AND THAT
3	PERHAPS IS A FAIR OUTCOME.
4	CHAIRMAN KLEIN: I'D ALSO EMPHASIZE DR.
5	TROUNSON'S POINT, THAT UNLIKE THE NIH, WE DO HAVE A
6	STRUCTURAL SYSTEM WITHIN THE PEER REVIEW WORKING
7	GROUP WHEN A MINORITY IS SUPPORTIVE OF A NEW IDEA
8	AND THERE'S ROBUST OR VERY PASSIONATE DISAGREEMENT
9	SCIENTIFICALLY WITH THE MAJORITY. IF YOU HAVE 35
10	PERCENT OF THE PEER REVIEW GROUP THAT VOTES FOR A
11	MINORITY REPORT, THE MINORITY REPORT COMES TO THE
12	BOARD, AS IT HAS PREVIOUSLY WITH THIS BOARD, AND IS
13	REPORTED WITH THE MAJORITY REPORT SO THAT THIS BODY
14	CAN MAKE THE FINAL DECISION ON THE APPROPRIATE
15	DIRECTION. ANOTHER SAFEGUARD THAT GOES BEYOND THE
16	NATIONAL INSTITUTES OF HEALTH SYSTEM.
17	WITH THAT VERY GOOD DISCUSSION, IS THERE
18	ADDITIONAL PUBLIC DISCUSSION?
19	MR. BASHAM: DARYL BASHAM, DNA-MI CROARRAY.
20	I JUST HAD A QUESTION ABOUT THE TIME LINES. WAS THE
21	APPEAL FILED WITHIN 30 DAYS OF RECEIPT OF THE
22	REPORT REVIEW REPORT? AND HOW LONG DID THE
23	REVIEW PROCESS TAKE?
24	DR. TROUNSON: IT WAS FILED WITHIN THE
25	CONSTRAINTS OF THE TIMEFRAME. AND I'LL HAVE TO ASK
	212

1	STAFF TO GIVE YOU THE EXACT TIMING OF THE REVIEW.
2	BECAUSE IT WAS A NEW PROCESS THAT WE HADN'T BEEN
3	THROUGH AND WE NEEDED INTERACTION WITH THE GRANTS
4	WORKING GROUP AND WITH THE PATIENT ADVOCATES FOR
5	EVERYONE TO FEEL RELATIVELY COMFORTABLE IN THIS
6	PROCESS, IT PROBABLY TOOK A LITTLE LONGER THAN I
7	WOULD HAVE PREFERRED.
8	CHAIRMAN KLEIN: RIGHT. SO IF WE COULD
9	JUST ANSWER THAT IN THE MACRO VERSION. THE NEW CELL
10	LINES THAT THIS WAS PART OF CAME TO THIS BOARD WHEN?
11	DR. SAMBRANO: SO THE APPEAL, IF I RECALL
12	CORRECTLY, ARRIVED WITHIN A WEEK OF THE TIME THAT
13	THE REVIEW SUMMARY WAS SENT TO THE APPLICANT.
14	CHAIRMAN KLEIN: THE SECOND QUESTION IS IN
15	TERMS OF HOW MUCH DID THIS REVIEW PROCESS DELAY THE
16	FINAL RESULT? AND WHEN DID NEW CELL LINES COME TO
17	THIS BOARD PREVIOUSLY?
18	DR. SAMBRANO: I THINK THAT'S RIGHT. I
19	THINK IT WAS JUNE. AND SO THEN THIS APPEAL WAS
20	REVIEWED ACTUALLY AT THE BEGINNING OF THIS MONTH.
21	CHAIRMAN KLEIN: OKAY. SO AS DR. TROUNSON
22	SAYS, NEW PROCESS. THIS IS ESSENTIALLY A 30-DAY
23	PERIOD FOR THE FILING OF IT, AND IT TOOK US AN
24	ADDITIONAL FIVE MONTHS. I'M SURE AS THE PROCESS IS
25	UNDERSTOOD, HOPEFULLY WE'LL AVOID FUTURE ONES, BUT

1	TO THE EXTENT THAT IT HAS BEEN GONE THROUGH ONCE, IT
2	WILL BE MORE TIME EFFICIENT THE NEXT TIME FOR
3	EVERYONE. BUT THANK YOU VERY MUCH.
4	SO WITH THAT, I'D LIKE TO
5	MS. GIBBONS: EXCUSE ME, MR. CHAIRMAN.
6	QUICK CLARIFICATION. I BELIEVE IT WAS STATED HERE
7	BEFORE, IF WE WERE TO VOTE THIS APPLICATION THROUGH
8	WITH THE AMOUNT REQUESTED, WE WOULD STILL BE UNDER
9	THE BUDGETED AMOUNT?
10	CHAIRMAN KLEIN: THAT'S RIGHT. THAT IS
11	ABSOLUTELY RIGHT. THANK YOU VERY MUCH. SO WE NEED
12	A MOTION HERE IF THERE IS GOING TO BE ONE. WOULD
13	ANYONE LIKE TO MOVE FOR APPROVAL OF THIS?
14	DR. PENHOET: I MOVE APPROVAL OF THIS
15	GRANT.
16	MR. ROTH: I'LL SECOND.
17	CHAIRMAN KLEIN: MOTION AND A SECOND.
18	ADDITIONAL DISCUSSION? COULD WE CALL THE ROLL,
19	PLEASE?
20	MS. KING: I'M ONLY CALLING PEOPLE THAT DO
21	NOT HAVE A CONFLICT WITH THIS APPLICATION.
22	MS. KING: GORDON GILL.
23	DR. GILL: YES.
24	MS. KING: SUSAN BRYANT.
25	DR. BRYANT: YES.
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	DAMNISTERS REPORTING SERVICE
1	MS. KING: MARCY FEIT.
2	MS. FEIT: YES.
3	MS. KING: MICHAEL FRIEDMAN.
4	DR. FRIEDMAN: YES.
5	MS. KING: LEEZA GIBBONS.
6	MS. GIBBONS: YES.
7	MS. KING: MICHAEL GOLDBERG.
8	MR. GOLDBERG: YES.
9	MS. KING: SAM HAWGOOD.
10	DR. HAWGOOD: YES.
11	MS. KING: BOB KLEIN.
12	CHAIRMAN KLEIN: YES.
13	MS. KING: SHERRY LANSING.
14	MS. LANSING: YES.
15	MS. KING: GERALD LEVEY.
16	DR. LEVEY: YES.
17	MS. KING: ED PENHOET.
18	DR. PENHOET: YES.
19	MS. KING: PHIL PIZZO.
20	DR. PI ZZO: YES.
21	MS. KING: CLAIRE POMEROY.
22	DR. POMEROY: YES.
23	MS. KING: FRANCISCO PRIETO.
24	DR. PRI ETO: YES.
25	MS. KING: CARMEN PULIAFITO.
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1	DR. PULI AFI TO: YES.
2	DR. QUINT: YES.
3	MS. KING: DUANE ROTH.
4	MR. ROTH: YES.
5	MS. KING: JOAN SAMUELSON.
6	MS. SAMUELSON: NO.
7	MS. KING: DAVID SERRANO-SEWELL.
8	MR. SERRANO-SEWELL: YES.
9	MS. KING: JEFF SHEEHY.
10	MR. SHEEHY: YES.
11	MS. KING: JONATHAN SHESTACK.
12	MR. SHESTACK: YES.
13	MS. KING: AND OSWALD STEWARD.
14	DR. STEWARD: YES.
15	MS. KING: MOTION CARRIES.
16	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
17	WE'RE GOING TO HAVE A THREE-MINUTE PRESENTATION FROM
18	REPRESENTATIVES WHO HAVE COME HERE, MY UNDERSTANDING
19	IS, TO SPEAK WITH US SPECIFICALLY AND HAVE A TIME
20	LIMIT ON THEIR ATTENDANCE. SO PLEASE APPROACH IT,
21	AND WE ARE TREMENDOUSLY APPRECIATIVE OF YOUR
22	PRESENCE. AND WE HAVE VERY SPECIFICALLY HEARD AND
23	FOCUSED ON YOUR MESSAGE BEFORE, WHICH IS EXTREMELY
24	PASSIONATE AND BEAUTIFULLY COMMUNICATED. BUT IF
25	YOU'LL TRY AND KEEP IT TO THAT THREE MINUTES.
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1	MS. SALDANA: WE'LL DO THAT, AND THANK YOU
2	VERY MUCH FOR ALLOWING US A FEW MINUTES TO SPEAK.
3	MY NAME IS FRANCES SALDANA, AND I'M WITH THE
4	HUNTINGTON'S DISEASE SOCIETY OF AMERICA, ORANGE
5	COUNTY AFFILIATE. AND THIS IS DR. KEN KAST, WHO IS
6	ALSO A MEMBER OF OUR AFFILIATE. AND JUST WANTED TO
7	TALK A LITTLE BIT ABOUT HUNTINGTON'S DISEASE AND OUR
8	MISSION TO BRING AWARENESS AND ONE DAY TO ERADICATE
9	THIS DISASTROUS DISEASE.
10	I WANTED TO JUST KIND OF RESOUND SOME OF
11	HANS KIERSTEAD'S COMMENTS FROM A PREVIOUS MEETING.
12	OF COURSE, YOU ALL KNOW WHO HANS KIERSTEAD IS.
13	CO-DIRECTOR OF THE SUE AND BILL GROSS STEM CELL
14	RESEARCH CENTER.
15	HUNTINGTON'S DISEASE IS TRULY ONE OF THE
16	FEW DISEASES THAT'S APPLICABLE IN THE SHORT TERM TO
17	TWO KEY STEM CELL RESEARCH STRATEGIES, USING CELLS
18	TO UNDERSTAND HOW THE DISEASE WORKS AND TO ACTUALLY
19	TREAT PEOPLE. HUNTINGTON'S CHARACTER AS A DISEASE
20	WITH A SINGLE DISCOVERED GENETIC CAUSE AND ITS
21	IMPACT ON SPECIFIC AREAS OF THE BRAIN MAKE IT ONE OF
22	THOSE UNIQUE CANDIDATES FOR STEM CELL RESEARCH.
23	WE NEED TO ERADICATE THIS DISEASE. I
24	HAVE I ESTIMATE THAT WE SPEND OR THE STATE OF
25	CALIFORNIA SPENDS ABOUT \$11 MILLION A MONTH JUST TO

1	CARE FOR HUNTINGTON'S DISEASE PATIENTS AND CARE
2	HOMES.
3	THE FATHER OF MY CHILDREN, HECTOR
4	PORTILLO, HAD HUNTINGTON'S DISEASE, AND
5	UNFORTUNATELY ALL THREE OF MY CHILDREN INHERITED THE
6	MUTANT GENE. ONE OF THEM, MARIE, STARTED BECOMING
7	SYMPTOMATIC AT ABOUT 12, MICHAEL PROBABLY ABOUT 16,
8	AND MARGIE AT ABOUT 18. HECTOR LOST TWO OF HIS
9	BROTHERS TO HUNTINGTON'S DISEASE, AND ONE OF THE
10	BROTHERS LOST HIS DAUGHTER AT THE AGE OF 16 TO
11	HUNTI NGTON' S DI SEASE.
12	AS YOU CAN SEE, WITH EVERY GENERATION THAT
13	IT'S BEING PASSED ONTO, THE ALLELES ARE GREATER AND
14	THE ONSET FOR THE DISEASE IS YOUNGER.
15	SO I'VE LOST MY MOTHER-IN-LAW, MY HUSBAND,
16	MY TWO BROTHERS-IN-LAW, AND MY CHILDREN ARE NEXT.
17	MY YOUNGEST DAUGHTER MARIE IS IN HOSPICE RIGHT NOW.
18	SHE'S AT THE VERY LAST STAGES. THAT'S THE LITTLE
19	ONE RIGHT THERE. AND MARGIE, LOOKING ON AT HER, IS
20	PROBABLY IN STAGE FOUR OUT OF FIVE STAGES OF
21	HUNTI NGTON' S DI SEASE.
22	THIS IS IN 1993. THEIR FATHER, THEY HAD
23	ALREADY LOST THEIR FATHER, BUT THEY WERE STILL VERY
24	HOPEFUL THAT THEY WOULD NOT HAVE THE DISEASE. NONE
25	HAD BEEN TESTED FOR HUNTINGTON'S YET. HERE IN THIS
	210

1	PHOTO MARGIE HAD ALREADY FOUND OUT SHE TESTED
2	POSITIVE, AND MARIE AND MICHAEL WERE LOOKING FORWARD
3	TO A FULL LIFE LIKE THE REST OF US ARE.
4	BY 2003 ALL THREE OF MY CHILDREN HAD
5	TESTED POSITIVE. AND RIGHT NOW MARGIE CAN HARDLY
6	WALK. I THINK SOME OF YOU MET HER LAST YEAR AT THE
7	MEETING. YOU JUST WOULDN'T RECOGNIZE HER. I WALK
8	INTO HER HOUSE AND I JUST THINK, OH, MY GOD. THIS
9	IS MY DAUGHTER. AND, YOU KNOW, IT'S LIKE WHAT HAS
10	HAPPENED.
11	MICHAEL IS IN A CARE HOME. MARIE, LIKE I
12	SAID, IS IN HOSPICE. AND, YOU KNOW, WHEN THEIR
13	FATHER BECAME SICK, I MEAN HE HAD THE MOVEMENT, HE
14	HAD THE ADULT ONSET, BUT HE WAS HIT BY A CAR, AND
15	THAT'S HOW HE DIED. SO HE NEVER SUFFERED THE
16	SYMPTOMS THAT END-OF-LIFE HUNTINGTON'S DISEASE
17	PATIENTS SUFFER. AND TO ME I COMPARE IT TO A
18	HOLOCAUST, BUT IT'S A HOLOCAUST THAT DOESN'T END.
19	IT JUST GOES ON GENERATION AFTER GENERATION. THE
20	FAMILIES HIDE IT. THEY'RE AFRAID TO BE FOUND.
21	THERE'S FEAR OF DEATH. THERE'S SUFFERING, ANGUISH,
22	PAIN, AND ULTIMATELY DEATH.
23	MY DAUGHTER MARGIE PRETTY MUCH HIDES NOW.
24	I WAS ABLE TO GET HER OUT TO MEET ALL OF YOU LAST
25	YEAR, BUT YOU CAN'T GET HER OUT OF THE HOUSE RIGHT
	210

1	NOW UNLESS YOU PROMISE TO TAKE TO MACY'S AND BUY HER
2	A NEW DRESS. THEN SHE'LL GO.
3	MICHAEL, THAT'S MICHAEL. YOU KNOW, HE'S
4	GOING REALLY FAST. AND I DON'T KNOW WHAT THE
5	DIFFERENCE IS, BUT HE'S RIGHT BEHIND MARIE. AND
6	MARGIE, SHE WANTS TO LIVE FOR HER CHILDREN. THAT'S
7	HER DAUGHTER, THAT'S MY GRANDDAUGHTER RIGHT THERE.
8	OF COURSE, SHE'S AT RISK NOW. BUT MARIE JUST HAD A
9	FEEDING TUBE JUST SIX WEEKS AGO, AND NOW I WISH I
10	HAD NOT DONE THAT BECAUSE THE QUALITY OF LIFE IS NOT
11	THERE FOR HER ANYMORE. I NEVER KNEW THAT AT END OF
12	LIFE FOR A HUNTINGTON'S DISEASE PATIENT THEY WOULD
13	GET PNEUMONIA, REQUIRE A FEEDING TUBE, NOT BEING
14	ABLE TO SWALLOW, HAVE ASPIRATION, SEPSIS, GRAND MAL
15	SEIZURES, MRSA, AND OTHER SKIN INFECTIONS,
16	TACHYCARDIA, HIGH FEVERS, ACUTE AND PERSISTENT
17	DIARRHEA THAT HAS BROUGHT MARIE'S WEIGHT DOWN TO 90
18	POUNDS, AND SHE'S 5 FOOT 9, AND NEAR DEATH TRIPS TO
19	THE ER EVERY OTHER DAY TO WHERE I FINALLY JUST
20	PLACED HER IN HOSPICE AND WANT ONLY COMFORT FOR HER.
21	THIS, OF COURSE, LEAVES THE FAMILY MEMBERS
22	PHYSICALLY, EMOTIONALLY, AND MENTALLY EXHAUSTED.
23	THIS IS E. J. GARNER, ONE OF OUR STRONGEST AFFILIATE
24	MEMBERS, WONDERFUL FUND-RAISER. THAT'S HER SON
25	SCOTT AT THE BOTTOM, HE IS THE CARRIER, AND HIS
	220

1	LITTLE BOY MATTHEW. WE JUST LOST MATTHEW IN MAY AT
2	THE AGE OF SIX WITH 168 REPEATS, WHICH WAS
3	SUPPOSEDLY THE HIGHEST REPORTED NUMBER OF REPEATS AT
4	THE UNIVERSITY OF WASHINGTON. I DON'T KNOW ABOUT
5	THE TWINS. THEY'RE AT RISK NOW.
6	MS. SAMUELSON: CAN YOU TELL US WHAT
7	REPEATS MEANS?
8	MS. SALDANA: IN THE DNA CODE THERE ARE SO
9	MANY REPEATS, AND IF YOU HAVE OVER 40 REPEATS OF
10	THIS HUNTINGTON PROTEIN, YOU WILL GET HUNTINGTON'S
11	DISEASE. IF YOU GET OVER 50 REPEATS, YOU PROBABLY
12	WILL GET THE JUVENILE ONSET. MARIE HAS 63, MARGIE
13	HAS 50, MICHAEL HAS NEVER BEEN TESTED, BUT I WOULD
14	GUESS HE HAS ABOUT 60 BECAUSE HE'S LIKE RIGHT THERE
15	RIGHT BEHIND MARIE.
16	SO AND THIS IS MARY KAST, DR. KAST'S
17	BEAUTIFUL DAUGHTER. DO YOU WANT TO TALK A LITTLE
18	BIT ABOUT HER?
19	DR. KAST: I REALLY APPRECIATE THE TIME
20	THAT YOU ARE GIVING US THIS MORNING. I THINK THAT
21	THE IMAGE OF HD THAT THE PUBLIC, WHO ARE THE
22	ULTIMATE BENEFACTORS OF ALL THE RESEARCH THAT YOU
23	SPONSOR, I THINK THE PUBLIC DOESN'T HAVE A REALLY
24	GOOD IDEA WHAT HUNTINGTON'S DISEASE IS. RIGHT NOW
25	THERE'S A CHARACTER ON HOUSE WHO HAS HUNTINGTON'S
	004

1	DISEASE. AND SOME PEOPLE THINK THAT'S A REAL
2	BREAKTHROUGH. THEY'RE TALKING ABOUT HUNTINGTON'S
3	DISEASE. THIS WOMAN IS PRESYMPTOMATIC. OKAY. HER
4	PROBLEMS ARE PHILOSOPHICAL, NOT PHYSIOLOGICAL.
5	PEOPLE LIKE FRANCES AND ME LIVE WITH THIS
6	DISEASE. ON THE RIGHT IS MY WIFE WHEN SHE WAS A
7	MOMMIE. ON THE LEFT IS HER IN THE CENTER NOW. AND
8	THE DISEASE IS NOT JUST OF THE VICTIM. THE VICTIM
9	IS THE FAMILY. AS FRANCES SAID, THE VICTIM IS NOT
10	JUST THIS GENERATION. THE VICTIM IS THE NEXT
11	GENERATION AND THE NEXT GENERATION.
12	MY DAUGHTER AND GRANDDAUGHTER WERE HERE
13	FOR A WHILE, BUT THEY HAD TO LEAVE. AND SO THEY'RE
14	PART OF THE VICTIMHOOD. AND WHEN YOU SEE SOMEBODY
15	SO BEAUTIFUL, LIKE MY WIFE, SO LOVING, WHO BECOMES
16	ALMOST LITERALLY A MONSTER, WHO THROWS HER HUSBAND'S
17	BELONGINGS OUT IN THE FRONT YARD, OR A WONDERFUL
18	MOTHER WHO ENDS UP BEATING HER KIDS WITH A COAT
19	HANGER BECAUSE SHE'S LOST CONTROL OF HER
20	PERSONALITY.
21	SO I REALLY ENCOURAGE YOU BECAUSE I KNOW
22	THAT WE LISTENED TO SOME PRESENTATIONS THIS MORNING.
23	THERE WERE A LOT OF STATISTICS ABOUT THE NUMBER OF
24	PEOPLE WITH ALZHEIMER'S AND HOW MUCH IT'S GOING TO
25	COST. SO SOMETIMES I THINK THAT STATISTICS KIND OF

1	TRUMP A LOT OF OTHER THINGS. I THINK THAT YOU ALSO
2	THINK ABOUT THE DAMAGE THAT A DISEASE DOES, NOT JUST
3	THE NUMBER OF PEOPLE WHO CARRY PLAQUE AND TWISTED
4	CELLS IN THEIR HEAD BECAUSE THE DAMAGE TO THE FAMILY
5	OF THIS DISEASE IS PROFOUND. IT'S A GENETIC
6	PROFOUNDNESS AS WELL AS IT IS JUST A CARE GIVING
7	PROFOUNDNESS.
8	SO PLEASE AS YOU LOOK AT GRANTS, IF
9	THERE'S ANY GRANT THAT HAS A WAY TO DIRECTLY AFFECT
10	HUNTINGTON'S DISEASE AND LOOKING FOR A CURE FOR IT,
11	I REALLY ENCOURAGE YOU TO THINK ABOUT THE DAMAGE
12	BENEFITS THAT COULD BE GAINED BY INVESTING IN THAT.
13	THANK YOU.
14	CHAIRMAN KLEIN: THANK YOU BOTH VERY MUCH,
15	FRANCES, AND YOUR DAUGHTER MARGIE. ALL OF YOU ARE
16	FABULOUS ADVOCATES FOR HUNTINGTON'S DISEASE. PLEASE
17	REALIZE THAT WE KNOW THAT THE BREAKTHROUGHS FOR
18	KNOWLEDGE MAY OCCUR ON A DISEASE WITH A VERY SMALL
19	POPULATION BASE, BUT MAY HELP A BROAD ARRAY OF
20	DISEASE RESEARCH AND DISCOVERY. SO WE'RE FOCUSED ON
21	THE BEST SCIENCE AND THE BEST PATH TO THERAPIES, AND
22	WE DO UNDERSTAND IT MAY NOT BE THE LARGEST DISEASE
23	WHERE WE GET THE BREAKTHROUGH THAT HELPS US ALL.
24	MS. SALDANA: I JUST WANT TO MAKE ONE LAST
25	COMMENT, THAT IF RESEARCHERS DEVELOP A PROTOCOL THAT

1	TAKES A STEM CELL AND TURNS IT INTO A NEURON, THEN
2	WE'LL HAVE THAT MUCH MORE KNOWLEDGE OF WHAT GOES ON
3	WITH AN HD NEURON, AND TO TRANSPLANT THE HEALTHY
4	STEM CELLS INTO THE BRAIN OF THE HD PATIENT. HD
5	RESEARCH AND PROTOCOL DEVELOPMENT WILL HELP OTHER
6	NEUROLOGICAL DISEASE RESEARCH SUCH AS ALZHEIMER'S.
7	SO I'M, THEREFORE, ASKING YOU TO FUND HD STEM CELL
8	RESEARCH, SPECIFICALLY THE GRANTS THAT HAVE RECENTLY
9	BEEN SUBMITTED. THANK YOU.
10	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
11	(APPLAUSE.)
12	MR. SHESTACK: I KNOW JOAN HAS SOMETHING
13	TO SAY. BOB, I DON'T KNOW WHO COULD ANSWER IT, BUT
14	THIS KIND OF REPORT BEGS THE QUESTION. WHAT IS THE
15	LEVEL OF SUBMISSIONS THAT CIRM HAS GOTTEN THAT HAVE
16	A DIRECT OR AT LEAST A MODERATELY DIRECT IMPACT ON
17	HUNTINGTON'S DISEASE? AND IS THERE A WAY THAT WE
18	CAN KNOW THAT?
19	CHAIRMAN KLEIN: SO I DON'T THINK
20	MR. SHESTACK: WHO WOULD BE ABLE TO?
21	CHAIRMAN KLEIN: SO DR. TROUNSON OR DR.
22	CSETE, I DON'T THINK WE CAN I DOUBT THAT WE HAVE
23	A SPONTANEOUSLY GENERATED LIST, BUT WE CAN CERTAINLY
24	BRING THAT REPORT BACK. AND WE HAVE PREVIOUSLY
25	FUNDED SOME HUNTINGTON'S DISEASE GRANTS SPECIFICALLY
	224
	1 / / /

1	THAT WE'RE, I THINK, GENERALLY AWARE OF.
2	MS. LANSING: I WANT TO THANK YOU ON
3	BEHALF OF ALL OF US. IT WAS AN EXTRAORDINARY
4	REPORT, AND YOU'VE DRAWN ATTENTION. I HAVE BEEN
5	AWARE OF THE DISEASE FOR A LONG TIME BECAUSE OF A
6	PERSON SITUATION, BUT I JUST WANT TO THANK YOU ON
7	BEHALF OF ALL OF US FOR ONCE AGAIN DRAWING ATTENTION
8	TO IT. AND ALSO TO SAY, I THINK ON BEHALF OF ALL OF
9	US, THAT A GRANT ON ONE DISEASE, AND I KNOW YOU KNOW
10	THIS, CAN LEAD TO A BREAKTHROUGH IN HUNTINGTON'S AS
11	WELL. DO YOU KNOW? SO IT'S REALLY THE BEST SCIENCE
12	THAT CAN LEAD TO BREAKTHROUGHS FOR ALL DISEASES.
13	SO I JUST WANT YOU TO KNOW THAT WE'RE
14	MINDFUL OF THE DISEASE, AND THAT OFTEN HAPPENS.
15	SOMEBODY IS WORKING ON SOMETHING FOR ALZHEIMER'S AND
16	IT MIGHT LEAD TO A BREAKTHROUGH IN CANCER.
17	CHAIRMAN KLEIN: LEEZA GIBBONS AND THEN
18	DR. POMEROY, AND JOAN IS WAITING. CAN WE GO JOAN
19	AND THEN LEEZA AND THEN DR. POMEROY.
20	MS. SAMUELSON: WELL, EVERYONE IS SAYING
21	WHAT I WOULD HAVE SAID AND FEEL TO THE DEPTHS OF MY
22	HEART. THANK YOU SO MUCH. AND THANK YOU FOR BEING
23	SO BRAVE AS TO BE SO BLUNT.
24	AND I WOULD JUST FINISH BY ASKING THE
25	CHAIRMAN IF WE CAN DO WHATEVER WE CAN TO TRY TO HAVE
	225

1	A BRIEF, BLUNT INTERRUPTION IN EACH OF OUR MEETINGS
2	TO THIS EFFECT. I THINK IT WOULD SHARPEN OWN OUR
3	FOCUS. THANK YOU SO MUCH.
4	MS. GIBBONS: I JUST HAD A QUICK QUESTION.
5	I DO ADMIRE YOUR LEADERSHIP HERE AND YOUR
6	COURAGEOUSNESS BECAUSE IT IS THE PERSONALIZATION OF
7	THE STORIES THAT REMINDS US ALL OF WHAT WE'RE DOING.
8	YOUR DAUGHTER AND YOUR GRANDDAUGHTER THAT
9	LEFT, DR. KAST, GENETICALLY ARE THEY LINKED?
10	DR. KAST: WE ACTUALLY DECIDED AS A FAMILY
11	NOT TO TALK ABOUT THE GENETIC PREDISPOSITION.
12	MS. GIBBONS: I APOLOGIZE.
13	DR. KAST: THAT'S OKAY. IT'S JUST A
14	DECISION THAT, IT'S NOT THAT WE'RE HIDING, BUT IT'S
15	JUST SOMETHING THAT CAN MAKE PEOPLE REACT
16	DIFFERENTLY TO SOMEBODY. AND SO WE'D JUST AS SOON
17	HAVE OUR CHILDREN AND GRANDCHILDREN, AS LONG AS WE
18	HAVE TO LIVE WITH THE DISEASE, TO LET THEM CONTROL
19	THE KNOWLEDGE ON THAT.
20	MS. GIBBONS: THANK YOU.
21	CHAIRMAN KLEIN: DR. POMEROY.
22	DR. POMEROY: I ALSO WANT TO THANK YOU
23	VERY MUCH FOR COMING HERE AND SHARING YOUR STORIES.
24	IT'S VERY IMPORTANT. IT'S VERY POWERFUL. INASMUCH
25	AS PEOPLE ON THE ICOC GO AROUND TALKING ABOUT THE
	226
	220

1	IMPORTANCE OF THE WORK THAT WE DO HERE, YOUR VOICES
2	ARE MUCH MORE EFFECTIVE. SO I REALLY APPRECIATE YOU
3	ADVOCATING FOR HUNTINGTON'S. I'M FROM UC DAVIS, AND
4	WE CARE DEEPLY ABOUT THAT. AND I ALSO APPRECIATE
5	YOU ADVOCATING FOR ALL OF THE WORK THAT'S BEING DONE
6	HERE FOR STEM CELL RESEARCH.
7	SO THE IMPORTANCE OF THE PATIENT ADVOCATES
8	SPEAKING UP IS WHAT I WANTED TO HIGHLIGHT AND THANK
9	YOU FOR ROLE MODELING.
10	MR. SERRANO-SEWELL: LET ME SAY VERY
11	BRIEFLY IT BRINGS INTO SHARP FOCUS, IT'S SO PAINFUL
12	TO HEAR, IT KILLS YOU. BUT WHERE IT MATTERS IS
13	THIS, AND THIS IS WHY IT'S IMPORTANT TO BE A SQUEAKY
14	WHEEL. WE'RE A GOVERNMENT AGENCY. PEOPLE HAVE
15	EVERY RIGHT TO APPEAR BEFORE US, AND I'M GLAD YOU
16	DID. I ENCOURAGE ANY GROUP TO DO THE SAME.
17	IT AFFECTS DIRECTLY OUR CONVERSATIONS
18	BECAUSE OFTEN WE'RE PRESENTED WITH REPORTS, THE BEST
19	SCIENCE, BRILLIANT WORKING GROUP MEMBERS. WE'RE
20	DOING WONDERFUL WORK. AND THEY'LL COME, WE'LL GET
21	OUR REPORTS. IT'S DRUDGERY TO HEAR IT SOMETIMES,
22	BUT WE DO IT. AND THEY MIGHT BE LACKING IN ONE
23	AREA, FEASIBILITY OR SOMETHING. AND I THINK IT'S AT
24	THOSE INSTANCES WHERE WE NEED TO SAY, WAIT A SECOND.
25	REMEMBER THE HUNTINGTON FOLKS THAT CAME IN HERE?
	227

1	THEY'RE NOT SO CONCERNED ABOUT THE FEASIBILITY.
2	THEY WANT TO KNOW ARE YOU USING THE TAXPAYER MONEY
3	TO FUND SOMETHING THAT I CARE ABOUT. AND FOR ME
4	THAT'S WHY I APPRECIATE YOU BEING HERE. I THINK IT
5	DOES AFFECT OUR DELIBERATIONS IN A VERY PERFECT WAY.
6	CHAIRMAN KLEIN: THANK YOU. I WILL TELL
7	YOU THAT THERE ARE EXTREMELY EFFECTIVE ADVOCATES, A
8	MODEL FOR OTHERS. WHEN WE WERE IN SAN DIEGO, ED AND
9	I AND OTHERS ATTENDED A DINNER THAT THEY HAD WITH
10	SOME OF THE LEADERS IN THE AREA. AND IT'S A
11	CONTINUING EDUCATION PROCESS, AND HOPEFULLY YOU'LL
12	REACH OUT TO FEDERAL OFFICIALS AND EDUCATE THEM AS
13	YOU CONTINUE TO EDUCATE US. THANK YOU.
14	(APPLAUSE.)
15	CHAIRMAN KLEIN: ALL RIGHT. WE'RE GOING
16	TO MOVE ON TO 12 AT THIS TIME. AND, DR. TROUNSON,
17	HOW WOULD YOU LIKE TO PROCEED IN THE DISCUSSION OF
18	
	THE STRATEGIC PLAN?
19	THE STRATEGIC PLAN?  DR. TROUNSON: THANK YOU VERY MUCH, CHAIR.
19 20	
	DR. TROUNSON: THANK YOU VERY MUCH, CHAIR.
20	DR. TROUNSON: THANK YOU VERY MUCH, CHAIR. CAN I START WITH AN APOLOGY FROM OUR COLLEAGUE DON
20 21	DR. TROUNSON: THANK YOU VERY MUCH, CHAIR.  CAN I START WITH AN APOLOGY FROM OUR COLLEAGUE DON  GIBBONS, WHO WOULD HAVE BEEN HERE MAKING THIS
20 21 22	DR. TROUNSON: THANK YOU VERY MUCH, CHAIR.  CAN I START WITH AN APOLOGY FROM OUR COLLEAGUE DON  GIBBONS, WHO WOULD HAVE BEEN HERE MAKING THIS  PRESENTATION BUT FOR THE VERY UNFORTUNATE DEATH OF
20 21 22 23	DR. TROUNSON: THANK YOU VERY MUCH, CHAIR.  CAN I START WITH AN APOLOGY FROM OUR COLLEAGUE DON  GIBBONS, WHO WOULD HAVE BEEN HERE MAKING THIS  PRESENTATION BUT FOR THE VERY UNFORTUNATE DEATH OF  HIS FATHER JUST A FEW DAYS AGO. SO I'M VERY SORRY

1	ADAMS IS HERE FROM HIS STAFF.
2	AND WHAT WE WANTED TO DO, WE HAD BEEN
3	WORKING ON THE STRATEGIC PLAN. I CHARGED ALL THE
4	STAFF IN THE AGENCY WITH BEING INVOLVED WITH THE
5	DEVELOPMENT OF A PLAN THAT WOULD TAKE A LITTLE
6	FURTHER THE 2006 PLAN; THAT IS, BRING IT UP TO DATE
7	WITH WHERE WE'RE GOING AND AT THE PACE WE'RE GOING
8	BECAUSE WE ARE TRAVELING MORE QUICKLY THAN WE
9	ANTICIPATED. WE'RE MAKING MORE PROGRESS THAN I
10	THINK WAS BELIEVED WE WOULD.
11	AND AS YOU KNOW, WE'RE TAKING MUCH MORE
12	TIME OUT OF ALL OF YOUR VERY BUSY SCHEDULES THAN WE
13	EVER THOUGHT WAS GOING TO BE IN THE FIRST PLACE. SO
14	WITH SOME APOLOGIES, BUT I GET THEN MUTED GIVEN THE
15	LAST FEW MINUTES OF DISCUSSION. WE'RE GIVING OUR
16	TIME, ALL OF US, TO TRY AND MAKE A DIFFERENCE TO ALL
17	DISEASES, INCLUDING HUNTINGTON'S DISEASE.
18	SO WHAT WE'VE DONE IN THE PLAN IS TO
19	ENGAGE ALL THE STAFF IN WRITING THIS PLAN. AND DON
20	AND HIS STAFF HAVE REALLY HELPED THEM MAKE IT YOU
21	KNOW, MAKE IT MORE OF AN UNDERSTANDABLE DOCUMENT
22	BECAUSE THEY'VE INSERTED THEMSELVES AND TAKEN OUT A
23	LOT OF THE SCIENTIFIC TERMINOLOGY THAT SOMETIMES
24	MAKES IT DIFFICULT TO READ THESE DOCUMENTS.
25	YOU HAVE THIS DOCUMENT. I THINK IT IS 44
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1	PAGES, AND WE WANTED TO KEEP IT AS BRIEF AS POSSIBLE
2	AND WHILE MAKING THE POINTS THAT WE'RE TRYING TO
3	MAKE. I SUMMARIZED THE PRIMARY
4	CHAIRMAN KLEIN: DR. TROUNSON, I THINK,
5	FOR THOSE OF US HERE IN THIS ROW, WE'D HAVE A LOT
6	GREATER FOCUS IF THE BABY POLAR BEARS STOPPED MOVING
7	UP THE SCREEN IN FRONT OF US. SO WE CAN ISOLATE
8	THIS BRIEFLY.
9	DR. TROUNSON: TAKE AWAY THE POLAR BEARS
10	FOR A MINUTE. IT'S A VERY BEAUTIFUL PICTURE.
11	CHAIRMAN KLEIN: THE PROBLEM WITH OUR
12	SCREEN, IT WAS ROTATING CONSTANTLY.
13	DR. TROUNSON: I PRESENTED THE FOCUS
14	POINTS TO YOU IN A VERY BRIEF WAY IN A SLIDE IN
15	DOING MY REPORT. WHAT I THINK WOULD BE IMPORTANT,
16	RATHER THAN TRY AND DEBATE LOTS OF POINTS THAT ARE
17	MADE AS YET BECAUSE YOU NEED TIME TO DIGEST THAT,
18	AND WE NEED TIME FOR PUBLIC INPUT FOR ALL OF THAT,
19	IS TO SUGGEST TO YOU THAT THE AGENCY SHOULD NOW BE
20	VERY OPEN TO THE INPUTS THAT WILL COME IN FROM ALL
21	OF THE COMMUNITY AND, OF COURSE, VERY IMPORTANTLY
22	FROM THE ICOC, BUT ALL THE COMMUNITY AND ALL OF THE
23	INTEREST GROUPS THAT ARE INTERESTED IN HOW WE'RE
24	PROGRESSI NG.
25	SO I COULD, IF YOU LIKE, ASK AMY TO TAKE
	230

1	QUESTIONS ON THIS, ON THE PROCESS, OR YOU CAN ASK US
2	SPECIFIC QUESTIONS IF YOU WISH. I'LL LEAVE IT OPEN
3	TO YOU RATHER THAN TO ME GIVING YOU A LECTURE ABOUT
4	WHAT YOU MIGHT READ WITH A LITTLE BIT MORE TIME.
5	CHAIRMAN KLEIN: OKAY. AND TO FRAME THE
6	DISCUSSION AGAIN, THIS IS AN INFORMATIONAL ITEM.
7	THERE'S NOT INTENDED TO BE AN ACTION ITEM AT THIS
8	TIME. WE'RE GOING TO GO THROUGH A PROCESS WHERE
9	WE'RE GOING TO OBTAIN PUBLIC INPUT AND BRING IT BACK
10	FOR PUBLIC DISCUSSION.
11	BUT IS THE PLEASURE OF THE BOARD TO HAVE
12	AMY FIRST HIT SOME OF THE HIGH POINTS, OR WOULD YOU
13	LIKE TO GO TO DIRECTED QUESTIONS AT THIS POINT? HOW
14	WOULD YOU LIKE TO PROCEED ON THIS ITEM? JOAN, I
15	THINK, AND THEN JEFF.
16	MS. SAMUELSON: MY QUESTION IS PROCEDURAL,
17	I THINK. WHAT IS OUR INTENTION ABOUT WHEN WE WILL
18	ACTUALLY DISCUSS THE SUBSTANCE OF THIS AND VOTE?
19	AND I SHOULD SAY THAT IT SEEMS TO ME THAT IT'S MOST
20	PERTINENT WITH SOME OF THE OTHER AGENDA ITEMS WE
21	HAVE PENDING FOR JANUARY, AND THAT WOULD BE MY
22	PREFERENCE. AND THAT MAY SHAPE WHAT THE DISCUSSION
23	OR THE PROCESS IS TODAY.
24	CHAIRMAN KLEIN: ALL RIGHT. AND JEFF.
25	MR. SHEEHY: I APOLOGIZE IN ADVANCE, BUT I
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1	REALLY VIGOROUSLY OBJECT TO THIS ENTIRE PROCESS.
2	HAVING PARTICIPATED IN THE CREATION OF THE FIRST
3	STRATEGIC PLAN THAT AT ITS GENESIS INVOLVED A
4	DIALOGUE WITH STAKEHOLDERS AND HAD A SERIES OF
5	PUBLIC MEETINGS TO DEVELOP IT. YOU KNOW, IT BREAKS
6	MY HEART TO HEAR FROM THE PEOPLE WITH HUNTINGTON'S
7	BECAUSE LIKE THE CSO OF THE HIGH Q, THE HUNTINGTON'S
8	DISEASE RESEARCH FOUNDATION, WAS ONE OF THE WAS A
9	VERY INFLUENTIAL AND VERY POWERFUL VOICE. AND ZACH
10	HAD ARRANGED FOR HIM TO COME AND PRESENT.
11	AND I JUST THINK THAT WE'VE KIND OF DONE
12	THIS, AND NO CRITICISM OF STAFF NECESSARILY BECAUSE
13	I DON'T KNOW THAT THEY WERE IN CHARGE OF DEVELOPING
14	THE PROCESS. BUT THIS SHOULD HAVE BEEN AN ITERATIVE
15	PROCESS. WE NEED TO SEE HOW WE'RE DOING. WE NEED
16	TO HEAR FROM THE PEOPLE WITH HUNTINGTON'S, WE NEED
17	TO HEAR FROM HIGH Q, WE NEED TO HEAR FROM
18	PARKINSON'S ACTION NETWORK. WE NEED TO HEAR FROM
19	THE BUSINESS COMMUNITY, YOU KNOW.
20	AND I THINK THAT WE HAVEN'T TAKEN AN OUNCE
21	OF INPUT ON THIS, AND IT'S OUTRAGEOUS. AND IT IS SO
22	CONTRARY TO THE ORIGINAL PROCESS, WHICH WAS A
23	PHENOMENAL PRODUCT THAT WE WERE ALL PROUD OF. I'M
24	REALLY EXTREMELY DISAPPOINTED BY THIS AND INCREDIBLY
25	UNHAPPY ABOUT IT. I THINK WE'RE HAVING TO REACT TO

SOMETHING THAT SHOULD HAVE BEEN MORE ITERATIVE AND
COME FROM THE GRASS ROOTS UP FROM THE COMMUNITY, THE
VERY STAKEHOLDER COMMUNITIES, MUCH AS THE FIRST
PROJECT DID. WE'VE BEEN DOING THIS FOR A NUMBER OF
YEARS. WE NEED TO FIGURE OUT WHERE WE ARE.
AND THIS PIECE ON THE BUSINESS, THE
BUSINESS THING IN HERE IS JUST I DON'T GET IT. YOU
KNOW, I DON'T GET ANY OF THIS. AND I DON'T KNOW HOW
WE REALLY DEAL WITH THIS DOCUMENT, YOU KNOW, MYSELF.
I CAN'T.
CHAIRMAN KLEIN: JEFF, THERE'S
MR. SHEEHY: AND I ALSO DON'T KNOW WHY
THIS IS A MEDIA PROJECT. YOU KNOW, I MEAN IT'S
HEADED BY CCO AND THEN CCO STAFF IS DOING THIS.
THIS IS NOT WE'RE A SCIENTIFIC ORGANIZATION, NOT
A PR FIRM. THAT'S MY POINT OF VIEW.
CHAIRMAN KLEIN: ALL RIGHT. SO THE STAFF
ASKED THAT, SINCE THIS WAS AN UPDATE OF THE
STRATEGIC PLAN, THEY WANTED TO PRODUCE A DRAFT AND
BRING IT HERE FOR DISCUSSION AND FOR THIS BOARD TO
SET A PROCESS. AND YOU CAN EITHER SINCE WE HAD A
BROAD FOUNDATION OF INPUT, AS YOU SUGGESTED, FOR THE
ORIGINAL STRATEGIC PLAN AND THIS IS AN UPDATE, THEY
ASKED THAT WE CONSIDER IT IN THIS PROCESS.
THIS BOARD CAN CREATE A BROAD OUTREACH TO

COMPLETE OPEN REQUEST TO THIS BOARD TO DESIGN THE
PROCESS. THEY HAVE PUT NO BLAS ON LT. THEY WANT
INPUT FROM THIS BOARD ABOUT THE PROCESS THAT WE'D
LIKE TO SEE AS A BOARD TO REVIEW ALL OF THIS
I NFORMATI ON.
OBVIOUSLY THERE ARE BENEFITS THAT CAN BE
ARGUED FOR STARTING FROM SCRATCH, WHICH WAS THE
FOUNDATION DOCUMENT. THERE ARE ARGUMENTS IN FAVOR
OF GIVING SOMEONE SOMETHING TO REACT TO AND THEN
CHANGING IT COMPLETELY, BROADENING IT, BUT THAT'S
PART OF THE PROCESS. AND THANK YOU FOR YOUR INPUT
BECAUSE IT'S THE WHOLE BOARD HERE THAT'S GOING TO
GIVE US SOME DIRECTION.
DR. PRIETO: I THINK THAT I ACCEPT THIS
I WOULD ACCEPT THIS IN THAT SPIRIT AS THE BEGINNING
OF A PROCESS. BUT AS A PUBLIC ENDEAVOR, THE NEXT
STEP HAS TO BE AS WE DID WITH THE ORIGINAL STRATEGIC
PLAN, OPENING THIS UP NOW AND HAVING HEARINGS AND
ALLOWING THE PUBLIC TO WEIGH IN ON WHAT OUR FUTURE
DIRECTION IS GOING TO BE.
CHAIRMAN KLEIN: ADDITIONAL BOARD
COMMENTS?
DR. POMEROY: I THINK ONE OF THE
CHALLENGING THINGS HERE IS TO SORT OUT WHAT THE REAL
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1	GOAL OF THIS EXERCISE WAS. AND FOR ME THERE ARE TWO
2	SEPARATE PARTS. ONE IS DOING A PROGRESS REPORT ON
3	HOW WELL WE HAVE MET THE GOALS THAT WERE OUTLINED IN
4	THE ORIGINAL STRATEGIC PLAN. SOME OF THAT IS IN
5	HERE. THAT MIGHT APPROPRIATELY BE STARTED BY STAFF
6	AS A KICKOFF POINT AS WELL AS GETTING OTHER INPUT.
7	I WOULD DISTINGUISH THAT VERY MUCH FROM
8	DEFINING THE FUTURE DIRECTION, WHICH IS MORE WHAT I
9	THINK OF SOMETHING THAT YOU LABEL AS STRATEGIC PLAN
10	AS OPPOSED TO A PROGRESS REPORT. AND FOR ME THE
11	STRATEGIC PLAN WOULD VERY MUCH WANT TO GET FOCUS
12	GROUP INPUT OR STAKEHOLDER INPUT BEFORE DEFINING THE
13	FUTURE.
14	SO I THINK MAYBE THE CHALLENGE HERE IS
15	SORTING OUT WHAT THE REAL GOAL OF THIS EXERCISE IS.
16	AND THERE MAY BE SOME PIECES IN HERE ABOUT THE
17	DROODEGG TO DATE THAT WOULD BE AN ADDRODD ATE STAFE
	PROGRESS TO DATE THAT WOULD BE AN APPROPRIATE STAFF
18	PROGRESS TO DATE THAT WOULD BE AN APPROPRIATE STAFF  PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE
18 19	
	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE
19	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE STRATEGIC PLAN, WE MIGHT WANT TO GO BACK AND GET
19 20	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE STRATEGIC PLAN, WE MIGHT WANT TO GO BACK AND GET BROADER INPUT BEFORE WE COME TO DECISIONS. ONCE YOU
19 20 21	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE STRATEGIC PLAN, WE MIGHT WANT TO GO BACK AND GET BROADER INPUT BEFORE WE COME TO DECISIONS. ONCE YOU PUT SOMETHING DOWN ON PAPER, IT'S MUCH MORE
19 20 21 22	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE STRATEGIC PLAN, WE MIGHT WANT TO GO BACK AND GET BROADER INPUT BEFORE WE COME TO DECISIONS. ONCE YOU PUT SOMETHING DOWN ON PAPER, IT'S MUCH MORE DIFFICULT TO GET TRUE, FREELY GIVEN INPUT. AND I
19 20 21 22 23	PROGRESS REPORT, NOT A STRATEGIC PLAN. WHEREAS, THE STRATEGIC PLAN, WE MIGHT WANT TO GO BACK AND GET BROADER INPUT BEFORE WE COME TO DECISIONS. ONCE YOU PUT SOMETHING DOWN ON PAPER, IT'S MUCH MORE DIFFICULT TO GET TRUE, FREELY GIVEN INPUT. AND I THINK HAVING AN OPEN PROCESS FOR INPUT ON THE FUTURE

1	AND, FRANKLY, AS A BOARD MEMBER, I WOULD
2	VERY MUCH NOT WANT TO REACT TOO MUCH TO A DOCUMENT
3	THAT DOESN'T HAVE PUBLIC INPUT INTO IT. SO FOR ME
4	IT WOULD BE HELPFUL ON THE FUTURE PART TO HAVE THAT
5	PUBLIC INPUT BEFORE I GIVE A FINAL JUDGMENT OR
6	ASSESSMENT.
7	CHAIRMAN KLEIN: OKAY. DR. PIZZO.
8	DR. PIZZO: I THINK, OF COURSE, I THINK
9	CLAIRE CAPTURED SOME IMPORTANT COMMENTS, AND JEFF I
10	THINK DID AS WELL. I THINK THERE'S ALWAYS A
11	STARTING POINT FOR ANY OF THESE EXERCISES, SO I
12	APPRECIATE THE START. AND I THINK AS I LOOKED THIS
13	OVER, IT IS AN AMALGAM OF BOTH PAST TENSE REPORT AND
14	SOME FUTURE GOALS AND ISSUES. AND I THINK THAT IT'S
15	REALLY A MATTER OF DEFINING WHAT OUR OBJECTIVE IS.
16	I DO HAVE A SUGGESTION WHICH ACTUALLY
17	EMANATES FROM THIS MORNING'S DISCUSSION. SORT OF
18	THINKING STRATEGICALLY, YOU KNOW, ONE OF THE THINGS
19	THAT WE'VE HEARD FROM JOAN YESTERDAY AND THIS
20	MORNING AND WE HEARD FROM A NUMBER OF FAMILIES ABOUT
21	THE PLIGHTS THAT THEY'RE FACING. AND ONE SORT OF
22	STRATEGIC THING WE MIGHT THINK ABOUT I REALIZE
23	I'M GETTING AHEAD OF THE SCHEDULE BUT IS TO TRY
24	AND BE BOLD IN CALIFORNIA AND MAYBE BEGIN PUTTING
25	TOGETHER SOME, IF YOU WILL, VIRTUAL WORK GROUPS IN
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	7.30

1	DI SEASE-SPECIFIC AREAS.
2	WE COME TO THESE FORA AND WE OFTEN HEAR
3	PRESENTATIONS TAKE PLACE, BUT MAYBE WE COULD THROUGH
4	CIRM BRING OUR INSTITUTIONS TOGETHER IN A VIRTUAL
5	COLLECTIVE NETWORK SO THAT THERE WOULD BE, IF YOU
6	WILL, A HUNTINGTON'S WORKING GROUP OR AN ALZHEIMER'S
7	WORKING GROUP OF WHICH THERE WOULD BE AN OPPORTUNITY
8	FOR EXCHANGE OF SCIENTIFIC INFORMATION THAT COULD
9	ALL TAKE PLACE VIRTUALLY. WE COULD SET IT UP ON A
10	WEBSITE TO START WITH, BUT COULD ALSO STIMULATE NEW
11	IDEAS THAT MIGHT CREATE RFA'S THAT WOULD BECOME
12	VEHICLES FOR SUPPORT AND FUNDING.
13	AND I THINK IT'S TO ME, OBVIOUSLY I'M
14	BIASED BECAUSE I'M REFLECTING THIS POINT OF VIEW,
15	BUT IT'S THAT KIND OF APPROACH THAT I THINK WOULD
16	GET US INTO A DIFFERENT ORDER THAN PERHAPS WE ARE
17	TODAY OR HAVE BEEN IN THE PAST.
18	CHAIRMAN KLEIN: THANK YOU.
19	DR. LEVEY: JUST TO FOLLOW UP A LITTLE BIT
20	ON WHAT'S BEEN SAID, THE INITIAL STRATEGIC PLAN WAS
21	A PHENOMENAL WORK EFFORT ON THE PART OF THIS BOARD.
22	IT WAS AMAZING. WE SPENT, I THINK, THE BETTER PART
23	OF A YEAR TRYING TO PUT THAT TOGETHER. WHEN I
24	LOOKED AT THIS, IT SEEMS TO ME THAT THIS DOCUMENT
25	THAT WE FIRST PUT TOGETHER THE FIRST YEAR IS, IN

1	FACT, THE BLUEPRINT FOR CIRM FOR ITS LIFE. AND I
2	THINK THAT WHAT WE NEED TO DO IS NOT WRITE ANOTHER
3	STRATEGIC PLAN, BUT I THINK CLAIRE HIT IT RIGHT ON
4	THE HEAD. THAT IS, AS WE DOCUMENT THINGS, WE MIGHT
5	DOCUMENT THEM BY REFERENCE BACK TO THE INITIAL
6	STRATEGIC PLAN.
7	AND I FELT A LITTLE UNCOMFORTABLE READING
8	THROUGH SOME OF THIS THAT WAS SO SPECIFIC, AGAIN,
9	LIKE WE HAD IN THE FIRST GRANT, BUT YET WE DON'T
10	PRESENT ANY DATA TO THAT. AND SO I THINK THAT I
11	DON'T WANT TO GIVE THE IMPRESSION WE'RE DOING A
12	SECOND STRATEGIC PLAN BECAUSE I DON'T THINK THAT'S
13	INDICATED. BUT CERTAINLY WE'LL BE HELD TO THE GUN
14	IN THE YEAR 2016, PROBABLY BEFORE THAT, BASED ON OUR
15	PROGRESS AT ACHIEVING SOME OF THOSE GOALS.
16	SO I JUST DON'T THINK WE SHOULD BILL THIS
17	AS A NEW STRATEGIC PLAN BECAUSE WE DO HAVE OUR ROAD
18	MAP ALREADY, AND WE KNOW WHAT IT IS. AND I THINK
19	THAT'S THE GUIDELINES FOR YOU JUST LIKE IT WAS FOR
20	ZACH HALL AND WILL BE FOR ALL OF US AS WE GO ALONG.
21	DR. TROUNSON: JUST IN SOME DEFENSE OF
22	WHAT'S THERE, THERE HAVE BEEN VERY MAJOR
23	DEVELOPMENTS IN THIS AREA. AND WE NEED TO BE
24	RESPONSIVE TO THOSE MAJOR DEVELOPMENTS, AND I DON'T
25	THINK THAT THEY ARE INCORPORATED IN THE FIRST PLAN,

1	NOR IS THE EMPHASIS TO GET US SO QUICKLY TO
2	TRANSLATION AND TO THE DISEASE TEAMS, WHICH I THINK
3	ARE VERY IMPORTANT FOR US TO DO.
4	SO WHAT WE'RE TRYING TO DO IS BE
5	RESPONSIVE TO THE INCREDIBLE CHANGES THAT ARE GOING
6	ON AROUND US IN SCIENCE AND I THINK IN COMMUNITY
7	ATTITUDES. AND I THINK THE BLENDING OF OUR
8	CAPABILITY WITH THE NATIONAL ENDEAVOR IN THIS AREA
9	IS NOT REFLECTED IN THE ORIGINAL PLAN, NOR IS THE
10	GLOBAL ATTACK ON THESE TERRIBLE DISEASES. AND I
11	THINK WE HAVE AN OPPORTUNITY HERE TO DO THAT.
12	SO I THINK THERE ARE ELEMENTS IN THERE
13	THAT WE'RE BRINGING TO YOU BECAUSE WE THINK THAT
14	THINGS HAVE CHANGED. AND WE'RE NOT TRYING TO
15	REWRITE THE PLAN, BUT WE'RE BASICALLY TRYING TO
16	UPDATE IT AND GIVE YOU SOME VIEW THAT THINGS MIGHT
17	NEED TO BE MODIFIED IN ORDER FOR US TO MORE
18	EFFECTIVELY GARNER OUR MISSION IN HERE.
19	CHAIRMAN KLEIN: IF ONE READS THE
20	TRANSCRIPT FROM OUR ORIGINAL HEARINGS IN WHICH WE
21	APPROVED THE PLAN, FOR EXAMPLE, DR. POMEROY, YOU
22	COMMENTED IN THOSE TRANSCRIPTS ON THE NEED IN THE
23	FUTURE TO ADDRESS IMMUNOLOGY AND TOLERANCE. WE ALSO
24	IN THOSE DISCUSSIONS TALKED ABOUT IN THE FUTURE
25	LOOKING AT THIS PLAN AS ORGANIC AND INCORPORATING
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1	MORE CLINICAL OR TRANSLATIONAL FOCUS IN THE PLAN.
2	SO IF ONE LOOKS AT THE TRANSCRIPT RECORDS
3	AND LISTENS TO WHAT THE BOARD SAID AT THIS TIME, I
4	THINK IT'S PERFECTLY REASONABLE THAT THE STAFF
5	BELIEVE THAT THEY WERE TO UPDATE THAT PLAN BASED
6	UPON THAT. NOW, THE PROCESS IS COMPLETELY OPEN IN
7	THAT DISCUSSION. DR. BRYANT.
8	DR. BRYANT: YES. WHAT I WAS GOING TO
9	SAY, I THINK ONE OF THE ISSUES THAT I FELT WHEN I
10	LOOKED AT THIS IS IT'S REALLY HARD TO KNOW EXACTLY
11	HOW TO FIT IT, OVERLAP IT. SO ONE WAY TO REVISE THE
12	STRATEGIC PLAN WOULD BE TO START WITH THE ORIGINAL
13	PLAN AND TO MAKE SUGGESTIONS FOR PLACES TO INSERT,
14	DELETE, CHANGE IN A WAY THAT THE BOARD COULD FOLLOW
15	IT AND HAVE DISCUSSIONS ABOUT IT RATHER THAN BEING
16	PRESENTED WITH THE FINAL PRODUCT WHICH IS HARD TO
17	KIND OF LIKE OVERLAY.
18	CHAIRMAN KLEIN: WHAT I ALSO HEAR IS,
19	THOUGH, THAT WE WANT SOME PUBLIC HEARINGS WITH BASIC
20	INPUT SO THAT THEN WE CAN EVALUATE WHAT OUR STARTING
21	POINT SHOULD BE IN THIS PROCESS.
22	DR. FRIEDMAN AND THEN I THINK I HAVE A
23	COUPLE OF OTHER COMMENTS HERE.
24	DR. FRIEDMAN: ALAN, WHILE I AGREE WITH
25	YOUR POINT, THAT THIS IS AN OPPORTUNITY TO REFRESH
	240

1	IT, AND A GOOD STRATEGIC PLAN SHOULD BE ROUTINELY
2	REFRESHED, I WOULD LIKE TO ECHO SOME OF THE OTHER
3	COMMENTS. I THINK WHAT I LIKED LESS ABOUT THE FIRST
4	PLAN AND STILL FIND CRITICISMS HERE, I THINK IT
5	NEEDS TO BE MORE QUANTITATIVE WITH MORE CLEAR
6	SPECIFIC GOALS SO THAT ONE, TWO, AND FIVE YEARS
7	LATER WE'RE ABLE TO SAY WE DID MEET THIS OR WE
8	DIDN'T MEET IT.
9	SOME OF THESE ARE SPECIFIC, BUT SOME ARE
10	RATHER MORE ASPIRATIONAL. WHILE I'M NOT SAYING GET
11	RID OF THE ASPIRATIONAL ONES, I THINK HAVING A MORE
12	SPECIFIC WAY IN WHICH WE CAN ASSESS OUR PERFORMANCE
13	IS WHAT WE SHOULD EXPECT OF OURSELVES.
14	I THINK THE THING TO DO, RATHER THAN
15	REWRITING THIS DRAFT, IS TO TAKE THE SUGGESTION
16	THAT'S BEEN MADE, GO BACK TO THE ORIGINAL STRATEGIC
17	PLAN, AND ASK SOME VERY SPECIFIC QUESTIONS. WHAT
18	WASN'T ENVISIONED THEN THAT SHOULD BE ENVISIONED
19	NOW? WHAT NEW OPPORTUNITIES EXIST? WHAT DID WE
20	THINK WERE IMPORTANT LEADS THEN THAT HAVE TURNED OUT
21	TO BE CUL-DE-SACS AND WE DON'T WANT TO PURSUE? WHAT
22	HAVE WE LEARNED FROM THE WAY IN WHICH WE'VE
23	CONDUCTED BUSINESS OVER THE PAST SEVERAL YEARS?
24	WHAT IMPROVEMENTS DO WE SEE THAT WE CAN MAKE?
25	AND SO YOU BEGIN WITH AN ANALYTIC

1	DISCUSSION OF WHAT WORKS AND WHAT DOESN'T WORK. AND
2	THEN LAY OUT PRETTY CAREFULLY WHERE YOU WANT TO TRY
3	AND GET TO BETWEEN NOW AND, PICK YOUR HORIZON, TWO
4	YEARS, THREE YEARS, FIVE YEARS, WHATEVER YOU THINK
5	THE RIGHT SCIENTIFIC HORIZON IS. I THINK IT'S
6	REALLY GOOD TO REFRESH THE STRATEGIC PLAN, BUT I
7	THINK WE NEED TO BE VERY SELF-CRITICAL AND ASK
8	OURSELVES WHAT HAVE WE LEARNED FROM OUR PREVIOUS
9	EXPERIENCE? EVERYBODY HAS WORKED HARD. THAT'S NOT
10	THE ISSUE. GOOD IDEAS OUT THERE. THAT'S NOT THE
11	ISSUE. THE THING IS ARE WE SUCCESSFULLY CAPTURING
12	THEM? THANK YOU.
13	CHAIRMAN KLEIN: I BELIEVE WE HAVE MARCY
14	FEIT, AND THEN I'M GOING TO GO TO THE RIGHT AND GO
15	TO SHERRY LANSING.
16	MS. SAMUELSON: I HAD A QUESTION.
17	MS. FEIT: I JUST WANT TO COMMENT THAT I
18	UNDERSTAND THAT WE'RE JUST NOW GETTING REPORTS BACK,
19	A FIRST ROUND OF REPORTS FROM OUR GRANTEES IN THE
20	BEGINNING. AND, YOU KNOW, AS A BOARD WE NEED TO
21	ASSIMILATE THAT AND APPRECIATE SOME PROGRESS THERE.
22	AND THEN, YOU KNOW, TAKE THE ORIGINAL STRATEGIC PLAN
23	AND START TO LOOK AT IT PIECE BY PIECE AND SAY, YOU
24	KNOW, HOW DOES THIS REVIEW AND THIS ANALYSIS OF
25	WHERE WE'VE BEEN? WE'VE COMMITTED A LOT OF THE
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1	MONEY, AND THOSE FIRST ROUND OF REPORTS ARE GOING TO
2	BE VERY HELPFUL TO US TO UNDERSTAND DID WE
3	ACCOMPLISH WHAT WE HAD SET OUT TO DO IN THE
4	BEGINNING, AND DID THE STRATEGIC PLAN GUIDE US IN
5	THAT WAY?
6	SO I THINK THERE'S A LOT OF EVALUATION
7	INTERNALLY TOO THAT HAS TO TAKE PLACE BEFORE WE CAN
8	GO FORWARD. I WOULD CERTAINLY ADVOCATE FOR PUBLIC
9	INPUT. I ALWAYS HAVE. I THINK THAT THAT'S CRITICAL
10	IN ANY OF THIS PROCESS.
11	CHAIRMAN KLEIN: SO WE HAVE SHERRY AND
12	THEN JOAN.
13	MS. LANSING: I JUST WANT TO SAY I DON'T
14	DISAGREE WITH ANYTHING, BUT I WANT TO JUST PUT IT IN
15	CONTEXT. I HAVE NO PROBLEM WITH LOOKING BACK AT
16	WHAT OUR INITIAL GOALS WERE, NO PROBLEM WITH
17	EVALUATING IT, AND CERTAINLY AGREE THAT WE NEED
18	PUBLIC INPUT. BUT I DON'T THINK WE'RE A USUAL
19	BUSINESS THAT DOES A BUSINESS PLAN. AND THE REASON
20	IS IT'S SUCH A NEW FIELD, AND SCIENCE IS MOVING
21	AND I AGREE WITH YOU, ALAN, AND WHAT YOU ARE
22	SAYING SO FAST, THAT IT'S DEFYING ANY BUSINESS
23	PLAN THAT ANYONE EVER DID BEFORE. DO YOU KNOW?
24	AND SO WHAT I LIKE AND I WANT TO COMMEND
25	YOU ON THIS IS THAT WE HAVE TO IT'S ALMOST LIKE

1	OUR STANDARDS GROUP. WE'RE CONSTANTLY CHANGING.
2	WE'RE ALWAYS SAYING IT'S A WORK IN PROGRESS, AND I
3	FEEL VERY STRONGLY ABOUT THIS, THAT WHAT WE SAID A
4	YEAR AGO, SIX MONTHS AGO, AND CERTAINLY FOUR YEARS
5	AGO DOESN'T NECESSARILY HOLD TRUE.
6	SO I LOVE THE NEW SUGGESTIONS THAT YOU
7	HAVE AS TO MOVING FORWARD. AND I THINK THAT'S WHAT
8	A TRUE LEADER DOES. SO I REALLY WANT TO THANK YOU
9	ON THAT. AND I THINK IT JUST HAS TO BE SUPPORTED
10	WITH A LITTLE MORE DATA SO THAT WE UNDERSTAND HOW
11	YOU REACHED THOSE CONCLUSIONS. BUT I DON'T WANT,
12	AGAIN, WITH ALL DUE RESPECT, I WANT TO DO ALL THE
13	STEPS, BUT I DON'T WANT TO GET BOGGED DOWN IN THOSE
14	STEPS BECAUSE WHAT I REALLY WANT TO DO IS MOVE
15	FORWARD. AND IT'S MOVING FORWARD SO FAST, THAT AS
16	WE'RE SITTING HERE, SOMETHING CAN HAPPEN THAT CAN
17	CHANGE ONE OF THE THINGS THAT YOU SUGGESTED.
18	AND SO I LIKE THE FACT THAT YOU'RE TRYING
19	TO GO AHEAD OF IT, AND I COMPLIMENT YOU ON THAT.
20	JUST PERHAPS GIVE US A LITTLE MORE INFORMATION AS TO
21	HOW YOU MADE THOSE CONCLUSIONS.
22	CHAIRMAN KLEIN: ALL RIGHT. WE HAVE JOAN,
23	AND THEN I'M GOING TO GO TO JEFF. AND I'D LIKE TO
24	ALSO ASK THE BOARD FOR COMMENTS. LISTENING TO THE
25	BOARD TALK OVER TIME AND TRYING TO REACH FOR MORE

1	TRANSPARENCY AND MORE INFORMATION FOR THE PUBLIC,
2	DON GIBBONS WHO COULDN'T BE HERE, WROTE A SECTION ON
3	COMMUNICATIONS WITH THE PUBLIC. SHOULD THIS BE IN
4	THIS DOCUMENT? IS IT A SEPARATE DOCUMENT? BUT I
5	DEFINITELY WOULD LIKE TO EMPHASIZE THE FACT THAT
6	THERE'S A HIGH VALUE WITH COMMUNICATING WITH THE
7	PUBLIC AND TRANSPARENCY AND HOW WOULD WE LIKE THAT
8	ADDRESSED? I'D JUST LIKE TO GET SOME INPUT FOR THE
9	STAFF BECAUSE THEY WORKED VERY HARD ON TRYING TO
10	ANTICIPATE HOW TO RESPOND TO THE BOARD'S CONTINUOUS
11	CALLS FOR THAT REACH OUT TO THE PUBLIC WITH
12	COMMUNI CATI ONS.
13	MS. SAMUELSON: I DO THINK I AGREE WITH
14	YOU, BOB. I THINK THAT'S VERY IMPORTANT. I DON'T
15	HAVE AN OPINION RIGHT THIS SECOND HOW IT SHOULD BE
16	ADDRESSED.
17	I THINK THIS IS THE MOST IMPORTANT THING
18	WE'RE DOING, BOTH GETTING THE PROGRESS REPORT AND
19	RESHARPENING THE STRATEGIC PLAN. I THINK IF IT
20	TAKES SOME TIME AND MONEY, SO BE IT. IT'S THE MOST
21	IMPORTANT THING WE'RE DOING RIGHT NOW.
22	AND I ALSO THINK THAT IN ASSESSING WHERE
23	WE ARE, WE SHOULD BE GETTING THE BEST MINDS IN THE
24	WORLD. USE THESE INTERNATIONAL COLLABORATIONS THAT
25	WE HAVE NOW BECAUSE WE SHOULDN'T BE THE ONLY ONES

1	JUDGING OUR OWN WORK PRODUCT, IT SEEMS TO ME. AS
2	WELL AS BRINGING IN THE COMMUNITY, WE SHOULD BE
3	BRINGING IN THE SCIENTIFIC COMMUNITY AND ASKING THEM
4	WHAT COULD WE BE DOING BETTER? WHAT COULD WE BE
5	DOING FASTER, MORE URGENTLY?
6	CHAIRMAN KLEIN: OKAY. AND THEN JEFF AND
7	THEN GO TO DUANE AND THEN TO CLAIRE.
8	MR. SHEEHY: WELL, I WOULD LIKE TO SUGGEST
9	A VERY SPECIFIC PROCESS, THAT WE START AS A BOARD AS
10	PART OF THIS STRATEGIC PLAN. WE TALK ABOUT THE
11	SCIENCE IS MOVING FASTER. WE'RE GETTING TO THE
12	CLINIC. THAT MEANS INDUSTRY. AND I DON'T KNOW HOW
13	MANY BOARD MEMBERS HAVE GONE THROUGH THE EXPERIENCE
14	THAT I'VE GONE THROUGH WHERE AND WE'VE HEARD FROM
15	PEOPLE AT PUBLIC MEETINGS. WE'RE HEARING A LOT OF
16	FEEDBACK FROM INDUSTRY THAT, FOR WHATEVER REASON,
17	OUR PROCESSES AREN'T NECESSARILY MESHING. AND I
18	THINK WE SHOULD SPECIFICALLY SET UP A TASK FORCE AS
19	PART OF THIS STRATEGIC PLAN REVISIT TO ACTUALLY DEAL
20	WITH INDUSTRY, COLLECT ALL THE DIFFERENT ISSUES, AND
21	COME TO SOME CONCLUSION.
22	I KNOW THE ISSUE OF PI KEEPS COMING UP,
23	KEEPS COMING UP, KEEPS COMING UP. I DON'T THINK
24	IT'S FAIR TO PUT STAFF IN THAT ROLE OF HAVING TO
25	MAKE THESE POLICY DECISIONS. AND I THINK AS A
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1	BOARD, IF WE'RE SERIOUS ABOUT GETTING INTO THE
2	CLINIC, WE HAVE TO GET INDUSTRY INTO THIS SPACE.
3	AND WE HAVE THE LOAN PROGRAM, BUT I'M WONDERING IF
4	THERE ARE OTHER ISSUES THAT PEOPLE SAY EVEN WITHIN
5	THE GRANT PROCESS AND NOT GETTING GRANTS. AND I
6	DON'T KNOW IF THERE'S SOME WILLINGNESS I WOULD BE
7	HAPPY TO PARTICIPATE IN THAT PROCESS. BUT I WOULD
8	LIKE TO REALLY GET TO THE HEART OF THE OBSTACLES
9	THAT COMPANIES ARE FACING WHEN THEY INTERACT WITH US
10	BECAUSE WE'RE AM I THE ONLY ONE AND REALLY
11	JUST COME TO SOME CONCLUSION ON THIS. IDENTIFY THE
12	PROBLEMS, AND MAYBE WE AGREE WITH THEM, MAYBE WE
13	DON'T, BUT AT LEAST WE'VE GIVEN EVERYBODY A CHANCE
14	TO PUT THE ISSUES OUT THERE AND TO MAKE PROPOSALS
15	AND MOVE FORWARD SO THAT THIS STOPS BEING THIS
16	CONSTANT BURR UNDER OUR SADDLE.
17	DR. TROUNSON: ONE OF THE RECOMMENDATIONS,
18	JEFF, IN THERE IS TO DO THIS, MAYBE NOT IN EXACTLY
19	THE SAME WAY YOU SAID, BUT ESSENTIALLY TO SET UP AN
20	ADVISORY GROUP TO HELP US IN THIS REGARD. I THINK
21	WE'VE GOT TO MAKE CONTACT AND CONNECTIONS NOT ONLY
22	WITH BIOTECHNOLOGY, BUT WITH THE PHARMACEUTICAL
23	INDUSTRY. AND SO THESE ARE BIG ITEMS, AND THEY'RE
24	NECESSARY THAT WE INDULGE IN A LOT MORE DISCUSSION
25	IN THAT AREA.

1	MR. SHEEHY: BUT THEN WHAT YOU DO IS YOU
2	PRIVILEGE THOSE WHO SIT ON THE COUNCIL AT THE
3	EXPENSE OF OTHER PEOPLE WHO AREN'T ON THAT COUNCIL,
4	AND THAT PROMULGATES A PERCEIVED, IF NOT A REAL,
5	CONFLICT OF INTEREST. IT'S MUCH BETTER TO HAVE A
6	PUBLIC PROCESS WHERE ANY INDUSTRY STAKEHOLDER CAN
7	PARTICIPATE AND HAVE A VOICE. TO HAVE A SELECT FEW,
8	I THINK, WOULD ACTUALLY OPEN US UP TO A MUCH LARGER
9	SET OF PROBLEMS.
10	MEETING EX CAMERA WITH YOU, I THINK, IS
11	ONE OF THE MOST PROBLEMATIC ASPECTS OF THIS ENTIRE
12	PLAN. AND WE HAVE INDUSTRY MEMBERS ON THE BOARD,
13	AND IT KIND OF DEVALUES THEIR ROLE, WHICH I ALSO
14	THINK IS PROBLEMATIC BECAUSE THEY'RE SPECIFICALLY
15	PUT ON HERE AS PART OF THE VISION OF PROP 71 TO MAKE
16	SURE THAT THE VOICE OF INDUSTRY IS HEARD. SO I
17	ACTUALLY SEE THAT AS A PROBLEMATIC ONE OF THE
18	MORE TROUBLING ASPECTS OF THIS PLAN.
19	CHAIRMAN KLEIN: DUANE.
20	MR. ROTH: I THINK ONE OF THE THINGS THAT
21	MADE THE FIRST STRATEGIC PLAN SO POWERFUL IS IT
22	STARTED WITH A LOT OF LISTENING AND TALKING WITH
23	PEOPLE, AND THEN THERE WAS DRAFTING, AND THEN THERE
24	WAS REFINEMENT OF THAT DRAFT INTO A FINAL PROGRAM.
25	ONE OF THE PROBLEMS WITH PUTTING A DRAFT
	240
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1	OUT INITIALLY IS EVERYBODY SORT OF REACTS TO WHAT
2	THEY DON'T LIKE OR DO LIKE ABOUT WHAT'S IN THAT
3	DRAFT, AND YOU REALLY DON'T GET THE KIND OF INPUT
4	THAT YOU MIGHT THEN GO AND PICK UP THE STRATEGIC
5	PLAN AND SAY DID WHAT WE HEAR CORRESPOND TO WHAT WE
6	HAVE IN THE DRAFT? SO THAT'S JUST ONE SUGGESTION.
7	BUT THINGS LIKE REALLY BIG PICTURE THINGS,
8	WHAT CONCERNS ME THE MOST SITTING HERE IS HOW FAST
9	THIS SCIENCE HAS MOVED. AND WHEN YOU SEE THINGS
10	LIKE THIS MORNING
11	CHAIRMAN KLEIN: IT CONCERNS YOU OR
12	PLEASES YOU?
13	MR. ROTH: CONCERNS ME BECAUSE THE
14	REGULATORY AND BUSINESS CASES ARE NOT IN SYNC WITH
15	THAT. AND WE'RE GOING TO STUMBLE INTO THIS AND
16	SUDDENLY HAVE LOTS OF DELAYS AND PROBLEMS AND LACK
17	OF INVESTMENT FROM THE INDUSTRY TO PULL THIS THING
18	TO ACTUAL PRODUCTS.
19	I JUST THINK THERE'S SOMETHING IMPORTANT
20	IN THE STRATEGIC PLAN THAT SHOULD TRY TO HELP
21	ADDRESS THAT.
22	CHAIRMAN KLEIN: SO ONE OF THE THINGS THAT
23	I ADDRESSED YESTERDAY MORNING WAS THE ISSUE WITH
24	STRUCTURAL DEFICIENCIES THAT ARE LACK OF CAPACITY AT
25	THE FDA. AND ONE POTENTIAL OUTCOME OF THAT PUBLIC
	249

1	DISCUSSION ABOUT OUR ROLE IN TERMS OF INCREASING FDA
2	FUNDING IS, IN FACT, TO FIGURE OUT SOME PROCESS OF
3	LOOKING AT SOME PUBLIC PROCESS OF LOOKING AT THE
4	REGULATORY PROCESS, HOW WE RELATE TO IT, AND HOW WE
5	CAN ENHANCE OUR ABILITY TO MOVE THROUGH IT.
6	MR. ROTH: JUST LET ME RESPOND QUICKLY.
7	ON THE REGULATORY AND BUSINESS FRONT, WHERE WE HAVE
8	A UNIQUE CAPABILITY AS THE PATIENT ADVOCATES THAT
9	WORK WITH US, THAT THIS IS HIGHLY UNUSUAL. BUT
10	WOULDN'T IT BE WONDERFUL IF THE PEOPLE THAT STAND AT
11	THE PODIUM COULD DESCRIBE THE VALUE OF A CURE AND
12	TELL US HOW MUCH THAT'S WORTH AND TELL US HOW MUCH
13	REGULATORY RISK THEY'RE WILLING TO TAKE AND DEFINE
14	THAT AND TELL IT TO THE FDA. INSTEAD OF WAITING FOR
15	INDUSTRY, WHO WILL THROW OUT A PLAN AND EVERYBODY
16	WILL JUMP UP AND DOWN AND SAY YOU CAN'T DO THAT,
17	THAT'S RIDICULOUS. OR INDUSTRY, YOU GREEDY PEOPLE,
18	HOW COULD YOU POSSIBLY THINK A CURE IS WORTH A
19	MILLION DOLLARS?
20	AND IF WE COULD JUST GET OUR DISEASE
21	ADVOCATES TO DEFINE THAT IN ADVANCE AND TALK TO
22	THEIR CONGRESSMEN AND TALK TO THE FDA AND TALK TO
23	CMS, I THINK MAGICAL THINGS WOULD HAPPEN. AND
24	INDUSTRY WOULD GO, WOW, THEY'RE PROPOSING \$2 MILLION
25	FOR A CURE FOR TYPE 1 DIABETES. THERE WOULD BE
	050

1	DI FFERENCES.
2	CHAIRMAN KLEIN: I'M GOING TO GO TO DR.
3	POMEROY, AND THEN I'M GOING TO COME BACK, GORDON, TO
4	YOU, AND THEN I'M GOING TO GO TO THIS SIDE.
5	DR. POMEROY: I WOULD JUST LIKE TO SUGGEST
6	AN APPROACH, WHICH IS THAT I THINK THAT OUR MISSION
7	AND OUR VISION HAVE NOT CHANGED FROM THE ORIGINAL
8	STRATEGIC PLAN. AND I THINK THE STARTING POINT FOR
9	THIS KIND OF DOCUMENT IS AN ENDORSEMENT OF THAT
10	UNCHANGED MISSION AND VISION.
11	AND THEN EACH OF THE STRATEGIES THAT WE
12	STRATEGIES, AS OPPOSED TO TACTICS, THAT WE INITIALLY
13	ENDORSED SHOULD PROBABLY BE ASSESSED. MOST OF THOSE
14	STRATEGIES WILL PROBABLY REMAIN UNCHANGED. THERE
15	MAY BE ONE OR TWO NEW STRATEGIES THAT ARE
16	APPROPRIATE GIVEN THE CHANGING STATE OF THE FIELD.
17	WHAT WILL MOSTLY CHANGE, I ANTICIPATE, IS
18	THE TACTICS. AND IN THIS DOCUMENT I HAD DIFFICULTY
19	SORTING OUT THE DISCUSSION OF STRATEGIES VERSUS THE
20	DISCUSSION OF TACTICS. AND YOU HAVE SOME BIG
21	CONCEPTS MIXED RIGHT IN IMMEDIATELY DRILLING DOWN TO
22	VERY SPECIFIC TACTICS.
23	AND I THINK DIFFERENTIATING THOSE LEVELS
24	OF THINKING IN THIS DOCUMENT, AS I THINK WAS PRETTY
25	MUCH DONE IN THE FIRST DOCUMENT, WOULD BE VERY

1	HELPFUL TO ME IN ASSESSING OUR PROGRESS AND THE
2	PARTS THAT WE WANT TO MAINTAIN VERSUS THE PARTS THAT
3	WE NEED TO UPDATE.
4	CHAIRMAN KLEIN: OKAY. IF I CAN GO TO
5	THIS SIDE, I'M GOING TO GO TO DR. FONTANA AND THEN
6	DR. PI ZZO.
7	DR. FONTANA: I JUST WANTED TO COMMENT
8	PERHAPS ON THE PROCESS. AND I WANTED TO APPLAUD
9	ALAN FOR HIS FORESIGHT IN UNDERSTANDING THAT INDEED
10	THIS IS A FAST-CHANGING FIELD, AND WE HOPEFULLY AS
11	AN AGENCY CAN RESPOND TO THIS FAST-CHANGING FIELD.
12	AND ONE OF THE OR SEVERAL OF THE PROCESSES
13	WHICH WE USED IN THE PAST, WHICH I FOUND VERY
14	EFFECTIVE AND I THINK WOULD HELP SOLVE A LOT OF
15	ISSUES THAT ARE COMING UP HERE, IS ACTUALLY HAVING A
16	PUBLIC FORUM BY WHICH WE DISCUSS EACH OF THESE
17	THINGS. HAVE THE PUBLIC COME AND CRITIQUE US, LOOK
18	AT WHAT WE'VE SET UP, AND GIVE SUGGESTIONS. HAVE
19	THE DISEASE TEAM ADVOCATES COME IN AND SAY, WELL, WE
20	SEE THAT YOU'VE GIVEN THIS MANY GRANTS IN THIS KIND
21	OF FIELD. PERHAPS YOU SHOULD CONSIDER THIS. OR WE
22	NEED INDUSTRY AND LET INDUSTRY COME UP AND GIVE US
23	SOME SUGGESTIONS. TAKE THOSE SUGGESTIONS IN LIKE WE
24	DID WHEN WE WERE FORMULATING THE STRATEGIC PLAN AND
25	ADDRESS THOSE.
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	LJZ

1	IT TAKES A LITTLE BIT OF TIME, BUT I THINK
2	IT WOULD SERVE US WELL IN THAT ALL VOICES ARE HEARD.
3	AND WE ARE BEING REVIEWED, NOT JUST INTERNALLY, BUT
4	BY THE PUBLIC AND EXPERTS. I THINK WE'RE SO CLOSE.
5	I THINK WE ALL WANT THE SAME THING. IT'S ONE MORE
6	MEETING, BUT I THINK THAT MEETING WOULD BE A VERY
7	POSITIVE AND BENEFICIAL ONE THAT WE ALL PERHAPS
8	WOULD LIKE TO GO TO.
9	CHAIRMAN KLEIN: OKAY. DR. PIZZO.
10	DR. PIZZO: THIS IS AT SLIGHT VARIANCE
11	FROM JUST STRATEGIC PLANNING PER SE, BUT IT FOLLOWS
12	TO DUANE'S COMMENT AND IN A SENSE DOES REQUIRE SOME
13	STRATEGIC THINKING. YESTERDAY I THINK, BOB, YOU
14	MENTIONED OR THE DISCUSSION CAME UP ABOUT BATTEN'S
15	DISEASE AND THE NEUROSTEM CELL APPROACH THAT WAS
16	TAKEN, WHICH RAN INTO HUGE REGULATORY PROBLEMS
17	THROUGH IRB'S, INCLUDING AT MY OWN INSTITUTION, AND
18	REALLY AT RISK.
19	SO, DUANE, TO YOUR POINT IS THAT, YOU
20	KNOW, WE HEARD THIS MORNING ABOUT CHILDREN WITH
21	HUNTINGTON'S WHO MIGHT BENEFIT FROM SOME YET TO BE
22	DEFINED THERAPEUTIC INTERVENTION. BUT THE
23	GUIDELINES THAT DEFINE PEDIATRIC RESEARCH WILL NOT
24	ALLOW A RISK ABOVE THAT OF A HEALTHY CHILD. SO
25	REALLY THE DEBATE IS, YOU KNOW, IF A FAMILY MIGHT
	253

1	SAY, GEE, I'M WILLING TO TAKE THIS RISK BECAUSE MY
2	CHILD HAS A LIFE-THREATENING DISEASE, THE CURRENT
3	REGULATIONS, INCLUDING FROM ADVISORY BODIES LIKE
4	INSTITUTE OF MEDICINE, CHALLENGE THE ABILITY OF A
5	PARENT TO MAKE THAT DECISION OR EVEN FOR
6	INSTITUTIONS TO MAKE THAT DECISION.
7	SO I SAY THAT ONLY AS AN EXAMPLE BECAUSE
8	IT FOLLOWS CLOSELY ON WHAT YOU WERE SAYING AND HAS A
9	PERSONAL TOUCH BECAUSE IT RELATES TO THE FAMILIES
10	THAT WE SAW TODAY, BUT IT IS A STRATEGY IN A SENSE
11	IN THAT WE CAN ANTICIPATE WHETHER IT'S A YEAR FROM
12	NOW OR TWO YEARS FROM NOW THAT THERE WILL BE
13	HOPEFULLY AN INTERVENTION WHICH MAY HAVE THE
14	POTENTIAL FOR BENEFITING A CHILD WITH A
15	LIFE-THREATENING DISEASE. AND WE'RE GOING TO RUN UP
16	AGAINST THESE REAL IMPEDIMENTS. SO I THINK
17	ANTICIPATING THOSE THINGS ARE REALLY IMPORTANT
18	THINGS FOR US TO DO AS WELL.
19	DR. GILL: I DON'T HAVE A COMMENT ON HOW
20	ONE SHOULD DEVELOP THE NEW STRATEGIC PLAN, BUT, YOU
21	KNOW, I THINK WITH SOCRATES THE UNEXAMINED LIFE IS
22	NOT WORTH LIVING. AND IT'S NECESSARY TO CONSTANTLY
23	UPDATE ANY PLAN, PARTICULARLY IN AN AREA LIKE STEM
24	CELL BIOLOGY WHERE A COUPLE OF YEARS AGO, I SAY A
25	COUPLE, A FEW YEARS AGO ONE WOULD HAVE HAD NO
	254

1	KNOWLEDGE OF INDUCED PLURIPOTENT CELLS WHICH CHANGES
2	THE LANDSCAPE. ONE HAD VERY LITTLE KNOWLEDGE OF
3	MICRORNA'S, SIRNA'S WHICH AGAIN CHANGE THE WAY THAT
4	ONE DOES BIOLOGY.
5	SO ONE OF THE THINGS THAT YOU'VE
6	ACCOMPLISHED, AND YOU CAN COUNT IT UP, I THINK, IS
7	YOU BROUGHT PEOPLE INTO THE STEM CELL RESEARCH
8	FIELD. YOU'VE CREATED A CADRE, SOME OF THEM ARE
9	STILL IN TRAINING, BUT YOU'VE CREATED A CADRE OF
10	SCIENTISTS WHO ARE GOING TO USE ALL OF THESE NEW
11	TECHNOLOGIES. WHATEVER YOU DO WITH YOUR STRATEGIC
12	PLAN, I THINK THAT UNDERPINNING IS ABSOLUTELY
13	NECESSARY FOR YOU TO MAINTAIN. YOU LIST HOW MANY
14	SCIENTISTS AND TRAINEES THERE ARE, BUT THAT'S THE
15	FUTURE. YOU MAY NOT MAKE THE GOAL OF THE TEN YEARS,
16	I HOPE WE DO, BUT YOU'VE PUT THE INFRASTRUCTURE FOR
17	PEOPLE TO DEVOTE THEIR LIVES IN INTO THIS AREA OF
18	RESEARCH, WHICH WILL SURELY BEAR FRUIT AT SOME
19	POI NT.
20	SO I WOULD ENCOURAGE YOU TO NOT JUST DO A
21	STRATEGIC PLAN NOW, BUT DO ANOTHER ONE, YOU KNOW,
22	THAT REFLECTS THE RAPIDLY CHANGING LANDSCAPE.
23	CHAIRMAN KLEIN: ALL RIGHT. I'D LIKE TO
24	EMPHASIZE HERE THAT THE STAFF IS ALWAYS TRYING TO
25	PUT OUT THE VERY BEST EFFORTS, AND IT'S DIFFICULT
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1	SOMETIME TO ESTIMATE THE STARTING POINT. MANY OF US
2	HAVE BEEN TOGETHER FOR OVER FOUR YEARS NOW. SO EVEN
3	WITHIN OUR OWN ORGANIZATION, THERE ARE OBVIOUSLY
4	COMPETING THEORIES AND PASSIONATELY HELD THEORIES.
5	BUT WE ALWAYS SHOULD RECOGNIZE THAT ALL OF THESE
6	STAFF EFFORTS ARE DEDICATED, PASSIONATE, AND TRYING
7	TO BE RESPONSIVE TO WHAT THEY READ AND HEAR IN OUR
8	MEETI NGS.
9	BUT I THINK WE'VE HAD A LOT OF GOOD INPUT
10	HERE. WOULD SOMEONE LIKE TO COME UP WITH A MOTION
11	ABOUT A PROCESS TO SCULPT THE LARGE-SCALE OUTLINE OF
12	IT AND ASK THE STAFF TO THEN COME BACK WITH
13	SOMETHING THAT'S RESPONSIVE TO THAT, OR WOULD YOU
14	LIKE THE STAFF, HAVING HEARD THIS DISCUSSION, TO
15	COME BACK WITH A PLAN? IT SOUNDS LIKE I DON'T NEED
16	A VOTE ON THAT ISSUE. BUT I THINK IT'S A VERY
17	HEALTHY DISCUSSION. I THINK WE ALL LEARNED
18	SOMETHING BY HAVING THESE VERY ROBUST, OPEN
19	DISCUSSIONS, AND A LOT OF GREAT DIFFERENT
20	PERSPECTIVES ARE GENERATED IN THAT PROCESS.
21	SO, DR. TROUNSON, YOU HAVE ENOUGH
22	INFORMATION TO COME BACK AND PROPOSE AT THE NEXT
23	MEETING A PROCESS FOR THE STRATEGIC PLAN.
24	DR. TROUNSON: THANK YOU, CHAIR. AND
25	THANK THE BOARD FOR THEIR INPUTS. YOU KNOW, I THINK
	05/

1	IT REALLY IS IMPORTANT TO HAVE THESE KIND OF
2	DISCUSSIONS AND FIND WAYS TO MOVE OURSELVES FORWARD
3	BECAUSE THE MISSION SAYS THAT WE'VE GOT A BIG JOB TO
4	DO, AND I REMAIN CONCERNED THAT TO DO THAT JOB, WE
5	REALLY HAVE TO BE OURSELVES CREATIVE AND INNOVATIVE
6	AND MOVE WITH AS MUCH SPEED AS POSSIBLE BECAUSE
7	WE'RE NOT GOING TO GET THERE, I THINK, IF WE JUST,
8	YOU KNOW, LOOK AT THE SHADOWS OF WHERE WE'VE BEEN.
9	BUT I THINK WE HAVE TO TRY AND CREATE A
10	WAY FORWARD, WHICH WITH A VERY FAST-CHANGING
11	LANDSCAPE THAT WE CAN TAKE ADVANTAGE OF THIS
12	PARTICULAR AGENCY, AND MAYBE AN NIH OR SOME OTHER
13	BODY WOULDN'T BE QUITE AS FLEXIBLE AND AS QUICK
14	MOVI NG.
15	MR. SHESTACK: WHEN ARE WE ASKING FOR THAT
16	PROPOSAL BACK FROM STAFF?
17	CHAIRMAN KLEIN: MY UNDERSTANDING WOULD BE
18	THE NEXT MEETING OF THE BOARD.
19	DR. PENHOET: JUST ONE PERHAPS CAUTIONARY
20	NOTE. I THINK, FOLLOWING ON DR. GILL'S COMMENT, THE
21	FIELD IS MOVING VERY RAPIDLY, AND I FULLY APPRECIATE
22	THE URGENCY TO HAVE DIALOGUE, ETC. WE HAVE TO BE
23	CAREFUL NOT TO PUT SUCH A CUMBERSOME PROCESS IN
24	PLACE THAT WE NEVER GET IT DONE AND, THEREFORE, THE
25	PROCESS JUST CONTINUES AND CONTINUES. BECAUSE THE
	057

1	OPERATIONAL ROLE OF THE STRATEGIC PLAN IS TO DEFINE
2	THE RFA'S THAT WE'RE GOING TO PUT OUT. THAT'S WHERE
3	THE RUBBER MEETS THE ROAD.
4	I THINK IN THIS DISCUSSION, CLAIRE'S FIRST
5	POINT, ALAN, ABOUT SEPARATING THE REVIEW OF WHAT'S
6	HAPPENED FROM THE GO FORWARD IS A SIMPLIFIED
7	CONSTRUCT.
8	MR. SHESTACK: IT'S MORE LIKE THE
9	ENCYCLOPEDIA AND YEARBOOK APPROACH, WHICH IS WE HAVE
10	A STRAT PLAN, AND THEN THINGS HAVE CHANGED, NEW
11	ADMINISTRATION, NEW FUNDS OUT THERE. TAKE THEM INTO
12	ACCOUNT, MODIFY IT, PUT IT IN A DOCUMENT WE CAN ALL
13	SEE QUICKLY AND SORT OF TRACK THE CHANGES.
14	CHAIRMAN KLEIN: SO, DAVID, DID YOU HAVE A
15	COMMENT?
16	MR. SERRANO-SEWELL: I THINK IT'S TIME FOR
17	LUNCH.
18	CHAIRMAN KLEIN: WE'VE GOT A CALENDAR
19	HERE. WE'VE GOT A CALENDAR WHERE WE GOT A LITTLE
20	BIT BEHIND. LET'S DO BEFORE WE GET TO LUNCH, I'D
21	LIKE TO DEAL WITH ITEM 7 20 IS VERY IMPORTANT TO
22	DO ITEM 13. AND COUNSEL SPECIFICALLY WOULD LIKE ME
23	TO COVER ITEM 24.
24	(SIMULTANEOUS DISCUSSION.)
25	MS. LANDING: I WOULD LIKE TO RECOMMEND
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1	THAT WE DO THIS AFTER LUNCH.
2	MS. SAMUELSON: SECOND.
3	CHAIRMAN KLEIN: WHEN BLOOD SUGARS ARE
4	BETTER IS THE PROPOSAL.
5	MS. KING: TWO THINGS. ONE, LUNCH HAS
6	BEEN SCHEDULED FOR 12:30 BECAUSE WE KNEW WE THOUGHT
7	THAT THE GRANT PROCESS WOULD TAKE LONGER, SO THE
8	FOOD ISN'T READY YET. AND TWO, THIS ITEM IS URGENT
9	TO COMPLETE BEFORE WE GET TO SOME OF THE OTHER ITEMS
10	ON THE AGENDA.
11	CHAIRMAN KLEIN: THE FIRST ISSUE IS MORE
12	DI SPOSI TI VE.
13	DR. PIZZO: WE'LL DO IT IF YOU MAKE THE
14	ROOM WARMER.
15	CHAIRMAN KLEIN: CAN WE MAKE THE ROOM
16	WARMER? WE'RE GOING TO HAVE A FIVE-MINUTE BREAK AND
17	THEN FOR PEOPLE TO WARM UP AND TAKE A BREAK AND COME
18	BACK.
19	(A RECESS WAS TAKEN.)
20	DR. PENHOET: CONVENING THE MEETING IN
21	BOB'S ABSENCE, CAN WE HAVE CONSIDERATION OF ITEM 20,
22	PLEASE, WHICH IS THE CONSIDERATION OF A
23	PREAPPLICATION REVIEW.
24	MS. KING: THANK YOU SO MUCH, DR. PENHOET.
25	BEFORE WE DO THAT, IF WE COULD JUST HAVE, I KNOW
	259
	20/

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THERE'S AT LEAST ONE PUBLIC COMMENT FROM THE PRIOR
ITEM THAT WE SAID WE WOULD DO RIGHT AFTER THE BREAK.
SO IF I CAN INVITE MR. SIMPSON UP TO THE MICROPHONE,
PLEASE.
MR. SIMPSON: THANK YOU VERY MUCH. JOHN
SIMPSON, CONSUMER WATCHDOG. JUST ON THE PREVIOUS
ITEM, I SENSE THE CONSENSUS FROM THE BOARD, MOST OF
WHICH I AGREED WITH, WHICH MAYBE YOU FIND SHOCKING,
I DID INDEED. THE CONSENSUS SEEMED TO BE THAT THERE
NEEDED TO BE PUBLIC INPUT. AND IF YOU WANTED TO
HURRY THE PROCESS ALONG, I WAS GOING TO SUGGEST THAT
PERHAPS IT WOULD BE PRUDENT TO SET A PUBLIC HEARING
TENTATIVELY, SAY, EARLY IN JANUARY ON SOME OF THE
ISSUES THAT YOU'RE HAVING. THAT WAS MY ONLY
THOUGHT. THANK YOU.
CHAIRMAN KLEIN: OKAY. IS THERE
ADDITIONAL PUBLIC COMMENT?
MR. BASHAM: DARYL BASHAM, DNA-MI CROARRAY.
JUST LIKE TO CONCUR WITH MR. SHEEHY THAT WE THINK
THAT A TASK FORCE OF SOME TYPE OF SOME MEANS OF
PUBLIC INPUT FROM INDUSTRY WOULD BE VERY IMPORTANT
AT THIS TIME. THANK YOU.
CHAIRMAN KLEIN: THANK YOU.
MR. REED: DON REED, CALIFORNIANS FOR
CURES. JUST IN AGREEMENT, THAT WE NEED TO HAVE AS
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1	MUCH PUBLIC INPUT AS POSSIBLE. THE STRENGTH OF THE
2	ICOC HAS BEEN ITS INCLUSION, AND THAT POLICY IS A
3	STRONG ONE AND SHOULD BE MAINTAINED.
4	CHAIRMAN KLEIN: THANK YOU.
5	MR. ADAMS: BILL ADAMS, INTERNATIONAL STEM
6	CELL. I'M VERY ENCOURAGED TO HEAR THE BOARD TAKE A
7	LOOK AT THE PROCESS UP TO DATE. THIS WHOLE PI THING
8	FOR US INDUSTRY PEOPLE HAS BEEN LIMITED. WE HAVE
9	NOT BEEN ABLE TO BRING FORTH TO THE COMMITTEE OR TO
10	THE CIRM THE BEST POSSIBLE APPLICATIONS. AND I
11	THINK IT'S HURT US, AND I CERTAINLY THINK IT'S HURT
12	THE PROCESS. AND ALSO I THINK THE APPEAL PROCESS
13	NEEDS TO BE STREAMLINED AND MADE DIFFERENT.
14	AS FAR AS THE COMMITTEE IS CONCERNED, I'D
15	BE HAPPY TO PARTICIPATE WITH WHATEVER YOU FOLKS ARE
16	GOING TO DO. THANK YOU.
17	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
18	WITH THAT, I'D LIKE TO TRY AND SEE IF WE CAN MOVE
19	VERY EFFICIENTLY, BUT WITHOUT PREDISPOSING THE
20	FACT WITHOUT DETERMINING WHETHER OR NOT WE'RE
21	GOING TO FINISH THIS ITEM, WE WILL BREAK FOR LUNCH.
22	AND WE MAY BREAK A FEW MINUTES BEFORE 12:30, HOPING
23	THAT THEY'RE EARLY, THEY'RE A LITTLE BIT EARLY IN
24	THE PREPARATION. BUT MY UNDERSTANDING IS THAT
25	PEOPLE GOT WARMED UP. THE STAFF HAS BEEN
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1	ENCOURAGING THEM TO MOVE FASTER.
2	ITEM 20, CONSIDERATION OF PREAPPLICATION
3	REVI EW.
4	DR. CSETE: JAMES AND I ARE GOING TO DO A
5	DUET SINCE WE SORT OF WORKED ON THIS TOGETHER AS
6	WELL. BUT I WANTED TO MAKE ONE COMMENT ABOUT
7	PROGRESS REPORTS BECAUSE, MARCY, I JUST THINK THE
8	BOARD NEEDS TO KNOW. WE ARE NOW INDEED SEEING OUR
9	FIRST PROGRESS REPORTS FROM THE EXPERIENCED
10	INVESTIGATORS AS WELL AS THE SEED GRANTS.
11	AND THE AMOUNT OF TIME THAT WE TAKE ON
12	THESE REPORTS IS AN IMPORTANT THING FOR THE BOARD TO
13	KNOW ABOUT. UNLIKE NONCOMPETING RENEWALS AT THE NIH
14	LEVEL, WE TAKE THESE REALLY SERIOUSLY. WE GO BACK
15	AND WE INTERACT WITH THE APPLICANTS. WE MAKE SURE
16	PEOPLE ARE ON TRACK. WE MAKE SURE THAT IF THEY
17	AREN'T ON TRACK, THAT WE KNOW ABOUT IT AND THAT THEY
18	KNOW THAT WE KNOW ABOUT IT AND THAT WE DO EVERYTHING
19	WE CAN TO GET THEM BACK ON TRACK AND USE THE MONEY
20	VERY WELL.
21	THESE PROGRESS REPORTS ARE ENORMOUSLY
22	VALUABLE FOR PLANNING OUR FUTURE RFA'S, AND IT'S
23	REALLY REQUIRED A CULTURE CHANGE ON THE PART OF OUR
24	INVESTIGATORS TO BE WILLING TO RECEIVE THESE CALLS
25	AND TO REALIZE THAT WE'RE TAKING AN ACTIVE INTEREST
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1	IN EVERY SINGLE ONE OF THE PROGRAMS WE FUND. IT'S
2	AN ENORMOUS AMOUNT OF WORK FOR THESE INCREDIBLY
3	TALENTED SCIENTISTS BEHIND ME TO GO THROUGH THESE IN
4	DETAIL, BUT WE'RE DOING IT. AND I'LL BE HAPPY TO
5	UPDATE YOU ON THAT SOON.
6	MR. HARRISON: SO AS A REMINDER, AT THE
7	LAST MEETING WE DISCUSSED WITH YOU THE CONCEPT OF A
8	PREAPPLICATION REVIEW. TO SET THE CONTEXT FOR THIS,
9	AS YOU KNOW, UNDER PROP 71 THE AGENCY HAS TO RELY ON
10	A GROUP OF NO MORE 15 SCIENTIFIC MEMBERS OF THE
11	GRANTS WORKING GROUP TO ENGAGE AT ANY ONE TIME IN
12	THE PEER REVIEW OF APPLICATIONS.
13	INCREASINGLY, AND THE TOOLS AND TECHNOLOGY
14	APPLICATIONS ARE AN APT EXAMPLE, THIS HAS PLACED A
15	VERY HEAVY BURDEN ON THE GRANTS WORKING GROUP
16	MEMBERS. AND OUR RESPONSE HAS BEEN TO IMPOSE LIMITS
17	ON THE NUMBER OF APPLICATIONS SUBMITTED PER
18	INSTITUTION. AND THAT'S A SITUATION THAT WE BELIEVE
19	IS BECOMING UNTENABLE.
20	AT THE LAST MEETING WE, THEREFORE, ASKED
21	YOU IF YOU WOULD BE WILLING TO CONSIDER A PROPOSAL
22	TO ADDRESS THESE ISSUES. AND YOU AGREED WITH THAT.
23	MARIE CSETE AND HER STAFF HAVE WORKED DILIGENTLY ON
24	REVIEWING EXISTING PREAPPLICATION REVIEW PROCEDURES
25	AT OTHER INSTITUTIONS AND ARE NOW PREPARED TO

1	PRESENT A PROPOSAL TO YOU.
2	DR. CSETE: SO THE REASON WHY WE'RE HERE
3	IS THAT THE PILOT PROJECT THAT YOU APPROVED THE LAST
4	TIME WAS FOR DISEASE TEAMS; BUT, IN FACT, WE'VE
5	SCURRIED IN PLACE TO GET, I HOPE, A BASIC SCIENCE
6	INITIATIVE GOING FIRST. WE'D LIKE THE FIRST OF
7	THESE PILOT PRESCREENING PROGRAMS TO START WITH THE
8	BASIC SCIENCE INITIATIVE.
9	THE MAJOR RATIONALE FOR THIS IS OUR
10	CONCERN IN THE OFFICE THAT AS WE GO AROUND AND TALK
11	TO VARIOUS INSTITUTIONS AND COMPANIES, THAT WE'RE
12	NOT SEEING THE FULL RANGE OF SCIENCE OUT THERE, THE
13	VARIETY THAT CALIFORNIA OFFERS. AND WE'RE HEARING
14	THIS PARTICULARLY FROM NEW PEOPLE IN THE FIELD AND
15	FROM YOUNG INVESTIGATORS. AND CERTAINLY MEMBERS OF
16	THE PUBLIC HAVE EXPRESSED CONCERN THAT BECAUSE OF
17	THESE LIMITS, WE'RE NOT SEEING THE WIDE VARIETY OF
18	THINGS THAT WE SHOULD BE CHOOSING FROM. SO THE MAIN
19	DRIVING FORCE BEHIND THIS IS THE SCIENCE.
20	AND, IN FACT, THE OTHER FORCE THAT CAME
21	INTO PLAY AS WE WERE DESIGNING OUR BASIC SCIENCE
22	CORE GRANT FOR THE FIRST TIME WAS RECOGNIZING THAT
23	OUR VERY IMPORTANT SYNERGISMS THAT WE'RE
24	ESTABLISHING NOW WITH OTHER COUNTRIES AND OTHER
25	FOUNDATIONS ARE CUT OFF AT THE KNEES, IN FACT, BY

1	THE INSTITUTIONAL LIMITS BECAUSE LONG-STANDING
2	COLLABORATIONS IN THE UNITED STATES ARE PEOPLE WHO
3	MAY NOT MAKE IT OUT OF THEIR OWN INSTITUTIONAL
4	GATEKEEPERS TO PUT IN A CIRM GRANT.
5	SO WE HAVE COME UP WITH A SOLUTION THAT I
6	THINK IS BASED ON A LOT OF OTHER AGENCY'S WORK. I
7	UNDERLINE THE MICHAEL J. FOX FOUNDATION BECAUSE IF,
8	IN FACT, YOU LOOK AT THEIR STAFF'S PREAPPLICATION
9	SCREENING PROCEDURE, THIS IS THE ONE THAT'S MOST
10	SIMILAR TO WHAT I'M PROPOSING HERE. AND THE
11	PREAPPLICATION REVIEW WILL BE DONE BY A COMBINATION
12	OF GRANTS WORKING GROUP SPECIALISTS AND SCIENCE
13	STAFF AT THE CIRM OFFICE.
14	NOW, ONE OF THE THINGS THAT WE HAVE TO
15	KEEP IN MIND IS THAT WE ARE INCREASING THE STRAIN
16	AND THE BURDEN ON THE GRANTS WORKING GROUP. AND SO
17	PART OF THE RATIONALE ALSO IS TO MAKE SURE THAT THE
18	TIME THEY SPEND IS SPENT REVIEWING THE BEST OF THE
19	SCIENCE. AND THAT'S THE REASON FOR PRESCREENING.
20	SO WE PROPOSE TO LIFT THE SUBMISSION LIMITS ON
21	CERTAIN REQUESTS FOR APPLICATIONS. THIS IS NOT FOR
22	EVERY ONE, BUT ONLY WHEN IT'S SCIENTIFICALLY
23	APPROPRIATE. AND WE WILL ALSO DO THIS PRESCREENING
24	BASED NOT ON THE FULL APPLICATION, BUT ON SOME
25	APPROPRIATE LENGTH SMALLER APPLICATION SO THAT MANY

1	OF OUR APPLICANTS DON'T HAVE TO GO THROUGH THE
2	PROCESS OF PREPARING A GIGANTIC APPLICATION THAT IS
3	NOT AT THIS TIME GOING TO BE COMPETITIVE.
4	SO I THINK THAT WE ARE IDEALLY SUITED,
5	ESPECIALLY NOW AS WE'RE SEEING THE PROGRESS COME
6	ACROSS OUR DESKS, TO HAVE THE 30,000 DEGREE
7	SCIENTIFIC AND PROGRAMMATIC PICTURE THAT ALLOWS
8	PRESCREENING TO BE A TIMELY PROGRAM AT THIS TIME.
9	SO ONE OF THE CONSTRAINTS, OF COURSE, IS
10	THAT WE DON'T WANT TO SLOW OUR PROCESS DOWN. AND SO
11	WHAT WE'RE PROPOSING IS THAT WE RECEIVE
12	APPLICATIONS, AND WE WILL VERY HARD TRY IN A WEEK TO
13	TURN THEM AROUND AND ASSIGN THEM TO THE SPECIALISTS.
14	AND, OF COURSE, WE WILL GO THROUGH THE USUAL
15	CONFLICT OF INTEREST, WHICH TAKES AN ENORMOUS AMOUNT
16	OF TIME, AND WE WILL ALSO ASSIGN THE APPLICATIONS
17	BASED ON EXPERTISE.
18	AND THEN WE WILL GIVE OUR SPECIALISTS
19	THREE WEEKS TO REVIEW THESE SMALL PREAPPLICATIONS.
20	THEY WILL IDENTIFY THE TOP APPLICATIONS FOR US. AND
21	THEN THOSE TOP APPLICATIONS, AND I'M TALKING ABOUT A
22	RANGE THAT'S APPROXIMATELY TWICE THE NUMBER THAT THE
23	GRANTS WORKING GROUP COULD REASONABLY HANDLE IN A
24	NORMAL REVIEW SESSION, THAT NUMBER OF APPLICATIONS
25	COMES BACK TO US, AND WE WILL HAVE THREE INDEPENDENT
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1	SCIENCE OFFICER REVIEWS WITH INTERNAL DISCUSSION, OF
2	COURSE, IN THE ENTIRE OFFICE TO GET THAT NUMBER DOWN
3	TO A NUMBER THAT IS TRACTABLE FOR THE GRANTS WORKING
4	GROUP.
5	SO THE MOST PROMISING APPLICATIONS WILL BE
6	FORWARDED ON TO THE GRANTS WORKING GROUP FOR THE
7	NORMAL PROCESS, AND THAT'S UNCHANGED, OR WE WILL
8	DEFER THE APPLICATIONS. SO WHAT'S IMPORTANT TO
9	RECOGNIZE IS THAT THESE PREAPPLICATION SCREENING
10	PROCEDURES ARE DESIGNED TO BE PART OF OUR CORE GRANT
11	APPLICATION MECHANISMS WHERE WE WILL HAVE REPEATING
12	BASIC SCIENCE, EARLY TRANSLATION, AND DISEASE TEAM
13	GRANTS, SO THAT THE APPLICATIONS THAT ARE DEFERRED,
14	WE WILL CERTAINLY INVITE THE APPLICANTS TO WORK WITH
15	THE SCIENCE OFFICE SO THAT THEY CAN COME BACK IN
16	FUTURE WITH A MORE COMPETITIVE APPLICATION.
17	QUESTI ONS?
18	CHAIRMAN KLEIN: OKAY. SO THAT IS THE
19	BASIC OUTLINE. DR. PIZZO.
20	DR. PIZZO: I'M VERY PLEASED BY THIS
21	RECOMMENDATION. I THINK YOU WILL RECALL IN PRIOR
22	TIMES WHEN RICARDO AZZIZ AND WE LOOKED AT THE ISSUE.
23	WE WERE VERY CONCERNED ABOUT LIMITATIONS. I THINK
24	IT HAS A VERY NEGATIVE IMPACT ON INSTITUTIONS,
25	PRECLUDES SOMETIMES THE VERY BEST SCIENCE FROM
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1	COMING FORWARD. AND I THINK YOUR PROPOSAL FOR
2	BROADENING THE INFLOW AND THEN REGULATING THE
3	PROCESS SO IT DOESN'T OVERWHELM THE SCIENTIFIC
4	REVIEW GROUP, EVEN THOUGH IT IS A BIGGER IMPOSITION
5	ON THE CIRM STAFF, WHICH WE'RE VERY SENSITIVE TO AND
6	APPRECIATIVE OF, IS, I THINK, A HUGE STEP IN THE
7	RIGHT DIRECTION.
8	SO I'M VERY PLEASED WITH THIS. THE ONLY
9	CAVEAT I WOULD OFFER IS THAT IT MAY BE THAT FOR MORE
10	COMPLEX GRANTS, SUCH AS WHEN WE GET TO BIG GRANTS
11	LIKE THE DISEASE PLANNING GRANTS, DISEASE GRANTS,
12	THAT IT MAY REQUIRE MORE NUMBERS OF INDIVIDUALS TO
13	DO THE REVIEW JUST TO BE SURE THAT WE'VE GOT THE
14	BEST CONCEPTUAL OVERSIGHT OVER THEM. BUT ASIDE FROM
15	THAT CAVEAT, I THINK THIS IS BIG STEP FORWARD.
16	THANK YOU.
17	DR. CSETE: I KEPT DETAILS OUT IN
18	PARTICULAR BECAUSE THE DETAILS WILL DEPEND ON THE
19	SCALE OF THE PARTICULAR RFA. AND THE OTHER ISSUE
20	THAT IS REALLY IMPORTANT FOR ME TO SAY IS THAT THIS
21	IS A PILOT PROJECT, AND OUR MAIN GOAL IS TO SEE IF
22	WE'RE GETTING GREATER DIVERSITY OF APPLICATIONS AT
23	THE COST, OF COURSE, OF MORE IN-HOUSE WORK FOR US.
24	AND WE WILL LOOK AT THAT AS A FEEDBACK PROCESS AND
25	MAKE AN EVALUATION OF HOW IT WORKS.
	2/0

1	CHAIRMAN KLEIN: THANK YOU. DR. BRYANT.
2	DR. BRYANT: I HAVE CONCERNS ABOUT THIS
3	PROCESS BECAUSE IT IS TAKING STEPS BEFORE THE FULL
4	REVIEW TO ELIMINATE PROPOSALS IN A NON-PEER REVIEWED
5	WAY BECAUSE THERE ISN'T AN OPPORTUNITY FOR THE
6	YOU KNOW, WORKING GROUP SPECIALISTS HAVE THEIR
7	INPUT, BUT THEN THE STAFF ARE GOING TO RANK FOR
8	INTERNAL DISCUSSION.
9	SO I'M ACTUALLY CONCERNED ABOUT THAT
10	BECAUSE I THINK THAT ONE OF THE THINGS THAT WE'VE
11	HUNG OUR HAT ON HERE IS PEER REVIEW. I UNDERSTAND
12	THE PROBLEM OF THE LIMIT PER INSTITUTION, BUT I
13	THINK THAT SOME COMBINATION OF INCREASING THAT LIMIT
14	AND HAVING A PREREVIEW MAYBE BY THE FULL WORKING
15	GROUP OR BY MORE MAIL-IN CANDIDATES WOULD MORE
16	MAIL-IN MEMBERS OF THE GRANTS WORKING GROUP WOULD BE
17	MORE SATISFACTORY TO ME BECAUSE I THINK RELYING ON
18	TWO REVIEWS TO ELIMINATE SOMEBODY FROM A
19	COMPETITION, I THINK IT WILL OPEN US TO PROBLEMS IN
20	THE FUTURE.
21	DR. CSETE: LET ME RESPOND TO THIS, SINCE
22	SUE AND I HAD A CONVERSATION ABOUT THIS ALREADY.
23	FIRST OF ALL, I DO CONSIDER WHAT WE'RE DOING PEER
24	REVIEW. I THINK WE HAVE AN INCREDIBLY TALENTED
25	SCIENCE OFFICE HAND IN HAND, OF COURSE, WITH THE
	260

1	SPECIALISTS THAT WILL BE WORKING WITH US IN THIS
2	PROCESS.
3	THE PROBLEM IS IF WE TAKE THE CURRENT
4	LIMITATIONS, FOR EXAMPLE, THE ONES THAT WERE IMPOSED
5	ON EARLY TRANSLATION, AND JUST DOUBLE THEM, AS YOU
6	SUGGESTED MIGHT BE A TRACTABLE NUMBER, RIGHT THEN
7	AND THERE WE HAVE THE NEED FOR FOUR GRANTS WORKING
8	GROUPS SESSIONS. IT QUADRUPLES THE NUMBERS THAT WE
9	WOULD HAVE COMING INTO THE GRANTS WORKING GROUP.
10	AND I JUST THINK THAT WE HAVE THIS GRANTS WORKING
11	GROUP MANPOWER TO DO THAT.
12	SO IF WE DOUBLED THE APPLICATIONS, THERE
13	WOULD STILL IT'S NOT TRACTABLE. AND THAT'S PART
14	OF THE THAT WAS PART OF THE CALCULATION THAT WENT
15	INTO THIS.
16	CHAIRMAN KLEIN: SO DR. PULIAFITO, DID YOU
17	HAVE A COMMENT?
18	DR. PULIAFITO: I SHARE DR. BRYANT'S
19	CONCERN ABOUT THIS. I GUESS I DON'T KNOW ENOUGH
20	ABOUT WHO THE SCIENTIFIC OFFICERS ARE, AND I
21	WOULDN'T SAY THAT IT IS PEER REVIEW BECAUSE PEER
22	REVIEW IS OTHER GRANTEES REVIEWING THEIR WORK, NOT
23	STAFF PEOPLE. AND I THINK THAT WE'RE GETTING BACK
24	TO AN NIH MODEL WHERE A LOT OF GRANTS ARE TRIAGED
25	AND NEVER SEEN, SO THE INVESTIGATORS ARE FRUSTRATED
	270

1	BY THAT.
2	THE OTHER THING IS FROM THE ICOC'S POINT
3	OF VIEW, WE'RE NOT GOING TO SEE WHAT WAS REJECTED.
4	AND I WOULD BE WILLING TO CONSIDER THIS AS A TRIAL
5	FOR A SMALL NUMBER OF GRANTS AND THEN BUT THE
6	ICOC WOULD THEN HAVE TO SEE WHAT CAME IN, WHAT WAS
7	SCREENED OUT.
8	DR. CSETE: RIGHT. SO I DON'T LOOK AT
9	THIS AS A REJECTION PROCESS. WITH THE CORE GRANTS,
10	I REALLY DO LOOK AT IT AS A DEFERRAL PROCESS AND
11	HOPE THAT THE APPLICANTS WHO REALLY FEEL STRONGLY
12	ABOUT THEIR SCIENCE OR THINGS THAT WE SEE
13	POTENTIALLY SO THAT WE CAN CONTACT INVESTIGATORS ARE
14	THINGS THAT CAN BE WORKED ON TO BE BROUGHT INTO THE
15	NEXT ROUND OF THE SAME CORE GRANT APPLICATIONS.
16	CHAIRMAN KLEIN: OKAY. I'M GOING TO GO TO
17	DR. PRICE. WHAT I'M GOING TO DO, IF WE CAN GET A
18	FEW MORE COMMENTS ON THE TABLE, THEN I'M GOING TO
19	ADJOURN FOR LUNCH.
20	MS. LANSING: THIS IS A REALLY IMPORTANT
21	DISCUSSION THAT I FEEL EVERYBODY HAS A LOT OF STRONG
22	FEELINGS ABOUT, SO IT'S GOING TO TAKE EASILY AN
23	HOUR.
24	CHAIRMAN KLEIN: AND WITH BLOOD SUGARS
25	HIGHER, IT MAY BE BETTER. DR. PRICE, AND THEN I'M
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1	GOING TO COME AROUND, DR. FONTANA, DR. PIZZO, IF WE
2	COULD TAKE YOUR COMMENT IN THE SECOND HALF.
3	DR. PRICE: DO YOU WANT TO ALL WAIT TILL
4	AFTER LUNCH?
5	CHAIRMAN KLEIN: IT SOUNDS LIKE WE HAVE A
6	GOOD CONSENSUS HERE. HUNGER IS WHAT DRIVES US
7	FORWARD. SO WE WILL BREAK THIS DISCUSSION AT THIS
8	TIME. AND WE WILL TAKE THE DIRECTION OF WHERE THE
9	LUNCH IS FROM MELISSA.
10	MS. KING: SO THE
11	MR. HARRISON: I ALSO JUST WANTED TO
12	MENTION FOR THE PUBLIC THAT OVER THE LUNCH HOUR, WE
13	WILL BE CONVENING IN CLOSED SESSION FOR A DISCUSSION
14	OF PERSONNEL PURSUANT TO GOVERNMENT CODE SECTION
15	11126 AND HEALTH AND SAFETY CODE SECTION
16	125290. 30(D)(3)(D).
17	MS. KING: TWO THINGS. THE LUNCHROOM IS
18	THE SAME ROOM WHERE YOU HAD BREAKFAST THIS MORNING,
19	SO JUST DOWN THE HALL TO THE RIGHT OUTSIDE THE
20	DOORS.
21	AND THE SECOND THING IS IF BOARD MEMBERS
22	COULD PLEASE TAKE THE THIN BINDER WITH YOU, THE ONE
23	YOU'VE BEEN REFERRING TO IN THIS SESSION. THANK
24	YOU.
25	(A RECESS WAS TAKEN.)
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	<u> </u>

1	MS. KING: ALL THE BOARD MEMBERS IN THE
2	ROOM IN YOUR SEATS. DR. PENHOET IS GOING TO CHAIR
3	THIS NEXT PORTION OF THE MEETING. WE'RE GOING TO
4	RECONVENE AND GO BACK TO AGENDA ITEM NO. 20. SO,
5	DR. CSETE, YOU MAY WANT TO RETURN TO THE PODIUM, IF
6	YOU WOULD, PLEASE. AND I BELIEVE THERE WERE A
7	NUMBER OF PUBLIC COMMENTS THAT WERE LINED UP. BUT
8	IF EVERYBODY COULD JUST LET DR. PENHOET KNOW IF
9	YOU'D LIKE TO MAKE A COMMENT. WE'LL JUST START THAT
10	KIST AGAIN SINCE THE ROOM IS A LITTLE DIFFERENT.
11	DR. PENHOET: I'M NOT SURE AT THIS POINT
12	THAT WE HAVE COMPLETED THE ROUND OF BOARD COMMENTS.
13	MARIE, YES.
14	DR. CSETE: I JUST WANTED TO CLARIFY IN
15	THE OF COURSE, WE HAD A BREAK HERE, SO SOME
15 16	THE OF COURSE, WE HAD A BREAK HERE, SO SOME MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN
16	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN
16 17	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE
16 17 18	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I
16 17 18 19	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I DIDN'T SAY, BECAUSE I WAS TRYING TO KEEP UP WITH
16 17 18 19 20	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I DIDN'T SAY, BECAUSE I WAS TRYING TO KEEP UP WITH JUST HAVE THE BARE BONES PROCESS FOR YOU AND NOT GO
16 17 18 19 20 21	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I DIDN'T SAY, BECAUSE I WAS TRYING TO KEEP UP WITH JUST HAVE THE BARE BONES PROCESS FOR YOU AND NOT GO INTO DETAIL
16 17 18 19 20 21	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I DIDN'T SAY, BECAUSE I WAS TRYING TO KEEP UP WITH JUST HAVE THE BARE BONES PROCESS FOR YOU AND NOT GO INTO DETAIL DR. PENHOET: JUST FOR CLARIFICATION, WHEN
16 17 18 19 20 21 22	MISUNDERSTANDINGS. SO FIRST OF ALL, I MISSPOKE IN THAT WE TALKED ABOUT PEER REVIEW, AND WE DO NOT HAVE PEER REVIEW. WE HAVE EXPERT REVIEW. AND WHAT I DIDN'T SAY, BECAUSE I WAS TRYING TO KEEP UP WITH JUST HAVE THE BARE BONES PROCESS FOR YOU AND NOT GO INTO DETAIL DR. PENHOET: JUST FOR CLARIFICATION, WHEN YOU SAY WE HAVE EXPERT REVIEW, IT'S FOR ALL OF OUR

1	DR. CSETE: AS PART OF WORKING TOWARDS A
2	SYSTEM THAT WAS USABLE FOR THE PRESCREENING PROCESS,
3	WE WENT BACK TO ALL OF OUR GRANTS WORKING GROUP
4	MEMBERS, ALL OF THE EXPERTS WE HAVE USED OVER TIME,
5	PREPARED A HUGE LIST, AND UPDATED THE BULLETS WITH
6	THEIR EXPERTISE SO THAT THE GRANTS WILL BE ASSIGNED
7	TO THE APPROPRIATE EXPERTS IN THE PREAPPLICATION
8	SCREENI NG PROCESS.
9	AND THE SLIDE ALSO SEEMED TO CONFUSE SOME
10	PEOPLE TO SUGGEST THAT ONLY TWO EXPERTS WOULD BE
11	USED. WE'LL HAVE A PANEL OF 20 TO 40 BEING ASSIGNED
12	THE GRANTS IN THEIR AREA DEPENDING ON HOW MANY
13	APPLICATIONS WE RECEIVE.
14	THE OTHER MISUNDERSTANDING I WANTED TO
15	ADDRESS WAS THIS IDEA OF THE BOARD NOT SEEING THE
16	GRANTS THAT ARE DEFERRED. WELL, IN FACT, THAT
17	HAPPENS NOW. THE BOARD DOES NOT SEE THE GRANTS THAT
18	DO NOT MAKE IT THROUGH THE LOCAL GATEKEEPER'S
19	PROCESS AT THE INSTITUTION.
20	DR. PENHOET: AND THEN BECAUSE THE
21	PRIMARY ONE OF THE PRIMARY DRIVERS, IF NOT THE
22	PRIMARY DRIVER OF THIS CURRENT PROPOSAL THAT YOU'VE
23	MADE, MARIE, IS THE WORKLOAD OF THE GRANTS WORKING
24	GROUP MEMBERS. SO CAN YOU GIVE US A LITTLE FURTHER
25	BACKGROUND ON WHERE YOU THINK THE LIMITS ARE IN

1	TERMS OF WHAT WE CAN REASONABLY ASK THEM TO DO
2	BEFORE WE START LOSING PEOPLE, ETC.? WHAT'S YOUR
3	PERSPECTIVE ON THE ISSUE OF THE WORKLOAD THAT WE'RE
4	NOW ASKING OUR GRANTS WORKING GROUP MEMBERS TO
5	UNDERTAKE FOR US?
6	DR. CSETE: WELL, MOST OF THE PEOPLE THAT
7	WE ASK TO COME ARE VERY BUSY AS REVIEWERS FOR
8	MULTIPLE AGENCIES, MULTIPLE JOURNALS, ETC. AND IF
9	WE ASK THEM TO DO THEIR JOBS CORRECTLY FOR JUST ONE
10	SESSION, WE'RE REALLY TAKING AWAY A GOOD WEEK OF
11	THEIR TIME EACH TIME WE DO. SO FOR THAT REASON, WE
12	ASK OUR PERMANENT MEMBERS OF THE GRANTS WORKING
13	GROUP TO COME AT LEAST ONCE A YEAR. SOME OF THEM
14	COME MORE, FORTUNATELY FOR US. BUT THAT'S A HUGE
15	BURDEN TO PLACE ON PEOPLE. AND THAT'S IF THE NUMBER
16	OF APPLICATIONS IS REASONABLE FOR EACH SESSION.
17	WHEN WE HAVE TO START ADDING DAYS TO THE SESSIONS,
18	IT BECOMES REALLY DIFFICULT.
19	DR. PENHOET: I BELIEVE WHEN WE LEFT OFF,
20	DR. PRICE WAS BEGINNING TO MAKE A COMMENT OR ASK A
21	QUESTION. SO WE'LL RETURN TO YOU.
22	DR. PRICE: I MISSED THE PART OF THIS
23	DISCUSSION WHEN I CAME IN A BIT LATE, SO YOU MAY
24	HAVE TALKED ABOUT IT ALREADY. LET ME VOICE
25	SOMETHING I ACTUALLY TALKED TO STAFF A LITTLE BIT

1	AFTER OUR MEETING. MY MAIN CONCERN ABOUT THIS
2	PROPOSAL IS THAT I THINK IT PLACES OUR STAFF AND
3	THROUGH THAT CIRM IN A SOMEWHAT VULNERABLE POSITION
4	BECAUSE THEY'RE INVOLVED IN MAKING DECISIONS ABOUT
5	ELIMINATING APPLICATIONS FROM THE PROCESS. THEY ARE
6	NO LONGER INSULATED FROM THE QUALITY DECISIONS AS
7	THEY HAVE BEEN IN THE PAST.
8	PEOPLE HAVE FROM TIME TO TIME COMPLAINED
9	THAT OUR STAFF IS BIASING AND CIRM IS BIASING THE
10	OUTCOMES OF THESE COMPETITIONS, AND OUR RESPONSE
11	APPROPRIATELY HAS BEEN, NO, THE STAFF PROVIDES
12	ESSENTIALLY, I'LL USE THE WORD, DATA, BUT IT'S THE
13	PEER REVIEWERS WHO ARE INDEPENDENT AND OUTSIDE OF
14	CIRM WHO ARE MAKING THOSE DECISIONS. AND I THINK
15	THAT PROVIDES A KIND OF INSULATION OF THE
16	ORGANIZATION FROM THE CHARGES OF FAVORITISM.
17	AND I'M AFRAID I WORRY THAT INTRODUCING
18	THE STAFF INTO THESE DECISIONS OF WHO'S IN AND WHO'S
19	OUT MAY BREAK DOWN THAT KIND OF FIREWALL THAT WE'VE,
20	I THINK, CREATED AND I THINK HAS BEEN USEFUL.
21	DR. TROUNSON: MR. ACTING CHAIR, I WANT TO
22	MAKE A COMMENT ON THAT. THERE IS CRITICISM OUT
23	THERE THAT IS RELAYED TO US THAT SOME PEOPLE CAN'T
24	GET THROUGH THE PRESENT PROCEDURES IN INSTITUTIONS
25	AND COMPANIES TO GET WHAT THEY BELIEVE ARE VERY GOOD

1	GRANTS TO US.
2	I THINK IN THE SENSE THAT WE'RE GOING FOR
3	THESE NOW AWARDS, MAJOR AWARDS THAT ARE GOING TO
4	ACCELERATE US TOWARDS THE CLINIC, WE'RE FINDING A
5	FEW VERY, VERY GOOD GRANTS. AND I THINK WE NEED TO
6	SEE THE VERY BEST THAT IS IN CALIFORNIA. AND IF IT
7	HAPPENED TO BE THAT THEY WERE FROM THREE
8	INSTITUTIONS THAT LED TO SOME PRIMARY CURES, I THINK
9	WE'VE GOT TO GET OVER THAT. I THINK IN A SENSE THAT
10	AT THIS POINT WE'VE REALLY GOT TO GET THE BEST
11	APPLICATIONS ON THE DESK.
12	SO THE SENSE THAT WE WOULD LOOK AT A
13	PRELIMINARY TRIAGE WITH SPECIALISTS, WE'RE ASKING TO
14	DO IT WITH A GROUP OF SPECIALISTS. IT'S NOT JUST
15	US. WE'RE GOING TO HELP THOSE SPECIALISTS. WE'LL
16	GET THOSE SPECIALISTS TO GIVE US ADVICE ON A YES, NO
17	IN ORDER TO CUT IT DOWN SO THAT THE PRIMARY REVIEW
18	IS A SUFFICIENTLY SMALLER ENOUGH NUMBER FOR THE
19	PRIMARY REVIEWERS TO REALLY GET THEIR TEETH INTO IT.
20	AND THEY MAY IN THIS PROCEDURE BE ABLE TO GET THE
21	VERY BEST THAT'S AVAILABLE IN CALIFORNIA.
22	DR. PRICE: I DO APPRECIATE THAT. I GUESS
23	MY QUESTION IS WHY THE SPECIALISTS ARE NOT DOING THE
24	ENTIRE PROCESS. WHY DO YOU NEED A SECOND CUT AT
25	THAT APPLE?

1	DR. CSETE: I THINK THAT WE ARE IN THE
2	BEST POSITION TO KNOW THE TOTALITY OF WHAT IT IS
3	THAT WE NEED TO ACCOMPLISH OUR MISSION, AND AS PART
4	OF THIS MIX, ADVISING WITH THE SPECIALISTS. AND I
5	AGREE WITH YOU. WE DISCUSSED THIS. THIS IS A
6	POTENTIAL DOWNSIDE OF THE PROCESS. AND EVERY TIME
7	WE MAKE A CHANGE IN THE WAY GRANTS ARE REVIEWED,
8	THERE'S GOING TO BE UPS AND DOWNS TO IT, AND WE HAVE
9	TO DECIDE BY THE WAY, THE STAFF WILL ALSO HAVE
10	THE SAME CONFLICT OF INTEREST PROCESS AS ANY OTHER
11	REVIEWER. WE'LL HAVE TO DECIDE WHETHER OUR MAIN
12	GOALS, WHICH I'VE TALKED ABOUT ENOUGH ALREADY, ARE
13	MET BY THIS CHANGE AND BALANCE OUT THESE POTENTIAL
14	DOWNSI DES.
15	DR. PENHOET: I JUST WOULD POINT OUT AS A
16	MATTER OF FACT THAT THE CURRENT SITUATION, WHEN WE
17	LIMIT THE NUMBER OF GRANTS PER INSTITUTION, THERE IS
18	A PREAPPLICATION REVIEW. IT OCCURS IN THE APPLYING
19	INSTITUTIONS, NOT AT CIRM EITHER WAY. JON SHESTACK
20	WAS NEXT.
21	MR. SHESTACK: I JUST WANT TO THIS IS
22	CONSIDERED AS A SORT OF TRIAL TO SEE IF IT WORKS.
23	IT SEEMS EMINENTLY REASONABLE TO ME, AND THE
24	APPLICANTS AND THE COMMUNITY WILL REPORT BACK. I
25	WILL JUST GIVE AS AN EXAMPLE, AND IT'S PERHAPS

1	HEARSAY, BUT AN INVESTIGATOR I RAN INTO SAID, OH, I
2	HAD AN AUTISM GRANT, A STEM CELL AUTISM GRANT, BUT
3	THERE WAS A LIMIT AT THE INSTITUTION AS TO HOW MANY
4	APPLICATIONS COULD GO OUT. THERE WERE BIGGER,
5	OLDER, OTHER PLAYERS, AND I DIDN'T ACTUALLY GET TO
6	APPLY. NOT A COMPLAINT THAT I DIDN'T GET THE GRANT,
7	BUT THAT I WASN'T GIVEN THE OPPORTUNITY TO APPLY.
8	SO IF THAT TAKES AWAY THAT ONUS AND SERVES
9	TO POTENTIALLY BROADEN OUR PORTFOLIO, AND THE SECOND
10	STAGE OF REVIEW SERVES AS SOME PORTFOLIO MANAGEMENT,
11	I WOULD CERTAINLY SAY THIS IS AN EXPERIMENT WE CAN
12	TRY FOR ONE AWARD AND SEE IF IT'S HELPFUL. IT
13	CERTAINLY SEEMS WORTH IT, AND YOU MIGHT GET BETTER,
14	YOU MIGHT GET NOT ONLY QUALITY, BUT A BROADER
15	PORTFOLI O.
16	DR. FRIEDMAN: JUST A COUPLE OF POINTS,
17	PLEASE. I ALSO APPRECIATE THE QUALITY AND THE
18	COMMITMENT AND SERVICE OF THE STAFF. SO THIS IS NOT
19	A DISCUSSION ABOUT THE STAFF REVIEW PER SE. I HAVE
20	ONLY THE HIGHEST COMPLIMENTS.
21	I ALSO RECOGNIZE THAT YOU'RE FACING A
22	POTENTIALLY CRUSHING LOAD OF APPLICATIONS, AND THAT
23	THE PROBLEM IS THAT TOO MANY OF THESE APPLICATIONS
24	ARE REALLY GOOD. SO IT MAKES YOUR JOB VERY, VERY
25	DIFFICULT. AND THE CONCERN THAT YOU RAISE, THAT

PEOPLE AREN'T GOING TO HAVE THEIR GRANTS REVIEWED,
IS, IN FACT, TRUE IN THE OLD SYSTEM AND IT WILL BE
TRUE IN THE NEW SYSTEM. IT JUST IS A QUESTION OF
WHERE THE CUT IS MADE TO LIMIT. EVERYONE SAYS, YES,
WE MUST LIMIT THE NUMBER OF GRANTS REVIEWED. AND
THE QUESTION REALLY IS HOW BEST TO DO THAT.
I CAN I HAVE SERIOUS CONCERNS ABOUT THE
PROPOSAL, BUT AS AN EXPERIMENT, I THINK IT'S
CERTAINLY CONCEIVABLE TO DO IT. BUT I NEED TO
UNDERSTAND THE TERMS OF THE EXPERIMENT AND WHAT'S
GOING TO BE CONSIDERED A SUCCESS. I AM VERY
TROUBLED WITH THE IDEA THAT YOU WILL GET THE BEST
SCIENCE. I DON'T KNOW WHAT THE BEST SCIENCE IS.
AND I PUT IT TO YOU THAT AS YOU'RE TEN TIMES SMARTER
THAN ME, THAT YOU DON'T KNOW WHAT THE BEST SCIENCE
IS. HOW DO YOU DEFINE BEST? AND SO WE NEED TO BE
MUCH MORE QUANTITATIVE ABOUT WHAT IT IS WE'RE GOING
TO CALL A SUCCESSFUL EXPERIMENT AND WHAT WON'T BE.
IF WE DO THIS, IF WE HAVE A PRESCREEN, I
THINK IT'S INCUMBENT UPON US AS A BOARD AND YOU AS
THE CREATIVE STAFF TO DECIDE WHAT ARE GOING TO BE
THE HIGHEST RANKING CRITERIA FOR A PARTICULAR RFA.
IS IT GOING TO BE INNOVATION? IS IT GOING TO BE
FEASIBILITY? IS IT GOING TO BE BALANCING THE
PORTFOLIO THAT YOU SAY WE WANT TO HAVE THREE
280

1	NEUROLOGIC ONES AND THREE ENDOCRINOLOGIC, AND THREE
2	THIS? THAT'S FINE, BUT WE HAVEN'T DONE THAT IN THE
3	PAST. AND IF YOU'RE PREPARED TO DO SOMETHING AS
4	STRINGENT AND CAREFUL AS THAT, THEN I'M PREPARED TO
5	HAVE THE STAFF TELL US WITHIN THOSE PARAMETERS
6	HERE'S WHAT WE CAN PUT TOGETHER. OTHERWISE I REALLY
7	THINK THIS BECOMES A BEAUTY CONTEST.
8	IS IT A BEAUTY CONTEST AT THE INSTITUTION?
9	WELL, I'M SYMPATHETIC WITH WHAT PHIL SAYS, BUT I
10	KNOW STANFORD REVIEWS THEIR INSTITUTIONAL GRANTS
11	REALLY, REALLY CAREFULLY, AND OTHER COLLEAGUES
12	AROUND HERE AS WELL. SO IT'S A HARD PROBLEM, AND
13	I'M NOT GIVING YOU A GOOD SOLUTION. I'M JUST
14	RAISING THE CONCERNS.
15	DR. CSETE: DR. FRIEDMAN, AS PART OF THIS
16	PROCESS, WE'VE BEEN DRAFTING THE REVIEW CRITERIA FOR
17	THE BASIC SCIENCE GRANT AND FOR THE DISEASE TEAM
18	GRANT. THAT'S NOT A NORMAL PART OF THE CONCEPT
19	PROPOSAL, BUT WE HAVE DEVELOPED VERY CAREFULLY
20	CRAFTED REVIEW CRITERIA FOR THESE GRANTS. IT'S
21	CERTAINLY PART OF THE PROCESS.
22	DR. FRIEDMAN: IT WOULD NOT BE THE REVIEW
23	CRITERIA. IT WOULD BE THE PRIORITIES THAT YOU'RE
24	WE HAVEN'T SEEN THOSE. I'M GLAD YOU'RE DOING IT.
25	I'M JUST SAYING THAT FOR ME THAT WOULD BE AN

1	ABSOLUTE ESSENTIAL ELEMENT, AND THEN TO SEE WHETHER
2	WE'RE ABLE TO FIT THAT OR NOT.
3	DR. CSETE: THOSE ARE ALWAYS, BY THE WAY,
4	PART OF THE WAY THE FINAL RFA LOOKS.
5	DR. FRIEDMAN: I'M TALKING ABOUT A WHOLE
6	ORDER OF MAGNITUDE MORE DETAIL THAN WHAT THE USUAL
7	RFA LOOKS LIKE. THAT'S JUST ME.
8	DR. TROUNSON: WELL, I THINK YOU'RE MAKING
9	SOME GOOD POINTS. I THINK THE YOU NEED TO
10	RECOGNIZE THAT EVEN IN SOME OF THESE TOP-LINE
11	UNIVERSITIES, WE'RE HAVING COMPLAINTS FROM STAFF
12	WITHIN THEM THAT THEY'RE NOT GETTING ACCESS. AND WE
13	DO GET IT'S OBVIOUS THAT WE'RE GETTING THE SAME
14	PEOPLE COMING QUITE OFTEN. I HAVE NO IDEA BECAUSE
15	I'M NOT PART OF THAT PREREVIEW.
16	BUT WHAT WE WANT IN THIS CASE, THIS IS A
17	ABOUT GETTING DISCOVERIES THROUGH TO THE CLINIC. WE
18	WANT THE BEST ONES TO COME FORWARD NOW. AND IF IT
19	HAPPENS TO BE THREE OUT OF ONE INSTITUTION, LET IT
20	BE. THESE ARE A SMALL NUMBER OF GRANTS THAT ARE
21	GOING TO MAKE A DIFFERENCE.
22	DR. FRIEDMAN: I ACCEPT THAT EXCEPT I
23	DON'T KNOW WHAT THE BEST IS, AND I DON'T KNOW WHAT'S
24	GOING TO YOU NEED TO DEFINE THAT MORE CAREFULLY.
25	THAT'S ALL.
	282

1	DR. PENHOET: GOING IN THIS DIRECTION, OS
2	STEWARD IS NEXT.
3	DR. STEWARD: SO I WANT TO ECHO TWO
4	ASPECTS OF THIS. ONE IS THE SENSE OF THE BOARD. I
5	KNOW OF GREAT CONFIDENCE IN THE SCIENTIFIC STAFF.
6	YOU GUYS WORK TERRIBLE HOURS AND VERY HARD. BUT I
7	ALSO WANT TO ECHO THE CONCERNS THAT ARE EXPRESSED
8	ABOUT THIS AND REALLY AT SEVERAL LEVELS.
9	I, FIRST OF ALL, THINK IT'S VERY HARD TO
10	AT THE END OF THE DAY AVOID THE CONCLUSION THAT IT
11	IS THE SCIENTIFIC STAFF THAT DO THE TRIAGE, IF YOU
12	LOOK AT THAT CHART THAT WAS SHOWN. AS SUCH, THAT
13	MEANS THAT YOU GUYS BECOME THE ENEMY. THAT, I
14	THINK, IS THE LAST THING THAT WE NEED. NIH DOES IT
15	IN AN INTERESTING WAY, AS WE ALL KNOW. THEY HAVE A
16	REVIEW BRANCH THAT WE ALL HATE, AND THEN THE PROGRAM
17	BRANCH THAT HELPS THE INVESTIGATOR. AND I THINK
18	THAT STRUCTURE MAKES IT A PLAUSIBLE WAY TO SORT OF
19	WORK THROUGH SOME OF THESE ISSUES THAT INVESTIGATORS
20	FACE WHEN THEY'RE DEALING WITH THE FACT THAT THEIR
21	GRANTS ARE NOT FUNDED.
22	SO I DON'T THINK THAT DOING IT THE WAY
23	THAT YOU PROPOSE IS GOING TO PRESERVE THAT KIND OF
24	AN ORGANIZATIONAL STRUCTURE AND, IF YOU WANT, PUT A
25	BARRICADE IN FRONT OF YOU GUYS. THERE IS JUST NO
	283

1	WAY THAT A SCIENTIST WHOSE GRANT IS, QUOTE, TRIAGED
2	DOESN'T REACT EMOTIONALLY AND SAY, YOU KNOW, IT
3	DIDN'T GET A FAIR REVIEW BY MY SCIENTIFIC PEERS.
4	WHETHER YOU WANT TO CALL IT A PEER REVIEW OR EXPERT
5	REVIEW DOESN'T MATTER. THE POINT IS IT DIDN'T GET
6	THE FULL CONSIDERATION.
7	HAVING SAID THAT, I RECOGNIZE THAT THERE'S
8	A TREMENDOUS PROBLEM HERE. I JUST DON'T THINK THAT
9	THIS IS THE RIGHT SOLUTION TO IT.
10	DR. BRYANT: THE PROBLEM IS TOO MANY
11	GRANTS. AND BECAUSE AND MAYBE ONE THING TO LOOK
12	AT IS A VARIABLE INSTITUTIONAL ALLOTMENT DEPENDING
13	ON THE WORKFORCE AT THAT INSTITUTION RATHER THAN
14	BECAUSE RIGHT NOW SMALL INSTITUTIONS AND BIG
15	INSTITUTIONS HAVE THE SAME LIMIT. SO IT MEANS SOME
16	OF THE LARGER INSTITUTIONS ARE UNFAIRLY RESTRICTED
17	AT THE APPLICATION LEVEL. WHEREAS, IF WE COULD
18	FIGURE OUT SOME VARIABLE WAY TO HAVE LIMITS THAT WAS
19	BASED ON SOME NUMBER THAT WOULD HAVE TO BE AGREED
20	UPON, BUT IT WOULD STILL ALLOW FOR PEER REVIEW
21	BECAUSE IT WOULD
22	DR. TROUNSON: THERE'S A DIFFERENT VIEW TO
23	WHAT OS STEWARD WAS TALKING ABOUT BECAUSE YOU'RE
24	STILL NOT DOING PEER REVIEW. YOU DON'T HAVE PEER
25	REVIEW IN THE CURRENT SYSTEM. YOU HAVE
	284

1	INSTITUTIONAL REVIEW.
2	DR. BRYANT: WE DO PEER REVIEW.
3	DR. STEWARD: THE DIFFERENCE IS, ALAN,
4	THAT AS AN INVESTIGATOR WHOSE GRANT IS NOT MOVED
5	FORWARD, THEY'RE MAD AT THE PEOPLE IN THEIR OWN
6	INSTITUTION, NOT AT YOU.
7	DR. TROUNSON: BUT THEY ALSO COMPLAIN TO
8	US.
9	DR. PIZZO: I THINK THERE IS UNFORTUNATELY
10	NO PERFECT SOLUTION TO THIS, AND WE'RE ALL GRAPPLING
11	WITH HOW TO ACHIEVE THE GOAL OF HAVING THE VERY BEST
12	SCIENCE COME FORWARD IN THE MOST UNFETTERED MANNER
13	POSSIBLE. THE IDEAL WHICH WE'VE PROPOSED PREVIOUSLY
14	WOULD BE TO NOT HAVE THE LIMITATION INTERNALLY ON
15	OUR SCIENTIFIC REVIEW GROUPS. WE'VE TALKED ABOUT
16	THAT, AND WE'VE BEEN TOLD THAT THEY JUST CAN'T
17	ACCOMMODATE ANY MORE THAN IS ALREADY COMING. SO
18	THAT'S WHERE THE LIMITS GOT SET, AND THE CHALLENGE
19	AND THE DEBATE THAT WE'VE HAD, AND I'VE HAD THIS
20	DEBATE WITH ALAN IN SOME DETAIL, IS THAT IT COMES
21	BACK TO OUR INSTITUTIONS TO SET SOME LIMITS.
22	AND I THINK THAT'S A VERY DISPIRITING VIEW
23	AS WELL, AND IT IMPACTS ON THE QUALITY OF THE
24	PROPOSALS. THERE ARE WHIMS THAT GO ON IN THESE
25	REVIEW GROUPS. AND I DON'T KNOW THAT IT BRINGS

285

1	FORWARD ALWAYS WE'D LIKE TO THINK IT BRINGS
2	FORWARD THE BEST, BUT, AGAIN, PEOPLE DON'T ALWAYS
3	FEEL THAT.
4	I THINK THAT THE OTHER PLACE WHERE I WORRY
5	THE MOST OR A LOT ABOUT IS AS WE GET INTO MORE
6	COLLABORATIVE PROPOSALS, THERE'S A LIMITATION ON
7	WHAT PEOPLE ARE GOING TO BE WILLING TO WRITE IN
8	TERMS OF PUTTING FORWARD A WHOLE GRANT WHERE IT MAY
9	NEVER EVEN GET OUT OF THEIR INSTITUTION AS COMPARED
10	TO DOING A CONCEPT REVIEW THAT AT LEAST GIVES THEM
11	SOME CONFIDENCE THAT GOING FORWARD MAY HAVE AN
12	OPPORTUNITY FOR SUCCESS.
13	SO I WOULD JUST ARGUE THAT IN AT LEAST A
14	TRIAL BASIS, WE'VE DONE IT ONE WAY, WE'VE SEEN A
15	LITTLE BIT ABOUT THAT, I THINK ON A TRIAL BASIS,
16	LET'S NOT MAKE THE PERFECT THE ENEMY OF THE GOOD.
17	LET'S TRY AND FIND A WAY TO SEE WHETHER WE CAN
18	STIMULATE MORE PROPOSALS COMING FORWARD WITH LESS
19	I MPAI RMENTS.
20	DR. PENHOET: IF I MIGHT, I MIGHT MAKE TWO
21	COMMENTS. FIRST OF ALL, I DO THINK THAT
22	INSTITUTIONAL PRIORITIES MAY DIFFER FROM CIRM
23	PRIORITIES. SO THAT MAY BE A FACT. THERE MIGHT BE
24	A HYBRID SOLUTION THAT I'D LIKE TO TRY ON YOU, DR.
25	TROUNSON. WHAT IF WE KEPT THE LIMITATIONS IN PLACE
	204

1	FOR THE NORMAL PROCESS, AND THEN ANY OTHERS WOULD BE
2	ALLOWED TO APPLY THAT WOULD GO THROUGH THIS PROCESS,
3	AND YOU WOULD GO THROUGH THOSE WHICH, WERE IT NOT
4	FOR THIS PROCESS, WOULDN'T HAVE BEEN SENT TO YOU TO
5	LOOK FOR UNUSUAL OPPORTUNITIES TO ENHANCE OUR
6	MISSION; I.E., THERE ARE TWO BITES AT THE APPLE.
7	YOU COULD GET ONE GROUP PART OF THE NORMAL
8	GROUP, THEN YOU GET THIS LARGER GROUP THAT YOU TAKE
9	THROUGH A PROCESS LIKE THIS ONE, AND FROM THOSE
10	CHOOSE SOME PARTICULARLY MERITORIOUS APPLICATIONS
11	THAT EITHER MEET THE CRITERIA, ETC. THAT WOULD
12	ALLOW CIRM TO SORT OF PENETRATE INTO THE BROADER
13	GROUP OF POTENTIAL GRANTEES THAT WOULD ALLOW YOU TO
14	STILL LIMIT THE TOTAL NUMBER THAT GET REVIEWED, AND
15	IT WOULD PROVIDE FOR THE FRUSTRATED INVESTIGATORS,
16	LIKE JON SHESTACK MENTIONED, A SECOND BITE AT THE
17	APPLE IN A SENSE. THEY CAN SEND THEIR PROPOSAL TO
18	CIRM DIRECTLY.
19	DR. TROUNSON: I DON'T THINK THAT'S
20	NECESSARILY GOING TO WORK VERY WELL, CHAIR. SOME OF
21	THE PROBLEMS THERE IS THAT WE WOULD HAVE TO LIMIT
22	THE INSTITUTIONS TO ONLY TWO GRANTS AND THE
23	COMPANIES TO ONE. WE'D HAVE ALMOST A FULL PORTFOLIO
24	JUST BY THAT. AND THEN WE'RE GOING TO HAVE THEN
25	ANOTHER PROCESS WHERE WE'RE LOOKING AT A MUCH MORE
	287

1	ABBREVIATED THREE-PAGE APPLICATION, WHICH PROBABLY
2	WON'T BE EQUIVALENT TO THE OTHER INSTITUTIONAL ONE.
3	I THINK MIXING IT UP IS GOING TO BE MUCH
4	MORE DIFFICULT AND MUCH HARDER FOR US TO BE ABLE TO
5	GET CONSISTENCY AND UNDERSTANDING FROM THE RESEARCH
6	COMMUNITY. IF YOU LIMIT IT TO TWO AND TO ONE, OKAY,
7	WE'LL GO WITH THAT, BUT THEN YOU'VE APPLIED THE
8	LIMITS. AND I THINK THAT'S AN UNREASONABLE LIMIT TO
9	APPLY TO THE DISEASE TEAMS. THAT'S WHAT YOU ARE
10	GOING TO HAVE TO DO. AND I DON'T KNOW THAT THE
11	ADDITIONAL PART REALLY HELPS.
12	I THINK THIS IS WORTH AN EXPERIMENT,
13	CHAIR, AT THIS PARTICULAR OCCASION BECAUSE THE
14	LIMITATION TO GET THE BEST GRANTS IS TOO BIG A
15	LIMITATION ON OUR PRIMARY INSTITUTES OR OUR PRIMARY
16	COMPANIES. THERE ARE A NUMBER OF VERY PRIMARY MAJOR
17	INSTITUTES AND COMPANIES THAT HAVE GOT GREAT
18	PROPOSALS. I THINK WE WANT TO SEE ALL OF THEM IN
19	THE INTEREST OF GETTING THE BEST THROUGH TO THE
20	CLINIC.
21	DR. HAWGOOD: THE ISSUE IS WORKLOAD ON THE
22	REVIEW TEAMS. WE'VE TENDED TO STICK WITH A MODEL
23	WHERE WE GIVE THE APPLICANTS BACK A FAIRLY DETAILED
24	REVIEW AND ASSIST FOR REAPPLICATION. BUT UNLIKE THE
25	NIH, THERE'S USUALLY NOT AN IMMEDIATE SECOND CYCLE.

1	I DON'T KNOW HOW MANY WHETHER WE NEED TO DO THAT.
2	IN OTHER WORDS, COULD YOU DOWNLOAD THE WORK OFF THE
3	REVIEW TEAMS BY A MUCH MORE STREAMLINED REVIEW? LET
4	THEM SEE EVERYTHING, LET THEM TRIAGE HALF OF THEM
5	WITHOUT ANY REVIEW BACK, ANY COMMENTS BACK BECAUSE
6	THIS IS NOT LIKE THE NIH WHERE YOU JUST GO BACK IN
7	THREE MONTHS' TIME AND USING THOSE COMMENTS AS HELP
8	BECAUSE, WITH FEW EXCEPTIONS, THE RFA'S ARE FAIRLY
9	SPREAD OUT, AND YOU'RE LIKELY TO COME BACK WITH
10	BRAND-NEW SCIENCE.
11	DR. CSETE: SO WE'RE PROPOSING THIS FOR
12	THE CORE GRANTS, SO WE ANTICIPATE THAT IT'S NOT
13	IMMEDIATE REDEPOSIT, BUT EACH YEAR.
14	DR. TROUNSON: I THINK WHAT WE'RE SAYING
15	TO THEM, SAM, IS THAT YOU HAVEN'T BEEN CONVINCING IN
16	THOSE TWO OR THREE PAGES THAT YOU'RE GOING TO HAVE,
17	IN THIS CASE, AN IND INSIDE THE FOUR-YEAR PERIOD.
18	AND, YOU KNOW, IT MIGHT BE THAT YOU WOULD, BUT WE
19	KNOW THAT THERE'S GOING TO BE 40 APPLICATIONS THAT
20	ARE PROBABLY GOING TO MEET THOSE CRITERIA PRETTY
21	EASILY, AND THEY'RE THE ONES THAT THE REVIEWERS NEED
22	TO REALLY GET THEIR TEETH INTO AND SPEND THE TIME ON
23	IT.
24	THE PROBLEM HERE IS THAT WE UNDERSTAND
25	THAT THERE WILL BE 100 PLUS GRANTS MAYBE IN THIS

1	PARTICULAR FRAMEWORK. I DON'T BELIEVE THAT 50 OF
2	THEM WILL MAKE THEIR IND IN FOURS YEARS. IF THEY
3	DO, I'LL BE ASTONISHED. MAYBE IT IS LIKE THAT, BUT
4	I'LL BE ASTONISHED. BUT THERE WILL BE 40 WITH
5	REALLY GOOD CASES, I WOULD HAVE THOUGHT, FROM WHAT
6	WE UNDERSTAND FOR WHICH WE NEED TO SELECT TEN OR
7	TWELVE. I THINK THAT'S A CRITICAL PART. WE NEED TO
8	PUT THE REAL EFFORT INTO, YOU KNOW, A DETAILED
9	ANALYSIS OF THOSE 40 BEST APPLICATIONS RATHER THAN
10	TRY AND PUT IT ACROSS THE SPECTRUM OF A HUNDRED PLUS
11	AND TRYING TO DO THE SAME THING.
12	DR. CSETE: BY OUR CURRENT GRANT POLICIES,
13	AS GIL HAS ABLY REMINDED ME, EVERY FULL APPLICATION
14	HAS TO HAVE A SUMMARY TO GO BACK TO YOU. SO IF
15	THEY THERE'S JUST NO WAY AROUND THAT.
16	DR. PENHOET: I THINK WE'LL TAKE TWO MORE
17	COMMENTS ON THIS ISSUE, AND THEN WE HAVE TO MOVE ON.
18	WE STILL HAVE NUMEROUS AGENDA ITEMS AHEAD OF US AND
19	IT'S 3 O'CLOCK. JOAN SAMUELSON.
20	MS. SAMUELSON: I THINK IT'S A GREAT
21	PROPOSAL. I HADN'T REALIZED THAT WE WEREN'T FUNDING
22	ALL OF THE BEST. AND THIS WOULD DO THAT. AND I
23	THINK IT'S ESSENTIAL, AND SO I SUPPORT IT.
24	I WOULD PREFER THAT IT BE TWEAKED, PER
25	DR. PRICE'S RECOMMENDATION, SO THAT THE SPECIALISTS

1	ARE REALLY DOING THE REVIEW, WHATEVER KIND OF REVIEW
2	IT IS, AND THE TALENT OF OUR STAFF IS USED FOR ALL
3	OTHER COMPONENTS OF THE VARIOUS PIECES OF IT FROM
4	DRAFTING THE RFA AND THE CRITERIA AND SO ON THROUGH
5	APPLYING THE SPECIALIST'S ANALYSES AND SO ON. I
6	WOULD MAKE THAT A PROPOSAL, I GUESS.
7	DR. PENHOET: ONE FINAL QUICK COMMENT.
8	DR. STEWARD: I JUST HAVE TO SAY I NEED TO
9	GO BACK TO DR. FRIEDMAN'S COMMENT. I DON'T THINK I
10	CAN VOTE FOR THIS UNLESS WE HAVE A CLEAR
11	UNDERSTANDING OF WHAT THE TRIAGE CRITERIA ARE GOING
12	TO BE. AND THEY MAY DIFFER. AND I MEAN THAT IN A
13	WAY THAT IS MUCH MORE DETAILED THAN IS IN THE RFA.
14	OTHERWISE THERE'S JUST TOO MUCH ROOM FOR UNCERTAINTY
15	ON THE PART OF THE INVESTIGATORS, CONCERN OF
16	POTENTIAL BIAS ON THE PART OF CIRM SCIENTIFIC STAFF,
17	WHATEVER. I THINK THAT WE JUST NEED TO HAVE, IF
18	IT'S GOING TO HAPPEN, A VERY, VERY CLEAR SET OF
19	EXPECTATIONS THAT WE THE BOARD HAVE A CHANCE TO SEE
20	IN ADVANCE.
21	DR. CSETE: RIGHT. THE REVIEW CRITERIA
22	FOR THE PREAPPLICATION SCREENING PROCESS WILL BE NO
23	DIFFERENT THAN THE REVIEW CRITERIA FOR THE FINAL
24	PROCESS. SO YOU CAN WAIT FOR EACH RFA AT THE
25	CONCEPT PROPOSAL FOR US TO PRESENT THE REVIEW
	201

1	CRITERIA, BUT WE'RE GOING BUT WE NEED TO MAKE A
2	DECISION ABOUT WHETHER THIS PROCESS IS IN PLACE OR
3	NOT.
4	DR. PENHOET: SO I BELIEVE AT THIS POINT
5	WE NEED A MOTION. THE MOTION THAT STAFF DESIRES IS
6	THAT WE ADOPT THIS EXPERIMENT FOR THE PURPOSES OF
7	THE RFA CONCEPT PLAN THAT WE WILL ADOPT SUBSEQUENT
8	TO THIS UNDER ITEM 13; IS THAT CORRECT? IT'S A
9	ONE-TIME EXPERIMENT.
10	DR. CSETE: NO. NO. FOR THE BASIC
11	SCI ENCE
12	DR. PENHOET: WE NEEDED A MOTION BEFORE WE
13	HAVE PUBLIC COMMENT.
14	DR. CSETE: SO WE SPECIFICALLY PUT THIS IN
15	FRONT OF BOTH OF THE CONCEPT PROPOSALS BECAUSE IT
16	WAS APPLICABLE IN OUR MINDS TO BOTH CONCEPT
17	PROPOSALS. AND AS YOU MIGHT RECALL FROM THE LAST
18	BOARD MEETING, ALTHOUGH THERE WASN'T A QUORUM AT THE
19	TIME, IS THAT CORRECT, MR. KLEIN, THAT THERE WAS A
20	CONSENSUS THAT FOR DISEASE TEAMS, THIS WAS AN
21	ESSENTI AL PROCESS.
22	DR. PIZZO: I AGREE WITH THAT.
23	DR. PENHOET: SO IT'S FOR BOTH CONCEPT
24	PROPOSALS.
25	DR. HAWGOOD: SO MOVED.
	202
	, va /

1	DR. PENHOET: WE HAVE A MOTION FROM DR.
2	HAWGOOD. IS THERE A SECOND?
3	MS. SHESTACK: SECOND.
4	MS. SAMUELSON: THE STAFF PROPOSAL
5	INCLUDES REVIEW THAT IS BY BOTH STAFF AND
6	SPECIALISTS AT THIS POINT.
7	DR. CSETE: CORRECT.
8	DR. PENHOET: SO THE MOTION IS THAT THE
9	ALGORITHM PRESENTED ON THE SLIDE THAT WAS UP HERE
10	WILL BE APPLIED TO THE CONCEPT PROPOSALS FOR THE
11	DISEASE TEAM RESEARCH AWARDS AND FOR THE BASIC
12	RESEARCH INITIATIVE. THAT'S THE EXPERIMENT. OKAY.
13	IT'S BEEN MOVED AND SECONDED. DO WE HAVE PUBLIC
14	COMMENT?
15	MR. BASHAM: DARYL BASHAM, DNA-MI CROARRAY.
16	WE JUST HAD A QUESTION ABOUT THIS PARTICULAR
17	PROPOSAL IN VIEW OF HEALTH AND SAFETY CODE SECTION
18	125290.60(C), WHERE THEY TALK ABOUT WHAT THE SCORING
19	SHOULD BE BASED ON. BASICALLY IT SAYS THAT ONLY THE
20	SCIENTIFIC MEMBERS, THE 15 SCIENTIFIC MEMBERS, CAN
21	LOOK AT A GRANT OR LOAN APPLICATION FOR SCIENTIFIC
22	MERIT. AND SO WE'RE WONDERING IF THAT WOULD
23	PRECLUDE THE SCIENTIFIC BOARD FROM BEING ABLE TO DO
24	THAT TYPE OF REVIEW.
25	CHAIRMAN KLEIN: WHAT'S IMPORTANT HERE IS
	202
	293

1	THAT THIS IS WHEN THEY GO THROUGH THIS PROCESS,
2	WHICH IS JUST A PRIORITIZATION WITH A PORTION OF
3	THEM DEFERRED AND A PORTION OF THEM GOING FORWARD,
4	THERE ARE NO SCORES. SO WHEN IT GOES THROUGH PEER
5	REVIEW, IT'S CLEAN. THAT'S ONLY GOING TO BE SCORED
6	IN THE PEER REVIEW PROCESS. SO THIS IS MERELY A
7	PRIORITIZATION AND A QUESTION OF WHICH ONES ARE MORE
8	MATURE TO GO THROUGH AT THIS POINT AS VERSUS A LATER
9	ROUND.
10	MS. SAMUELSON: I'D STILL LIKE TO HEAR
11	FROM LEGAL COUNSEL.
12	MR. HARRISON: BOB ACTUALLY SUMMARIZED IT
13	CORRECTLY. THIS IS A PREAPPLICATION REVIEW
14	SCREENING PROCESS. THIS IS NOT THE PEER REVIEW THAT
15	THE GRANTS WORKING GROUP WILL ULTIMATELY CONDUCT ON
16	THE APPLICATIONS THEMSELVES.
17	MR. SIMPSON: JOHN SIMPSON FROM CONSUMER
18	WATCHDOG. MANY LAWYERS HAVE DIFFERENT OPINIONS, AND
19	IT SEEMS TO ME THAT THERE MIGHT, ALTHOUGH I'M NOT A
20	LAWYER, BE A DIFFERENT VIEW OF THIS, AND THAT THIS
21	WOULD FLY IN THE FACE OF THAT POSITION. BUT ASIDE
22	FROM THAT, I DO THINK THAT FOR REASONS OF PROTECTING
23	THE INTEGRITY OF THE STAFF, IF YOU DO SOME SORT OF A
24	PREREVIEW, YOU'VE GOT TO HAVE IT DONE ENTIRELY BY
25	OUTSI DE EXPERTS.

1	THE OTHER THING THAT I JUST WOULD THROW
2	INTO THE MIX THAT STRUCK ME AS SOMETHING THAT MIGHT
3	BE APPROPRIATE TO CONSIDER AT SOME POINT IF YOU'RE
4	TRYING TO GET DOWN THE NUMBER OF REVIEWS IS THAT YOU
5	CHARGE AN APPLICATION FEE. ACADEMIC INSTITUTIONS
6	ARE FAMILIAR WITH THAT NOTION, AND IT MIGHT
7	ACTUALLY, IF SOMEONE WERE REALLY COMMITTED TO THEIR
8	PARTICULAR PROJECT, THEY MIGHT PUT A LITTLE MONEY ON
9	THE TABLE TO APPLY. I DON'T KNOW.
10	MS. LANSING: I'M SORRY. I WAS OUT OF THE
11	ROOM FOR MOST OF THE DISCUSSION, SO I JUST WANT TO
12	AT LEAST EXPLAIN WHY I'M NOT GOING TO VOTE IN FAVOR
13	OF THIS. WHAT I WAS CONCERNED WITH IS THAT WE
14	COMPROMISED THE INTEGRITY OF THE WHOLE PROCESS.
15	WHAT I WAS GOING TO THROW OUT, WHICH I GUESS IT'S
16	TOO LATE TO DO, WAS THAT THE OUTSIDE GRANT REVIEW
17	GROUP GET THE TWO PAGES, AND THEY DO THE PREREVIEWS,
18	AND THEN YOU GO BACK IN FULL SO THAT THE STAFF WAS
19	NOT IN WAYS COMPROMISED WITH POSSIBLE CONFLICTS OF
20	INTEREST OR POLITICIZED IN ANY WAY. BUT IT'S TOO
21	LATE TO DO THAT.
22	CHAIRMAN KLEIN: I WANT TO ASSURE YOU MY
23	UNDERSTANDING IS THAT THE STAFF IS ABSOLUTELY
24	MONITORED ON CONFLICT OF INTEREST. THEY'RE EXCLUDED
25	FROM ANY REVIEW IN ANY OF THESE SCREENING PROCESSES
	205

1	WHERE THEY HAVE ANY CONFLICTS. THAT'S MONITORED.
2	IT'S LOGGED. IT'S RECORDED.
3	MS. LANSING: AGAIN, I FEEL BAD BECAUSE WE
4	WERE HANDLING ANOTHER MATTER OUTSIDE. I DON'T WANT
5	TO I KNOW THERE'S A WE NEED A QUORUM FOR THIS.
6	BUT WHAT I GUESS I'M TRYING TO SAY IS WHEN YOU HAVE
7	THIS IT WAS SO PURE THIS OUTSIDE GROUP, AND
8	THEY'RE NOT FROM CALIFORNIA. IT WAS SO PURE. AND I
9	UNDERSTAND THAT THEY'RE OVERLOADED AND IT'S HARD IT
10	DO IT. SO IF YOU ASK FOR THE INITIAL THING TO BE
11	THE TWO PAGES, THEY DID THE PREREVIEW, AND THEN WENT
12	BACK, I JUST THOUGHT IT WOULD KEEP US PURE. AND
13	THAT WAS MY PROBLEM.
14	DR. TROUNSON: THEY WOULDN'T DO IT,
15	SHERRY. WE PUT IT TO THEM. SOME OF THEM WOULD, BUT
16	ESSENTIALLY THEY WANTED TO PUT THEIR EFFORTS INTO
17	THE DETAIL OF IT TO BE REALLY SUBMERGED IN THE
18	PROCEDURES THAT THEY DO. AND THEY WOULD RATHER
19	ATTACK THOSE, THE BULK OF WHAT THEY NEED TO DO IN
20	THAT WAY.
21	CHAIRMAN KLEIN: ADDITIONAL PUBLIC
22	COMMENT, PLEASE.
23	DR. NOLTA: JUST A QUICK ONE. I JUST
24	WONDEDED OF VOIL HAD DEALLY THOUGHT THROUGH HOW MANY
	WONDERED OF YOU HAD REALLY THOUGHT THROUGH HOW MANY
25	YOU'RE GOING TO GET. IT WILL PROBABLY BE THOUSANDS

1	FROM THE STATE. I'M JAN NOLTA. I DIRECT THE STEM
2	CELL PROGRAM AT UC DAVIS. WE HAVE 126 FACULTY
3	MEMBERS. THEY WOULD ALL LOVE TO PUT IN THEIR BASIC
4	OR DISEASE TEAM GRANT. SO YOU'RE NOT JUST GOING TO
5	DOUBLE THEM. IT'S REALLY GOING TO BE A LOT. WE
6	PERFORM A VERY RIGOROUS INTERNAL REVIEW TO SELECT
7	OUR BEST CANDIDATES. ARE YOU REALLY WILLING TO DO
8	THAT TO YOUR REVIEWERS AND STAFF? IT'S JUST A POINT
9	TO THINK ABOUT. WE'D LOVE TO DO IT, BUT IT'S REALLY
10	GOING TO OVERBURDEN YOU.
11	CHAIRMAN KLEIN: SO THERE'S A MOTION ON
12	THE FLOOR, AND THERE'S A SECOND ON THE FLOOR, THE
13	DISCUSSION FROM THE MEMBERS AND THE PUBLIC. I THINK
14	WE NEED TO GO THROUGH A ROLL CALL MOTION ON THIS.
15	ROLL CALL VOTE, PLEASE. JAMES, COULD YOU REPEAT THE
16	MOTION, PLEASE?
17	MR. HARRISON: YES. THE MOTION IS TO
18	APPROVE THE PREAPPLICATION REVIEW PROCEDURE THAT WAS
19	PUT BEFORE YOU TODAY FOR THE PURPOSES OF THE DISEASE
20	TEAM AWARDS AND THE BASIC RESEARCH AWARDS, THE
21	CONCEPT APPROVAL FOR THE RFA'S WHICH YOU'LL DISCUSS
22	LATER THIS AFTERNOON.
23	MS. KING: ROBERT PRICE.
24	DR. PRICE: I'LL ABSTAIN ON THIS ONE.
25	MS. KING: GORDON GILL.
	207

1	DR. GILL: FOR.
2	MS. KING: SUSAN BRYANT.
3	DR. BRYANT: NO.
4	MS. KING: KIM WITMER.
5	DR. WITMER: NO.
6	MS. KING: MARCY FEIT.
7	MS. FEIT: NO.
8	MS. KING: MICHAEL FRIEDMAN.
9	DR. FRI EDMAN: NO.
10	MS. KING: LEEZA GIBBONS.
11	MS. GIBBONS: YES.
12	MS. KING: MICHAEL GOLDBERG.
13	MR. GOLDBERG: YES.
14	MS. KING: SAM HAWGOOD.
15	DR. HAWGOOD: YES.
16	MS. KING: BOB KLEIN.
17	CHAIRMAN KLEIN: YES.
18	MS. KING: SHERRY LANSING.
19	MS. LANSING: NO.
20	MS. KING: GERALD LEVEY.
21	DR. LEVEY: NO.
22	MS. KING: ED PENHOET.
23	DR. PENHOET: YES.
24	MS. KING: PHIL PIZZO.
25	DR. PI ZZO: YES.
	298

1	MS KINC. CLAIDE DOMEDOV
1	MS. KING: CLAIRE POMEROY.
2	DR. POMEROY: YES.
3	MS. KING: FRANCISCO PRIETO.
4	DR. PRI ETO: YES.
5	MS. KING: CARMEN PULIAFITO.
6	DR. PULIAFITO: NO.
7	MS. KING: ROBERT QUINT.
8	DR. QUINT: NO.
9	MS. KING: JEANNIE FONTANA.
10	DR. FONTANA: NO.
11	MS. KING: DUANE ROTH.
12	MR. ROTH: ABSTAIN.
13	MS. KING: JOAN SAMUELSON.
14	MS. SAMUELSON: NO.
15	MS. KING: DAVID SERRANO-SEWELL.
16	MR. SERRANO-SEWALL: NO.
17	MS. KING: JEFF SHEEHY.
18	MR. SHEEHY: YES.
19	MS. KING: JON SHESTACK.
20	MR. SHESTACK: YES.
21	MS. KING: AND OSWALD STEWARD.
22	DR. STEWARD: NO.
23	CHAIRMAN KLEIN: WELL, WE WOULDN'T WANT
24	THE CROWD TO LACK HIGH DRAMA. WE'RE GOING TO NEED
25	TO SEE IF THERE'S ANOTHER MOTION BEFORE WE LEAVE
	299

1	THIS ITEM.
2	MR. HARRISON: THE MOTION FAILS, A VOTE OF
3	11 YES AND 12 NO.
4	CHAIRMAN KLEIN: QUESTION FOR YOU. GIVEN
5	THE STAFF'S TRYING TO MOVE FORWARD HERE, IS THERE
6	ANY SUGGESTION OF AN ALTERNATIVE MOTION?
7	DR. PIZZO: CAN I ASK FOR A CLARIFICATION?
8	JUST A CLARIFICATION. WHEN WE DISCUSSED THE ISSUE
9	TWO MEETINGS AGO REGARDING VARIOUS CRITERIA FOR
10	REVIEW, WE TALKED SPECIFICALLY ABOUT THE DISEASE
11	GRANTS NOT HAVING INSTITUTIONAL LIMITS ASSOCIATED
12	WITH THEM BECAUSE OF THEIR COMPLEXITY. I WANT TO BE
13	SURE THAT TODAY'S VOTE DOESN'T CHANGE THAT IF THAT'S
14	THE CASE BECAUSE I THINK THAT'S A REAL MISTAKE IF
15	THAT WERE THE CASE. AM I CLEAR IN MY UNDERSTANDING
16	ABOUT THAT?
17	CHAIRMAN KLEIN: THE PROBLEM, DR. PIZZO,
18	I'D LIKE COUNSEL TO VALIDATE THIS, JAMES, IS THAT MY
19	RECOLLECTION IS EXACTLY YOURS, THAT WE HAD A
20	DISCUSSION AND DEBATE. AND WITH THOSE THEN PRESENT,
21	THERE WAS A DECISION, BUT IT WAS A SENSE OF THE
22	COMMITTEE. I DON'T THINK WE HAD A QUORUM; IS THAT
23	CORRECT OR INCORRECT?
24	MR. HARRISON: I BELIEVE THAT'S CORRECT,
25	BUT WHAT I'D LIKE TO DO IS GO BACK TO THE
	300

1	TRANSCRIPT, WHICH WE CAN DO NOW, AND VERIFY THAT AND
2	THEN CONFIRM.
3	DR. PIZZO: TO OPERATIONALIZE THE OBVIOUS,
4	IF WE'RE TALKING ABOUT TEAMS OF INVESTIGATORS
5	SOMETIMES FROM DIFFERENT INSTITUTIONS COMING FORWARD
6	WITH POTENTIALLY MONTHS OF WORK WITH PROPOSALS THAT
7	ARE GOING TO BE SCREENED WITHIN THEIR INSTITUTION, I
8	THINK IT'S GOING TO HAVE A NEGATIVE IMPACT ON THE
9	WILLINGNESS OF PEOPLE TO FORGE THOSE COLLABORATIONS.
10	I THINK THIS IS WORKING AGAINST BRINGING FORWARD THE
11	BEST SCIENCE.
12	DR. STEWARD: I ACTUALLY RECALL THIS
13	DISCUSSION AS WELL, AND PERHAPS RATHER THAN GOING
14	BACK AND TRYING TO FIND THE TEXT, WE MIGHT SOLVE THE
15	PROBLEM BY A NEW MOTION. AND I WOULD BE PREPARED TO
16	MAKE THE MOTION THAT FOR THE DISEASE TEAM GRANTS, WE
17	DO NOT HAVE A LIMIT IN TERMS OF THE NUMBER BEING
18	SUBMITTED BY AN INDIVIDUAL INSTITUTION, RECOGNIZING
19	THE PROBLEM THAT EXISTS, AND THAT WE ASK STAFF TO
20	COME BACK WITH SOME SOLUTIONS THAT WE COULD CONSIDER
21	AT THE NEXT BOARD MEETING ON HOW TO DEAL WITH THE
22	NUMBERS QUESTION. IN THE MEANTIME GO FORWARD WITH
23	NO LIMIT.
24	DR. PULIAFITO: SECOND.
25	CHAIRMAN KLEIN: SO, OS, WOULD YOU RESTATE
	301

1	YOUR MOTION, PLEASE?
2	DR. STEWARD: YES, WITHOUT THE EXTRA.
3	THAT THERE BE NO LIMIT ON THE NUMBER OF DISEASE TEAM
4	APPLICATIONS PER INSTITUTION.
5	CHAIRMAN KLEIN: AND THAT YOU'RE ASKING
6	THE STAFF TO COME BACK WITH A PROCESS.
7	DR. STEWARD: YES. THAT'S A REQUEST, NOT
8	PART OF THE MOTION NECESSARILY.
9	DR. TROUNSON: MR. CHAIR, I REALLY OBJECT
10	TO THAT. I'M SORRY. I THINK YOU'RE TAKING AN
11	INCREDIBLY EASY WAY OUT. OF COURSE, IT'S A PROBLEM
12	IF YOU ARE GOING TO LIMIT THE INSTITUTIONS TO TWO
13	GRANTS AND THE COMPANIES TO ONE GRANT. IT'S GOING
14	TO BE A HUGE PROBLEM. BUT YOU CAN'T JUST UNLIMIT IT
15	AND NOT ALLOW US TO PUT FORWARD A PROCESS, A PROCESS
16	THAT WE'VE SPENT A LOT OF TIME ON TRYING TO SOLVE
17	IT. IT'S JUST NOT REASONABLE.
18	I'LL PUT IT TO YOU, MR. CHAIR, THAT THIS
19	IS THE BOARD IS NOT ACTUALLY HELPING US OUT IN
20	THIS MATTER. IF YOU WANT AN EXPERIMENT BY
21	UNLIMITING THE GRANTS, LET US DO IT. BUT IF YOU
22	DON'T ACCEPT THE LIMITATION OF TWO PER INSTITUTION
23	AND ONE PER COMPANY AND LET US GET ON BECAUSE THESE
24	ARE BIG GRANTS. WE'RE NOT GOING TO TAKE MORE THAN
25	40 IN FRONT OF OUR REVIEW TEAM BECAUSE WE WON'T HAVE

1	REVIEWERS AFTER THAT IF WE DO. SO IT'S GOING TO BE
2	LIMITED TO TWO AND ONE, AND SO BE IT. THE BOARD
3	THEN NEEDS TO RECOGNIZE THAT'S A DECISION. WE CAN'T
4	COME BACK WITH SOMETHING WHICH IS UNFITTED TO WHAT
5	WE PROPOSE TO YOU. IT'S JUST NOT REASONABLE.
6	CHAIRMAN KLEIN: I THINK IT IS VERY
7	IMPORTANT WE LISTEN HERE TO STAFF. THEY'RE REALLY
8	WORKING NIGHT AND DAY. IT'S A SMALL STAFF. THESE
9	ARE VERY LARGE, VERY COMPLICATED APPLICATIONS. THEY
10	PUT SERIOUS STUDY INTO THIS. THEY'RE ASKING FOR AN
11	EXPERIMENT TO SEE HOW IT WORKS. SO I DO BELIEVE WE
12	HAVE A RESPONSIBILITY TO FACE UP WITH THIS AND
13	LISTEN CAREFULLY BECAUSE WE'LL LOSE OUR STAFF ALONG
14	WITH OUR REVIEWERS UNLESS WE'RE REALISTIC. WE CAN'T
15	PUT THEM INTO AN UNREALISTIC SITUATION.
16	SO DR. POMEROY HAD A POINT, THEN DR.
17	HAWGOOD, THEN DR. PRIETO.
18	DR. POMEROY: I WOULD JUST LIKE TO SUPPORT
19	ALAN ACTUALLY. THAT WAS THE POINT THAT I WAS GOING
20	TO MAKE, WHICH I DON'T THINK IT'S OUR ROLE AS THE
21	BOARD TO DEFINE ALL OF THE OPERATIONAL APPROACHES TO
22	HOW GRANTS ARE REVIEWED. AND SO I THINK OUR JOB IS,
23	IN FACT, TO EMPOWER OUR STAFF. AND THEY AREN'T
24	ASKING US TO CHANGE EVERYTHING. THEY'RE ASKING US
25	TO DO AN EXPERIMENT AND DETERMINE WHAT THE IMPACT OF
	303

1	THAT IS.
2	SO MY QUESTION IS, BEFORE I VOTE ON THE
3	MOTION THAT IS ON THE FLOOR, IS CAN YOU REMIND ME
4	THE TIMING OF THE BASIC SCIENCE REQUEST VERSUS THE
5	DISEASE TEAM REQUESTS SO THAT I CAN UNDERSTAND WHAT
6	A FEASIBLE EXPERIMENT WOULD BE?
7	DR. CSETE: FOR THE BASIC SCIENCE AWARD,
8	PROVIDED THAT CONCEPT APPROVAL HAPPENS TODAY, THE
9	OTHER WAY THAT WE WERE HOPING TO CONTROL NUMBERS,
10	BECAUSE THAT'S GOING TO BE A MUCH LARGER INFLUX OF
11	NEW PEOPLE, AS WELL AS OUR FORMER APPLICANTS, THAN
12	THE DISEASE TEAMS IS TO HAVE TWO EXACT POSTINGS OF
13	THE SAME GRANT, ONE RIGHT BEFORE CHRISTMAS, WE'VE
14	ESSENTIALLY WRITTEN THE RFA ALREADY, AND ONE SIX
15	MONTHS HENCE SO THAT THERE WOULD BE TWO SETS OF
16	APPLICATIONS COMING IN.
17	THE REASON WE DID THAT, JUST SO YOU KNOW,
18	IS BECAUSE THE SEED GRANTS ARE NOW COMING TO AN END.
19	THOSE INVESTIGATORS WITH SEED GRANTS WHO ARE ON TIME
20	WITH THEIR WORK WOULD BE PICKED IN THE FIRST ROUND,
21	AND THAT'S WHY I FELT THE URGENCY TO POST SOMETHING
22	BEFORE CHRISTMAS. THOSE INVESTIGATORS WHO GOT A
23	LATE START IN THE SEED GRANT AND WOULDN'T QUITE BE
24	READY WITH THEIR PRELIMINARY DATA CAN THEN COME IN

THE MAY GRANT. SO THE TIMING WAS -- THAT WAS MY

25

1	CALCULATION WAS TO MAKE SURE THAT THE SEED
2	GRANTEES WHO ARE READY TO GO ON TO SOMETHING LARGER
3	WITH THE BASIC SCIENCE INITIATIVE WERE PICKED UP.
4	FIRST ONE DECEMBER.
5	WE ANTICIPATE THE POSTING IN THE DISEASE
6	TEAM GRANTS, IF THEY ARE CONCEPT APPROVED TODAY, IN
7	THE FIRST WEEK IN FEBRUARY. SO WHAT THAT MEANS IS
8	THAT WE WOULD GET, IF THERE WERE A PREAPPLICATION
9	PROCESS, THE PREAPPLICATION ON BASIC SCIENCE WOULD
10	COME TO US TOWARDS THE END OF JANUARY. AND THEN WE
11	WOULD BE ABLE TO AT LEAST WE'D CERTAINLY BE ABLE
12	TO REPORT BACK ON NUMBERS AND ASSIGNMENTS OF THE
13	PRESCREENING PROCESS, BUT THE FINAL REVIEW WOULD NOT
14	HAPPEN BEFORE DISEASE TEAMS WAS POSTED.
15	DR. POMEROY: WE WOULD HAVE SOME DATA
16	ABOUT THE FEASIBILITY OF THE EXPERIMENT IF WE
17	WERE IF WE WERE TO APPROVE THIS EXPERIMENT FOR
18	THE BASIC FIRST ROUND OF BASIC SCIENCE, WE COULD
19	DEFER MAKING A FINAL DECISION ABOUT WHETHER TO APPLY
20	THIS PROCESS TO THE DISEASE TEAM GRANTS?
21	DR. CSETE: YOU WILL HAVE SOME DATA.
22	DR. POMEROY: I'M ASKING. THAT WAS A
23	QUESTI ON.
24	DR. CSETE: NO, BUT THERE'S NOT TIME TO
25	USE IT. THE ONLY KIND OF DATA THAT WE WOULD REALLY
	305

300

1	HAVE BY THE JANUARY MEETING WOULD I CAN'T EVEN
2	REMEMBER WHEN THE JANUARY MEETING IS IS
3	POTENTIALLY THE NUMBER OF NEW APPLICANTS THAT CAME
4	INTO THE SYSTEM.
5	DR. TROUNSON: CLAIRE, I THINK THERE'S A
6	HUGE DIFFERENCE BETWEEN WRITING A FULL GRANT, WHICH
7	YOU'VE PROBABLY GOT TO DO FOR YOUR INSTITUTIONS, AND
8	WRITING THE THREE, FOUR-PAGE FOR THE PREREVIEW.
9	CHAIRMAN KLEIN: WE DO HAVE ALSO DR.
10	LEVEY HAS A CONSTRAINT ON TIME. THERE'S A COUPLE OF
11	THINGS HERE. WE EITHER HAVE TO MOVE VERY QUICKLY ON
12	THIS ITEM, OR WE HAVE TO DEFER IT FOR A MOMENT.
13	MS. LANSING: I THINK THIS IS SUCH A
14	SERIOUS ITEM AND I HEAR WHAT ALAN IS SAYING, THAT I
15	WOULD LIKE TO DEFER IT AND LIKE TO COME BACK AGAIN
16	AND LET'S TALK SOME MORE ABOUT THIS BECAUSE WE HAVE
17	TIME CONSTRAINTS AND WE NEED A QUORUM FOR WHAT WE
18	DID IN CLOSED SESSION.
19	DR. CSETE: SO WE PUT THIS ON THE AGENDA
20	IN FRONT OF THE CONCEPT PROPOSALS FOR A REASON. I
21	THINK IT NEEDS TO BE DEALT WITH BEFORE THE CONCEPT
22	PROPOSALS.
23	DR. POMEROY: WE NEED TO FINISH OUR CLOSED
24	SESSI ON.
25	MS. LANSING: WE NEED TO FINISH OUR CLOSED
	306

1	SESSI ON.
2	CHAIRMAN KLEIN: WHAT I'M GOING TO DO AT
3	THE MOMENT HERE IS SUSPEND.
4	MS. LANSING: JUST DEFER TILL WE DO OUR
5	CLOSED SESSION.
6	CHAIRMAN KLEIN: WE'RE GOING TO SUSPEND
7	THIS DISCUSSION FOR A MOMENT, AND I'M GOING TO TURN
8	THIS OVER TO SHERRY LANSING TO ADDRESS THE ACTION
9	ITEMS FROM THE CLOSED SESSION.
10	MS. LANSING: THANK YOU. AND THEN WE WILL
11	COME BACK TO THIS. WE JUST DON'T WANT TO LOSE OUR
12	QUORUM.
13	IN RECOGNITION OF THE EXTRAORDINARY
14	ACCOMPLISHMENTS OF BOB KLEIN AND THE EXTRAORDINARY
15	RESPECT THAT WE HAVE FOR HIM AND HOW WE ARE SO
16	GRATEFUL, AND ALL OF US KNOW WE WOULD NOT BE HERE
17	WITHOUT YOUR LEADERSHIP, WE IN CLOSED SESSION
18	CONSIDERED COMPENSATION FOR THE CHAIR. AND OUR
19	ENTIRE BOARD MET, AND I'D LIKE TO TURN IT OVER TO
20	DUANE AND THEN TO CLAIRE, AND THEY WILL CONTINUE,
21	BUT THIS IS IN RECOGNITION OF WHERE WE ARE NOW AT
22	OUR AGENCY AND HOW GRATEFUL WE ARE FOR EVERYTHING
23	THAT YOU HAVE DONE FOR US AND CONTINUE TO DO FOR US.
24	SO THANK YOU SO MUCH.
25	(APPLAUSE.)
	307
	1 00 <i>1</i>

1	MR. ROTH: MR. CHAIR, SHERRY HAS SAID IT
2	VERY ELOQUENTLY. WHEN WE STARTED THIS PROCESS, WE
3	QUICKLY CONCLUDED THAT THERE'S NOT ENOUGH MONEY IN
4	THE STATE OF CALIFORNIA TO COMPENSATE YOU FOR YOUR
5	CONTRIBUTIONS. YOUR PERFORMANCE, YOUR LEADERSHIP IS
6	UNPARALLELED. BUT JUST LIKE SO MANY GREAT LEADERS
7	WHO GAVE TIME TO PUBLIC SERVICE, IT'S IMPOSSIBLE TO
8	COMPENSATE FOR IT.
9	SO WHAT WE DID IS AS AN ORGANIZATION AND
10	AS A BOARD IS TO SET YOU ASIDE AND SIMPLY SAY WHAT
11	SHOULD THE CHAIR BE COMPENSATED FOR UNDER THE DUTIES
12	OF PROPOSITION 71. AND THAT'S HOW WE ARRIVED AT
13	WHAT CLAIRE WILL MAKE AS A MOTION, BUT WE WANT TO
14	MAKE IT JUST PERFECTLY CLEAR THAT YOUR CONTRIBUTIONS
15	WERE NOT CONSIDERED, AND WHAT WAS CONSIDERED WAS
16	WHAT ARE THE DUTIES OF THE CHAIR.
17	DR. POMEROY: THANK YOU. I TOO WOULD LIKE
18	TO ADD MY GRATITUDE TO YOU, BOB, FOR HELPING LEAD
19	THE CREATION OF THIS INCREDIBLE INSTITUTE AND FOR
20	INSPIRING ALL OF US WITH THIS MISSION. SO THANK YOU
21	VERY MUCH.
22	AND CONSISTENT WITH PROP 71 AND ON THE
23	BASIS OF THE DISCUSSIONS THAT WE HAD IN THE
24	GOVERNANCE SUBCOMMITTEE AND IN THE CLOSED SESSION OF
25	THE FULL BOARD, I WOULD LIKE TO MOVE THAT THE CHAIR
	308

1	RECEIVE A COMPENSATION OF \$150,000 ANNUALLY
2	REFLECTING A 50-PERCENT EFFORT STARTING DECEMBER 1,
3	2008.
4	MR. ROTH: I'LL SECOND IT.
5	MS. LANSING: DO YOU NEED A ROLL CALL VOTE
6	FOR THIS? PUBLIC COMMENT, FIRST OF ALL. PUBLIC
7	COMMENT?
8	MR. REED: THINKING ABOUT NEW JERSEY WHERE
9	WE HAD TREMENDOUS EFFORT BY PATIENT ADVOCATES TO TRY
10	AND MAKE A MAJOR CONTRIBUTION TO THE STEM CELL WORLD
11	AND WE FAILED. WE DIDN'T HAVE SOMEBODY WHO WOULD
12	GIVE HIS LIFE SAVINGS TO THE EFFORT. WE DIDN'T HAVE
13	SOMEBODY WHO WOULD GIVE EVERYTHING TO THE EFFORT AND
14	WE FAILED. CALIFORNIA DIDN'T.
15	\$150,000 IS NOT VERY MUCH MONEY. I DON'T
16	THINK IT IN ANY WAY APPROACHES THE AMOUNT OF WORK
17	THAT IS REQUIRED OF THE CHAIR, ANY CHAIR, NOT JUST
18	OUR CHAIR. I REMEMBER WHEN ZACH HALL'S SALARY WAS
19	BEING DISCUSSED, AND I SAID THEN THAT IT'S NOT
20	ENOUGH TO PAY A PERSON ADEQUATELY. YOU HAVE TO PAY
21	THEM WELL BECAUSE THIS WILL TAKE OVER A PERSON'S
22	LI FE.
23	BEFORE I WORKED TRYING TO GET FUNDS FOR
24	RESEARCH FOR TEN YEARS BEFORE PROP 71. AND TRYING
25	TO GET MONEY OUT OF SACRAMENTO IS LIKE TRYING TO
	309
	JU /

1	FIND WATER IN THE DESERT. I REMEMBER BARBARA BOXER
2	ONCE TOLD ME, SHE SAID, "WHAT YOU NEED IS A BILLION
3	DOLLARS, BUT I CAN'T GIVE IT TO YOU. SACRAMENTO
4	CAN'T GIVE IT TO YOU." BOB KLEIN MADE IT HAPPEN.
5	IT'S LIKE THE ARABS HAVE A SAYING THAT THE
6	GREATEST COMPLIMENT YOU CAN SAY TO A PERSON IS THAT
7	THEY ARE A RIVER TO THEIR PEOPLE. BOB KLEIN HAS
8	BEEN A RIVER TO THE PEOPLE OF THE WORLD. THE
9	APPLAUSE WE GAVE IS WONDERFUL, AND IT COMES FROM THE
10	HEART, AND EVERYBODY FEELS EXACTLY THE SAME WAY, BUT
11	\$150,000 IS JUST NOT IN ANY WAY ADEQUATE. IT MUST
12	BE MORE.
13	MR. SIMPSON: JOHN SIMPSON FROM CONSUMER
14	WATCHDOG. I JUST WANTED TO MAKE SURE I UNDERSTOOD
15	THE MOTION AND THE CONTEXT. FIRST OF ALL, I THINK
16	EVERYONE OWES BOB KLEIN A GREAT TRIBUTE FOR
17	EVERYTHING HE'S DONE. AND I THINK I UNDERSTOOD YOU
18	TO SAY THAT WE'RE NOW TALKING STRUCTURALLY. AND
19	WHAT YOU'RE RECOMMENDING IS THAT THE CHAIRMAN'S JOB
20	ESSENTIALLY IS A HALF-TIME JOB COMMITMENT. AND
21	THAT'S THE BOARD SENSE. AND THAT WOULD CARRY THAT
22	SALARY AMOUNT IN CONJUNCTION WITH THAT. I JUST
23	WANTED TO MAKE SURE I UNDERSTOOD.
24	THE OTHER THING THAT GOES ALONG WITH THAT,
25	DOES THAT MEAN, THEN, IF IN THE NEXT FEW WEEKS IT IS
	210

1	DEMONSTRABLY A FULL-TIME JOB, DOES IT DOUBLE TO
2	300,000, OR IS THAT SOMETHING THAT YOU SEE DOWN THE
3	ROAD? I'M JUST CURIOUS TO TRY UNDERSTAND IT ALL.
4	DR. POMEROY: WE HAVE DEFINED THIS JOB
5	DESCRIPTION AS A 50-PERCENT JOB. AND THAT THE
6	APPROPRIATE COMPENSATION FOR THOSE THAT AMOUNT OF
7	TIME FOR THIS AMOUNT OF RESPONSIBILITY IS THE
8	150,000. WE ALL RECOGNIZE THAT THERE'S AN ENTIRE
9	BOARD OF PEOPLE HERE WHO WORK, YOU KNOW, FOR A PER
10	DIEM, AND WE AREN'T ABLE TO COMPENSATE THEM FOR
11	EVERYTHING THAT THEY DO. AND WE CAN NEVER
12	COMPENSATE BOB FOR ALL THAT HE HAS DONE AND
13	EVERYTHING THAT HE DOES, BUT THAT THIS IS AN
14	APPROPRIATE REFLECTION OF THE RESPONSIBILITIES OF
15	THE DUTIES OF THE CHAIR. AND WE ARE ALL DEEPLY
16	COMMITTED TO WORKING WITH HIM AS BOARD MEMBERS TO
17	HELP GET THE MISSION DONE, AND WE'RE VERY PLEASED
18	THAT THIS IS NOW POSSIBLE GIVEN THE STRONG SENIOR
19	LEADERSHIP STAFF THAT WE HAVE AT CIRM.
20	SO THIS JOB DOES NOT EXPAND BECAUSE
21	SOMEBODY CLAIMS ADDITIONAL HOURS. THIS IS A
22	50-PERCENT JOB AT A HUNDRED FIFTY THOUSAND.
23	MR. SIMPSON: FINAL QUESTION, IF I COULD.
24	HAS THE BOARD TAKEN ANY SORT OF POSITION
25	STRUCTURALLY ON WHAT THE ROLE OF THE VICE CHAIRMAN

1	WOULD BE? WOULD THAT LIKELY BE ANOTHER HALF-TIME,
2	OR IS THAT STILL SOMETHING TO BE CONSIDERED?
3	DR. POMEROY: THE LATTER. THAT WILL BE
4	CONSIDERED IN THE FUTURE.
5	MR. SIMPSON: THANK YOU VERY MUCH. AGAIN,
6	I THINK WE REALLY DO OWE BOB KLEIN A TREMENDOUS,
7	TREMENDOUS DEBT OF GRATITUDE FOR THE PRO BONO
8	CONTRIBUTION THAT HE HAS MADE SINCE THE INCEPTION.
9	I KNOW THAT HE AND I HAVE SOMETIMES STOOD ON
10	OPPOSITE SIDES OF ISSUES, BUT IT HAS ALWAYS BEEN IN
11	AN ATTEMPT TO HELP BRING US ALL CLOSER TO WHAT WE
12	BELIEVE IN, WHICH IS CURES SOMEDAY. SO THANK YOU,
13	BOB, VERY MUCH.
14	CHAIRMAN KLEIN: THANK YOU.
15	MS. LANSING: THAT BEING SAID, I THINK WE
16	NEED A ROLL CALL VOTE. I MIGHT BE WRONG, BUT THAT'S
17	WHAT I WAS TOLD. WE DON'T NEED ONE. IF WE DON'T
18	NEED ONE, THEN
19	MS. KING: THERE'S NO REASON THAT YOU MUST
20	DO ONE, BUT I'M HAPPY TO DO ONE.
21	MS. LANSING: DO I NEED A MOTION ALL IN
22	FAVOR? IS THAT WHAT I SAY? ALL IN FAVOR. ANY
23	OPPOSED? THAT'S GOOD AS A ROLL CALL VOTE.
24	CHAIRMAN KLEIN: SO THANK YOU ALL VERY
25	MUCH. IT'S A GREAT PRIVILEGE TO SERVE THIS GROUP
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1	AND THIS MISSION. WE HAVE SOME EXTRAORDINARY
2	CHALLENGES BEFORE US, BUT I WILL REMIND US ALL WE
3	HAVE SOME EXTRAORDINARY CHALLENGES BEHIND US.
4	PROPOSITION 71 WAS NEVER POSSIBLE IN THE
5	FIRST PLACE. THE 34 MILLION FOR THE CAMPAIGN WAS
6	NOT POSSIBLE. THE 1.1 MILLION SIGNATURES WERE NOT
7	POSSIBLE. GETTING PAST THE LITIGATION IN LESS THAN
8	FIVE YEARS WAS NOT POSSIBLE. THE SETUP OF THIS
9	AGENCY AND GETTING A WORLD-CLASS PRESIDENT, WHO
10	THANKFULLY CAME ALL THE WAY FROM AUSTRALIA, WAS NOT
11	POSSIBLE. WE HAVE A GREAT DEAL
12	MS. SAMUELSON: CURING DIABETES IN TEN
13	YEARS.
14	CHAIRMAN KLEIN: SO I THINK THIS IS THE
15	GROUP THAT LOOKS TO THE IMPOSSIBLE AND REACHES FOR
16	WAYS TO MAKE IT POSSIBLE FOR THE BENEFIT OF ALL THE
17	PATIENTS IN CALIFORNIA AND THE WORLD, AND FOR THAT I
18	AM IN GREAT DEBT FOR YOUR COMMITMENT. IT IS A GREAT
19	PRIVILEGE TO SERVE WITH THIS BOARD AND THE STAFF.
20	THANK YOU.
21	(APPLAUSE.)
22	DR. TROUNSON: MR. CHAIR, ON BEHALF OF
23	STAFF, I HAVE TO SAY THAT WHILE WE RESPECT THE
24	BOARD'S DECISION, WE THINK YOU SHOULD HAVE BEEN PAID
25	MILLIONS OF DOLLARS. YOU KNOW, I THINK IT'S A REAL
	212
	·

1	PRIVILEGE TO WORK WITH YOU AND HAVE YOUR ADVICE AND
2	GUIDANCE, AND IN SO MANY DIFFERENT WAYS THAT ARE
3	GENUINELY BEYOND PROPOSITION 71'S ROLE THAT YOU
4	HAVE. AND THAT ADVICE IS GIVEN BY YOU FREELY
5	BECAUSE YOU'RE INTERESTED, YOU CARE, AND MAKE A
6	DIFFERENCE. AND I'M REALLY I'M REALLY HONORED TO
7	SERVE WITH YOU AS ARE THE STAFF OF CIRM TO SERVE
8	WITH YOU. AND WE HOPE THAT WE'LL BE ABLE TO DO THAT
9	FOR VERY MANY YEARS AND THAT, YOU KNOW, I THINK IF
10	THERE'S AN OPPORTUNITY TO REWARD YOU IN HEAVEN, THEN
11	THAT HAPPENS IN DUE COURSE.
12	CHAIRMAN KLEIN: THANK YOU.
13	AT THIS POINT WE'LL RETURN. DR. PENHOET,
14	WOULD YOU LIKE TO MAKE YOUR MOTION?
15	DR. PENHOET: NO. I SIMPLY WANT TO POINT
16	OUT I THINK IT'S UNREASONABLE TO ASK STAFF TO KEEP
17	COMING BACK TO US WITH PROPOSALS THAT WE'LL TURN
18	DOWN. I THINK WE HAVE TO BE PART OF THE SOLUTION TO
19	THIS, AND I DON'T THINK WE CAN SEND THEM HOME,
20	PLEASE RETHINK THIS, AND COME BACK WITH ANOTHER
21	PROPOSAL.
22	THERE ARE A LOT OF DIFFERENT INTERESTS AT
23	STAKE HERE. I DO THINK IT'S UNREASONABLE FOR US TO
24	ASK THEM TO KEEP COMING BACK WITH PROPOSALS THAT WE
25	WON'T LIKE. THEY'VE GIVEN THEIR BEST THOUGHT TO

1	THIS PROPOSAL. IF WE DON'T LIKE IT, I THINK THE
2	ONUS IS ON US TO COME UP WITH AN ALTERNATIVE WHICH
3	WE WILL ALLOW THEM TO PROCEED WITH BECAUSE I THINK
4	THE ALTERNATIVE OF AN UNFETTERED RIVER OF GRANTS, TO
5	USE THE METAPHOR SOMEONE USED AWHILE AGO, COMING
6	INTO CIRM SIMPLY WILL OVERWHELM THE AGENCY, AND
7	WE'LL FACE A GRAVE RISK OF LOSING A NUMBER OF OUR
8	REVI EWERS.
9	I WAS GOING TO ASK A QUESTION, THOUGH, OF
10	FIRST ALAN AND THEN THE GROUP AROUND THIS TABLE,
11	WHICH IS WOULD IT BE FEASIBLE FOR YOU TO REMOVE THE
12	DISCRETIONARY ASPECT OF THE STAFF INVOLVEMENT IN
13	THIS? AND IF YOU WERE TO DO SO, ARE THERE MEMBERS
14	AROUND THIS TABLE WHO VOTED NO WHO WOULD BE WILLING
15	TO VOTE YES FOR THIS PROPOSAL IF THE DISCRETIONARY
16	ASPECT OF THE STAFF'S INVOLVEMENT WAS REMOVED?
17	DR. TROUNSON: WELL
18	DR. PENHOET: FIRST PART OF THE QUESTION
19	IS COULD YOU REMOVE IT AND HAVE A WORKABLE SYSTEM.
20	DR. TROUNSON: IT HASN'T BEEN SPECIFICALLY
21	PART OF OUR THINKING. SO WHAT YOU PUT TO US IS A
22	PROPOSAL THAT I'M GOING TO RESPOND ON BEHALF OF THE
23	STAFF RIGHT NOW. I THINK IT'S PREFERABLE THAT WE
24	HELP IN THIS PROCEDURE AND THAT WE'RE ABLE TO DRAW
25	ENOUGH SPECIALISTS ESSENTIALLY TO MINIMIZE OUR
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1	INPUTS INTO IT. I THINK WHAT'S NECESSARY HERE, IT'S
2	TO BE ABLE TO PUT THEM INTO YES, NO TINS, IF YOU
3	LIKE, OR PACKAGES. AND THAT'S RELATIVE
4	STRAIGHTFORWARD IF YOU'VE GOT A GOOD SET OF
5	SPECIALISTS THAT ARE SUPPORTING YOU.
6	SO MY ANSWER TO YOU IS THAT I THINK WE
7	WOULD TRY IN EVERY WAY TO MINIMIZE THAT, ED; BUT I
8	THINK IT'S ALMOST IMPOSSIBLE NOT TO HELP GUIDE THEM
9	IN THIS KIND OF PROCESS. WE DO A LITTLE GUIDANCE
10	WITH THE GRANTS WORKING GROUP, AS YOU ALL KNOW. THE
11	GUIDANCE IS THERE TO SORT OF HELP WITH THEIR
12	UNDERSTANDING OF THE RFA, WHAT'S IMPORTANT, WHAT WE
13	THINK IS IMPORTANT. SOMETIMES WE'RE ASKED ABOUT
14	THAT. SOME ADVICE SOMETIMES. IF WE HAVE KNOWLEDGE
15	OF THOSE PEOPLE WORKING IN THE FIELD, OUR ADVICE IS
16	SOUGHT.
17	DR. PENHOET: ALAN, YOUR PROPOSAL WAS THAT
18	THE FINAL STEP IN MAKING THE FINAL DECISION IN OR
19	OUT WAS LEFT TO THREE STAFF MEMBERS. OKAY. THAT'S
20	HOW IT WAS READ BY THIS BOARD.
21	DR. CSETE: AND THE WHOLE GROUP, AND A
22	DISCUSSION WITH THE WHOLE GROUP.
23	DR. PENHOET: GIVING ADVICE AND COUNSEL
24	AND GUIDANCE, ETC., TO THE GRANTS WORKING GROUP
25	DR. TROUNSON: SO IF WE REVISE THAT, MR.
	214

1	ACTING CHAIR, TO SAY THAT
2	DR. PENHOET: YOU CAN PROVIDE ADVICE AND
3	COUNSEL, BUT NOT DECISION-MAKING.
4	DR. TROUNSON: IF WE DID THAT AND IF THAT
5	WOULD DRAW THAT WOULD ENABLE US TO GET ON AND DO
6	THIS EXPERIMENT, YOU KNOW, I THINK WE WOULD BE
7	PREPARED TO DO IT. I'M MAKING THAT I'M MAKING
8	THAT TAKING THAT UNDERTAKING WITHOUT TALKING TO
9	THE STAFF, BUT I BELIEVE THAT WE WOULD BE ABLE TO DO
10	IT.
11	CHAIRMAN KLEIN: LET ME UNDERSTAND THIS TO
12	MAKE SURE WE UNDERSTAND THIS FOR THE BOARD, AND I'LL
13	COME TO YOU, JOAN, FOR A SECOND. DR. CSETE, IN
14	TRYING TO UNDERSTAND, I THINK YOU MADE A COMMENT
15	HERE TOO, IS THERE ANOTHER IS THERE AN INTERIM
16	POSITION HERE WHERE THE STAFF MAKES THAT DECISION
17	WITH THE SPECIALISTS?
18	DR. CSETE: WE CERTAINLY INTEND TO MAKE IT
19	WITH THE SPECIALISTS. THAT'S THE DESIGN. BUT LET
20	ME BE FRANK ABOUT THIS. THE PURPOSE OF THIS IS SO
21	THAT THE COLLECTIVE WISDOM OF OUR SCIENCE OFFICE
22	SEES EVERYTHING, NOT THAT OUR OUTSIDE EXPERTS SEE
23	EVERYTHING. AND WE REALLY FEEL, I FEEL STRONGLY
24	THAT THE PEOPLE I WORK WITH CAN PICK THROUGH THINGS
25	THAT WE OTHERWISE WOULD NOT HAVE ACCESS TO TO BRING

1	DIVERSITY AND STRENGTH TO OUR APPLICATIONS THAT GO
2	BEFORE THE GRANTS WORKING GROUP. AND I THINK WE
3	ARE, WITH THE EXPERIENCE OVER THE LAST COUPLE YEARS,
4	IN ADDITION TO THE EXPERIENCE THAT THIS GROUP BRINGS
5	TO THIS INSTITUTE, UNIQUELY QUALIFIED TO DO THAT.
6	CHAIRMAN KLEIN: I'D LIKE TO BRING THE
7	ATTENTION OF THE BOARD AGAIN, THIS IS A DEFERRAL. A
8	YEAR LATER THERE WILL BE ANOTHER DISEASE TEAM.
9	WHAT'S IMPORTANT HERE IS ANYONE THAT'S DEFERRED CAN
10	COME IN A YEAR LATER. IF WE DON'T LIKE THE
11	EXPERIMENT THE FIRST TIME, WE DON'T HAVE TO REPEAT
12	IT A YEAR LATER. SO PLEASE REALIZE THAT THAT'S
13	WHAT'S BEING DISCUSSED HERE IN CONTEXT. JOAN.
14	MS. SAMUELSON: IS IT IMPOSSIBLE TO FIND
15	ENOUGH OUTSIDE REVIEWERS, SPECIALISTS? AND HERE'S
16	MY STATEMENT BECAUSE I THINK WE'RE ON THE SAME SIDE
17	OF THE PAGE, FENCE, WHATEVER. IT'S LATE. THE MOST
18	URGENT DEADLINE IS TO GET TO THE CLINIC, RIGHT?
19	IT'S NOT TO GET THIS RFA OUT AND FUNDED. AND I'M SO
20	THRILLED WITH WHAT YOU STARTED THIS MEETING WITH,
21	WHICH IS THE INTERNATIONAL COLLABORATIONS. TO HAVE
	WITCH 13 THE TWIENNATIONAL COLLABORATIONS. TO HAVE
22	TO DO THE WORK TO FIND I DON'T KNOW HOW MANY EXTRA
22 23	
	TO DO THE WORK TO FIND I DON'T KNOW HOW MANY EXTRA
23	TO DO THE WORK TO FIND I DON'T KNOW HOW MANY EXTRA REVIEWERS, WHAT I UNDERSTAND IS IMPLICIT IN YOUR

1	STAFF WORKING WAY TOO MANY HOURS, LIKE YOU ALWAYS
2	DO, AND GET IT DONE BECAUSE YOU DON'T KNOW IF YOU'LL
3	HAVE ENOUGH REVIEWERS.
4	IT SEEMS TO ME WE'RE GOING TO NEED TO
5	EXPAND CAPACITY AND EXPAND AND EXPAND USING THE BEST
6	AND BRIGHTEST EVERYWHERE IN THE WORLD THAT THERE'S
7	TALENT, NOT JUST WHERE WE HAVE THEM NOW BECAUSE WE
8	WANT TO GET TO THE CLINIC AS SOON AS WE CAN. SO
9	MAYBE WE JUST HAVE TO DO THAT HARD WORK SOONER, AND
10	IT'S EASY FOR ME TO SAY WHEN I'M NOT DOING IT, AND I
11	UNDERSTAND THAT. BUT I HEARD SEVERAL EMINENT
12	SCIENTISTS EXPRESS CONCERN ABOUT THE STRUCTURE AND
13	IT COMPELLED ME.
14	DR. CSETE: I DO WANT TO ECHO THAT. I
15	THINK THAT OUR EXPERIENCES WITH THE EARLY
16	TRANSLATION GRANTS, WHICH WERE RECEIVED, AND THAT
17	WAS OUR FIRST COLLABORATIVE INTERNATIONAL EFFORT,
18	WAS PROBLEMATIC FOR OUR PARTNERS BECAUSE THEY
19	COULDN'T WORK AROUND THE INSTITUTIONAL LIMITS AND
20	WORK WITH THE PEOPLE THAT THEY WANTED TO WORK WITH.
21	SO IT REALLY DID CUT THAT PROCESS DOWN. WE DO NOT
22	HAVE
23	CHAIRMAN KLEIN: DR. PULIAFITO.
24	DR. PULIAFITO: THERE IS A MOTION ON THE
25	FLOOR.
	310

1	MS. SAMUELSON: SHE WAS ABOUT TO ANSWER MY
2	QUESTI ON.
3	DR. CSETE: I WAS ABOUT TO ANSWER YOUR
4	QUESTION. AND THE ANSWER IS I SPEND AN AWFUL LOT OF
5	TIME ON THE PHONE TRYING TO GET MORE GRANT REVIEWERS
6	ONTO THE GWG AND SPECIALISTS FOR OUR VARIOUS
7	APPLICATIONS. AND IF WE UNLIMIT THE APPLICATIONS
8	PER INSTITUTION, WE DO NOT HAVE THE CAPACITY TO GET
9	SUFFICIENT NUMBERS OF GRANT WORKING GROUP MEMBERS,
10	PERI OD.
11	MS. SAMUELSON: I THINK WE HAVE TO SOLVE
12	THAT FIRST.
13	CHAIRMAN KLEIN: SO JAMES HARRISON, COULD
14	YOU STATE THE MOTION ON THE FLOOR, PLEASE?
15	MR. HARRISON: YES. THE MOTION WHICH WAS
16	MADE BY DR. STEWARD AND SECONDED BY DR. PULIAFITO IS
17	TO IMPOSE NO LIMIT ON THE NUMBER OF DISEASE TEAM
18	APPLICATIONS SUBMITTED PER INSTITUTION.
19	DR. STEWARD: LET ME JUST SAY WE DO HAVE
20	THE TIME TO WORK OUT SOMETHING DIFFERENT THAN YOU
21	PROPOSED HERE IF THAT MOTION WAS PASSED. LET ME
22	SAY, AGAIN, ALL OF US HAVE THE GREATEST RESPECT FOR
23	THE SCIENCE TEAM AND FOR EVERYONE AT CIRM. WHAT WE
24	WANT TO DO IS TRY TO WORK THROUGH THIS IN A WAY
25	THAT'S GOING TO BE A WORKABLE SOLUTION FOR
	200
	320

1	EVERYTHING. AND I THINK THAT WE ALL ARE PREPARED TO
2	OFFER IDEAS THAT WOULD MODIFY THINGS.
3	THIS MOTION, I THINK, COULD BE PASSED OR
4	NOT, BUT WE DO HAVE ENOUGH TIME BEFORE THE GRANTS
5	ACTUALLY COME THROUGH TO TRY TO FIX SOME KIND OF A
6	SOLUTI ON.
7	DR. HAWGOOD: I DISAGREE WITH THAT. THE
8	AMOUNT OF WORK THAT HAS TO GO INTO A DISEASE TEAM
9	GRANT TO PULL IT TOGETHER TO BE FOUND AT THE LAST
10	MINUTE THAT, BECAUSE WE MAKE ANOTHER DECISION, IT'S
11	NOT GOING TO GO THROUGH OR IT'S GOING TO BE TRIAGED
12	WOULD BE DISASTROUS. I THINK WE JUST HAVE TO MAKE
13	UP OUR MINDS.
14	I WOULD ASK THE STAFF, YOU SAID THIS IS
15	NOT NEW. THERE ARE MANY, MANY ORGANIZATIONS THAT DO
16	A CONCEPT REVIEW. THE ONE I'M MOST FAMILIAR WITH IS
17	MARCH OF DIMES, BUT THERE'S MANY THAT DO IT. AND
18	YOU SAID YOU CONTACTED MANY, THE GATES FOUNDATION,
19	ETC. WHAT IS THEIR STAFF INVOLVEMENT IN THE
20	PROCESS?
21	DR. CSETE: WELL, FOR EXAMPLE, THE MI CHAEL
22	J. FOX FOUNDATION, THE STAFF IS VERY INVOLVED IN THE
23	INITIAL IN THE REVIEW PROCESS THROUGHOUT. AND
24	IT'S TRUE OF FOUNDATIONS. IT'S NOT TRUE AT NIH, BUT
25	WE'RE NOT NIH.
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1	DR. HAWGOOD: I WOULD SAY THERE ARE
2	CERTAIN SCIENTIFIC OFFICERS WHO HAVE SOME INFLUENCE.
3	DR. CSETE: BUT ACTUALLY PART OF THE
4	REASON WHY MICHAEL J. FOX WAS SO ATTRACTIVE TO US
5	WAS BECAUSE I HAD BEEN AN APPLICANT THERE AND
6	TRIAGED MANY TIMES, BY THE WAY, BUT I UNDERSTOOD
7	THAT THE INTERACTION WITH THE STAFF WAS PART OF
8	MAKING YOUR GRANT FIT THEIR MISSION. AND THAT'S
9	WHAT WAS ATTRACTIVE ABOUT THE WAY THEY DID THEIR
10	TRIAGE PROCESS BECAUSE THERE WAS AN ITERATIVE
11	PROCESS WITH THE APPLICANTS.
12	CHAIRMAN KLEIN: I THINK DR. HAWGOOD'S
13	POINT IS EXTREMELY IMPORTANT. THERE'S A MASSIVE
14	AMOUNT OF EFFORT THAT GOES INTO THESE. PEOPLE NEED
15	TO KNOW AS SOON AS, IMMEDIATELY. I AGREE WITH ED'S
16	POSITION THAT WE JUST CAN'T SAY IT'S UNLIMITED AND
17	NOT HAVE A SOLUTION HERE. BUT WE OWE A VOTE TO THE
18	PEOPLE. WE HAVE A MOTION ON THE FLOOR. I'M GOING
19	TO TAKE ONE MORE COMMENT, WE'RE GOING TO CALL A VOTE
20	ON THE MOTION ON THE FLOOR. I CAN'T SEE WHO,
21	GORDON, WHO IS MARCY. GORDON AND MARCY. I'LL
22	TAKE TWO MORE COMMENTS AND ONE PUBLIC COMMENT, AND
23	THEN WE'RE GOING TO HAVE A VOTE ON THIS, AND THEN
24	WE'RE GOING TO DECIDE IF THIS FAILS WHAT OUR
25	SOLUTION IS.
	222

1	DR. GILL: JUST TWO POINTS. ONE IS IT'S
2	VERY POSITIVE THAT YOU'RE GETTING A LOT MORE GRANTS.
3	THIS IS AN AREA THAT WAS UNPOPULATED BY SCIENTISTS A
4	FEW YEARS AGO.
5	SECONDLY, THIS IS FACED BY MOST GRANTING
6	AGENCIES RIGHT NOW. AND IT SEEMS TO ME THAT IT'S
7	BEEN ENORMOUSLY HELPFUL TO OPEN THE PROCESS UP. I'M
8	THINKING OF HOWARD HUGHES IN PARTICULAR BECAUSE I
9	ALWAYS HAD TO CHAIR THE INTERNAL COMMITTEE THAT
10	SELECTED OUR APPLICANTS FOR HOWARD HUGHES. IT WAS
11	IMPERFECT. I MADE ENEMIES. IT WAS NOT NEARLY AS
12	GOOD AS SOMETHING THAT COULD LOOK ACROSS A MUCH
13	WIDER SPECTRUM THAN JUST PEOPLE WITHIN YOUR
14	INSTITUTION. THE FACT THAT THEY'VE OPENED THIS UP,
15	THEY GOT 1400 APPLICATIONS FOR THE 70 AWARDS THAT
16	THEY WILL MAKE IN THE PRESENT ROUND. NOW, THEY'VE
17	CUT THAT QUICKLY TO 400.
18	SO IT CAN BE DONE IN A FAIR WAY, AND IT
19	MUST BE DONE. THERE IS ALL OTHER GRANTING
20	INSTITUTIONS ARE FACED WITH THIS. I DON'T THINK YOU
21	CAN DODGE IT.
22	CHAIRMAN KLEIN: AND I WOULD ALSO SAY THAT
23	COUNSEL'S ADVICE IS THAT THEY CONSULTED WITH
24	COUNSEL. STAFF'S INVOLVEMENT IS IMPORTANT TO THE
25	STRUCTURE AND ITS INTEGRITY. SO IT'S NOT THAT WE
	323
	JZJ

1	CAN DISASSEMBLE THIS PROCESS IN THAT MANNER.
2	MS. FEIT: THANK YOU. YOU KNOW, I WOULD
3	BE WILLING TO CHANGE MY VOTE TO SUPPORT THE
4	EXPERIMENT, BUT I REALLY FEEL, I AGREE WITH DR.
5	FRIEDMAN ABOUT NEEDING JUST A LITTLE MORE STRUCTURE
6	AND DEFINITION TO THE PROCESS. I WOULD LOVE TO SEE
7	A BROADER SPECTRUM OF THE GRANTS, BUT I'M A LITTLE
8	BLASED ABOUT THE INSTITUTE CONSTANTLY CHANGING WHO
9	WE ARE AND WHAT WE'RE ABOUT AND WHERE WE'RE GOING
10	AND HOW WE'RE HANDLING IT.
11	I'VE SAT IN ON MOST OF THE GRANT REVIEWS
12	WITH THE REVIEWERS, AND IT'S A VERY INTENSIVE, LABOR
13	INTENSIVE PROCESS. AND THERE AREN'T A LOT OF
14	REVIEWERS. YOU ALL KNOW THAT. THEY'RE SKILLED IN
15	THEIR OWN RIGHT, AND THERE'S ONLY A HANDFUL OF THEM
16	WHO ARE QUALIFIED TO DO THESE REVIEWS. SO THERE HAS
17	TO BE A METHOD OF BRINGING IT DOWN TO A WORKABLE
18	NUMBER. BUT EVEN SITTING THROUGH THOSE REVIEWS, AS
19	YOU SAW TODAY, THERE'S STILL A NUMBER OF GRANTS THAT
20	COME THROUGH THAT JUST DON'T HIT IT.
21	AND SO ONE CAN START SAYING, WELL, IS THAT
22	A WASTE OF THE INSTITUTE'S TIME? IS THAT A WASTE OF
23	THE TIME OF THE REVIEWERS WHO ARE SO VALUABLE? AND
24	IS THERE A WAY TO OPEN THAT UP MORE SO THAT WE CAN
25	HAVE A BETTER SELECTION PROCESS? SO I WOULD JUST
	20.4

SAY THERE'S JUST MISSING SOME REAL CRITERIA THERE
FOR MOST OF US THAT BRINGS A COMFORT LEVEL.
CHAIRMAN KLEIN: SO, MARCY, WE NEED TO
VOTE ON THIS MOTION.
DR. PIZZO: CAN I MAKE A MODIFICATION?
CHAIRMAN KLEIN: ONE MOMENT BECAUSE WE
COULD AFTER THIS MOTION, IT WOULD BE IN ORDER TO
SUGGEST THAT WE PASS THE PRIOR MOTION WITH A
MODIFICATION, THAT THEY COME BACK WITH THE CRITERIA
FOR DEFERRAL WHICH WOULD PROVIDE SOME STRUCTURE THAT
YOU ARE ASKING FOR, SO WE'D HAVE THE PROCESS IN
PLACE AND THEY'D COME BACK AND REPORT ON THE
CRITERIA FOR DEFERRAL IN THE PROCESS.
DR. PIZZO: I WONDER WHETHER THE PERSON
MAKING THE MOTION WOULD ENTERTAIN A MODIFICATION,
WHICH WOULD BE TO NOT RESTRICT THE DISEASE GRANTS,
BUT ALSO TO ALLOW THE EXPERIMENTAL METHODOLOGY
PROPOSED BY SCIENTIFIC STAFF TO APPLY TO THE BASIC
SCIENCE AWARDS WITH THE UNDERSTANDING THAT THEY MAY
CHOOSE TO MODIFY THAT CRITERIA GOING FORWARD SO THAT
IT'S MORE UNDERSTANDABLE TO US, BUT, IN ESSENCE,
ALLOW THIS TO, IN ESSENCE, EMBRACE BOTH THE BASIC
SCIENCE AWARDS AS WELL AS THE DISEASE GRANTS.
I'M WORRIED ABOUT TWO THINGS. JUST VERY
QUICKLY. I'M WORRIED ABOUT POTENTIALLY RESTRICTING
325

1	DISEASE GRANTS BECAUSE OF THE SCOPE AND SIZE OF THEM
2	SO THAT UNLESS THERE'S SOME PREREVIEW AND PEOPLE
3	REALLY FEEL THAT THEY HAVE A CHANCE TO GO FORWARD
4	WITH THIS, WE'RE NOT GOING TO GET THE BEST SCIENCE
5	HAPPENI NG.
6	I'M CLEARLY ALSO I REALIZE I'M ONE OF
7	THE ELEVEN, BUT I'M ALSO VERY WORRIED ABOUT
8	PRESCREENING OUT VERY MERITORIOUS BASIC SCIENCE
9	AWARDS. SO I'M OBVIOUSLY SUGGESTING THAT
10	MODIFICATION TO ALLOW US TO DO THIS AS AN EXPERIMENT
11	FOR THESE TWO AWARDS, BASIC SCIENCE AND THE DISEASE
12	GRANTS.
13	CHAIRMAN KLEIN: THAT WAS THE LAST
14	PROPOSAL.
15	DR. PIZZO: I UNDERSTAND. I'M JUST TRYING
16	TO MODIFY THIS ONE. WE HAVE IT ON THE TABLE, SO IT
17	JUST SEEMED EASY.
18	DR. STEWARD: SO I HAVE TO ANSWER YOU.
19	CHAIRMAN KLEIN: IT'S NOT ACCEPTABLE TO
20	THE SECOND, SO I'M GOING TO SAY THAT IT'S MOOT. I'M
21	GOING TO TAKE YOUR POINT; AND THEN, IF I CAN, WE CAN
22	CALL THE QUESTION, PLEASE. IS THAT ALL RIGHT?
23	MR. CUMMINGS: I'M BRIAN CUMMINGS FROM UC
24	IRVINE. AND I JUST WANT TO SPEAK TO THE BOARD AND
25	SECOND OSSIE'S POSITION, THAT YOU SHOULD NOT LIMIT
	326

1	THE NUMBER OF DISEASE TEAM APPLICATIONS. I THINK
2	THE SIZE OF THESE APPLICATIONS, HAVING PUT IN RO1S
3	AND SMALLER GRANTS MYSELF AND BEING THE RECIPIENT OF
4	A SEED AWARD AT UC IRVINE HERE, THE DIFFERENT SIZE
5	GRANTS REQUIRE A DIFFERENT AMOUNT OF EFFORT TO PUT
6	THEM TOGETHER. I DON'T THINK THAT YOU'RE GOING TO
7	BE FLOODED WITH DISEASE TEAM GRANTS. THEY'RE FAR
8	TOO LARGE.
9	WE'VE ALREADY BEEN WORKING FOR SIX MONTHS
10	ON OUR DISEASE TEAM GRANT. AND IF YOU LIMIT THEM TO
11	TWO PER INSTITUTION, LET ME JUST GIVE YOU A REAL
12	WORLD EXAMPLE, UC IRVINE HERE. THERE ARE FIVE LABS
13	WORKING ON SPINAL CORD INJURY HERE, TWO OF WHICH
14	INDEPENDENTLY COULD BE PUTTING IN A DISEASE TEAM
15	GRANT WITH TWO DIFFERENT CELL POPULATIONS. NOW,
16	THOSE MAY BE BY THE WAY, ONE OF THOSE WOULD BE
17	MINE THOSE MAY BE THE MOST THE BEST GRANTS IN
18	THE STATE OF CALIFORNIA FOR SPINAL CORD INJURY. BUT
19	IF I WERE ON THE REVIEW BOARD FOR IRVINE, I WOULD
20	ONLY LET ONE OF THOSE GO THROUGH AND ONE FOR SOME
21	OTHER DISEASE INDICATION. THAT'S NOT HOW WE SHOULD
22	BE GETTING THE BEST SCIENCE IN CALIFORNIA.
23	CHAIRMAN KLEIN: SO COULD I ASK THE PUBLIC
24	MEMBER, ALTHOUGH YOU ARE ALTERNATE TO THE BOARD,
25	COULD YOU LET US VOTE ON THIS? I THINK I'M NOT
	327
	UL I

1	SURE THAT THIS IS GOING TO RESOLVE THE ISSUE.
2	YOU'RE GOING TO HAVE ANOTHER CHANCE POTENTIALLY.
3	MR. CUMMINGS: I'M JUST TRYING TO
4	HOPEFULLY GET PEOPLE
5	CHAIRMAN KLEIN: BUT I APPRECIATE YOUR
6	COMMENTS VERY MUCH. I'M SORRY. I THOUGHT YOU WERE
7	DONE WITH YOUR COMMENTS.
8	MR. CUMMINGS: I CAN BE.
9	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
10	DR. LEVIN: MY COMMENT ISN'T RELEVANT TO
11	THE DISCUSSION.
12	DR. TROUNSON: MR. CHAIR, THE MEMBER OF
13	THE PUBLIC ALMOST DEFEATED HIS OWN ARGUMENT. THERE
14	ARE FIVE SPINAL REPAIR GROUPS COMING OUT OF IRVINE.
15	I CAN REASSURE YOU THERE'S A LOT MORE COMING OUT OF
16	ALL THE OTHER INSTITUTIONS. THERE'S NOT GOING TO BE
17	40. THERE'S GOING TO BE MORE THAN A HUNDRED. AND
18	WE'VE BEEN ADVISED THAT THAT IS THE CASE. AND IF
19	YOU WANT A HUNDRED OR MORE PEOPLE WRITING THESE
20	MAJOR GRANTS AND THEN US FUND 10, MAYBE 12, IF
21	THEY'RE GOOD ENOUGH, I TELL YOU WHAT YOU ARE GOING
22	TO DO. YOU'RE GOING TO HAVE A LOT OF UPSET PEOPLE
23	AND A LOT OF WASTED TIME, AND INSTITUTES WHICH
24	SHOULD BE FOCUSED ON MAKING THEIR GRANTS EVEN BETTER
25	FOR THE NEXT TIME ROUND.

1	CHAIRMAN KLEIN: WE HAVE SOME REALLY
2	CRITICAL DEADLINES HERE. COULD YOU MAKE IT REAL
3	QUI CK?
4	DR. LEVIN: JACOB LEVIN, UC IRVINE. SORRY
5	TO TAKE THIS TIME, BUT AS A MEMBER OF THE PUBLIC
6	NOW, THIS IS THE ONLY OPPORTUNITY TO SPEAK. I JUST
7	WANT TO REMIND THE BOARD THAT WE DID DISCUSS THIS
8	WHEN I WAS A MEMBER OF THE BOARD IN SAN DIEGO WHEN
9	WE WERE OUT OF QUORUM WHERE I SUGGESTED THAT WE
10	ADOPT A MODEL LIKE THE ONE THAT THE NATIONAL SCIENCE
11	FOUNDATION USES. NATIONAL SCIENCE FOUNDATION IS THE
12	SECOND LARGEST PUBLIC FUNDER OF BASIC RESEARCH IN
13	THE COUNTRY. IT'S NOT A SMALL PRIVATELY HELD
14	FOUNDATION, THAT THEY HAVE VERY OFTEN PREAPPLICATION
15	PROCESS WHERE FIVE-PAGE PREPROPOSALS ARE SENT TO
16	BASICALLY A GRANTS WORKING GROUP THAT IS
17	ADMINISTERED BY STAFF, BUT THAT THEY ARE THE ONES
18	THAT VET THE PREAPPLICATION AND INVITE PEOPLE TO
19	FULL APPLICATION.
20	THIS TYPE OF MODEL WOULD BE MORE
21	IMPARTIAL, AND IT WOULD SATISFY, HOPEFULLY, A LOT OF
22	THE CONCERNS OF THE PEOPLE ON THIS BOARD AND OF THE
23	APPLICANTS AND WOULD STILL ALLOW PLENTY OF INFLUENCE
24	FROM THE CIRM STAFF IN PICKING THE PEER REVIEWERS
25	AND WOULD LIMIT THE AMOUNT OF WORK THAT WOULD HAVE
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1	TO BE DONE SINCE THE PROPOSALS ARE SMALLER AND MIGHT
2	BE SOMETHING THAT YOU COULD CONSIDER AFTER THIS
3	VOTE. THANKS.
4	CHAIRMAN KLEIN: OKAY. ALL RIGHT. LOOK,
5	WHAT WE WANT TO DO HERE IS QUICKLY TAKE A ROLL CALL
6	IF WE CAN, PLEASE. THE MOTION WILL BE RESTATED BY
7	JAMES HARRISON.
8	MR. HARRISON: THE MOTION, AGAIN MADE BY
9	DR. STEWARD AND SECONDED BY DR. PULIAFITO, IS TO
10	IMPOSE NO LIMITS ON THE NUMBER OF DISEASE TEAM
11	APPLICATIONS SUBMITTED PER INSTITUTION.
12	DR. PRICE: BEFORE WE VOTE ON THIS, IF
13	THIS PASSES, ARE WE GOING TO REVISIT THE ISSUE OF
14	THE METHOD OF LIMITING?
15	DR. STEWARD: I WOULD CERTAINLY PROPOSE
16	THAT WE CONTINUE THAT DISCUSSION BECAUSE I THINK
17	IT'S AN IMPORTANT PIECE. I THINK I TOTALLY AGREE.
18	WE HAVE TO SOLVE THIS, AND I THINK NEED TO SOLVE IT
19	TODAY.
20	DR. CSETE: WE CAN'T POST THE RFA UNTIL WE
21	KNOW WHETHER THERE'S A PREAPPLICATION OR NOT.
22	CHAIRMAN KLEIN: RIGHT. SO YOUR PROPOSAL
23	IS TO PASS THIS AND THEN MAKE ANOTHER MOTION.
24	DR. STEWARD: YOU KNOW, THE OTHER OPTION
25	IS JUST TO WITHDRAW THIS AT THIS POINT, AND I WOULD
	330

1	BE HAPPY TO DO THAT AND REVISIT THIS. THIS IS SORT
2	OF A MOTION THAT WAS MADE AWHILE AGO THAT IS PERHAPS
3	OUT OF PLACE HERE.
4	CHAIRMAN KLEIN: WELL, I NEED TO ASK THE
5	SECOND IF YOU AGREE TO THE WITHDRAWAL. THE SECOND
6	RELUCTANTLY, BUT IN THE SPIRIT OF THE MISSION,
7	WITHDRAWS. SO IF SOMEONE WOULD LIKE TO MAKE AN
8	ALTERNATIVE MOTION.
9	DR. STEWARD: SO I WILL MAKE AN
10	ALTERNATIVE MOTION, AND THAT IS THE SINGLE THING
11	THAT STILL BOTHERS ME MOST IS EXACTLY THE ISSUE THAT
12	BOB RAISED, THE FINAL DISCRETIONARY ABILITY OF STAFF
13	WHICH PUTS THEM AT RISK. I LIKE THE IDEA OF A SMALL
14	PREPROPOSAL THAT COULD BE REVIEWED IN THE USUAL WAY
15	BY AN OUTSIDE GROUP WITH THE SAME KIND OF HANDS-OFF
16	CONFLICT OF INTEREST ISSUES THAT WE HAVE HAD IN THE
17	PAST. AND THAT, I THINK, IS AN ESSENTIAL PIECE IN
18	MAINTAINING THE INTEGRITY OF THE PROCESS THAT WE
19	HAVE WORKED SO HARD TO CREATE. THAT'S MY MOTION,
20	PREAPPROVAL.
21	CHAIRMAN KLEIN: I'D LIKE TO TAKE A
22	TWO-MINUTE RECESS TO DISCUSS THAT LEGALLY. THIS IS
23	STRUCTURED LEGALLY TO FIT THE CASE LAW AND STATUTES
24	OF CALIFORNIA. I WANT TO MAKE SURE WE'RE VOTING ON
25	SOMETHING WE CAN ACTUALLY DO. IF I COULD, WE'D JUST

1	TAKE A TWO-MINUTES RECESS FOR LEGAL.
2	(A RECESS WAS TAKEN.)
3	CHAIRMAN KLEIN: WE'RE RECONVENING AT THIS
4	TIME.
5	MS. KING: BOARD MEMBERS IN SEATS, PLEASE.
6	CHAIRMAN KLEIN: CAN THE STAFF RESCUE ANY
7	BOARD MEMBERS IN THE HALL, PLEASE. LYNN, COULD YOU
8	HELP TRY AND FIND. OKAY. LET'S REALLY PROMOTE THE
9	RECOVERY OF STAFF WITH A DRAGNET OR SOMETHING, BOARD
10	MEMBERS. OKAY. COUNSEL, HOW CLOSE ARE WE?
11	MS. KING: SHOULD BE A QUORUM NOW. DUANE
12	WAS 18.
	WAS 16.  CHAIRMAN KLEIN: MICHAEL.
13	
14	MR. HARRISON: WE'VE GOT A QUORUM.
15	CHAIRMAN KLEIN: WHERE ARE THE OTHER
16	MEMBERS? WE HAVE A QUORUM. CAN SOMEONE LOOK IN
17	THE SEE IF SOMEONE'S GETTING COFFEE BECAUSE
18	THEY'VE BEEN UP LATE OR SOMETHING. THAT'S NOT THE
19	REQUEST. I WANT AS BROAD A PARTICIPATION. THIS IS
20	AN IMPORTANT DECISION. THANK YOU VERY MUCH. I KNOW
21	YOU TRIED VERY HARD TO RESCUE THE MEMBERS. OKAY.
22	WE LOVE IT. THANK YOU. THANK YOU VERY MUCH. OKAY.
23	SO AS THE CHAIR, I VERY RARELY MAKE
24	MOTIONS. I'M GOING TO TRY TO MAKE A MOTION HERE TO
25	BREAK THIS LOGJAM BECAUSE IT'S CRITICAL, AND WE HAVE
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	OTHER ORITION LOCKER ON OUR ACENDA
1	OTHER CRITICAL ISSUES ON OUR AGENDA.
2	SO MY MOTION IS THAT WE ADOPT THE ORIGINAL
3	PROPOSAL OF STAFF FOR TRIAGE; HOWEVER, THE STAFF
4	COMES BACK TO US AT THE NEXT MEETING WITH PRECISE
5	CRITERIA FOR THE DEFERRAL DECISIONS, SO THERE'S AN
6	OBJECTIVE STANDARD FOR THE DEFERRAL DECISIONS THAT'S
7	DEFINED. IT IS IMPORTANT TO UNDERSTAND THAT THERE'S
8	BEEN A GREAT DEAL OF LEGAL REVIEW OF THE OPTIONS.
9	THIS OPTION APPEARS TO BE THE BEST OPTION IF WE ARE
10	GOING TO REMOVE THE LIMITATION ON PROPOSALS.
11	SO WITH THAT CONTEXT, I MAKE THIS MOTION.
12	IS THERE A SECOND?
13	DR. PENHOET: SECOND.
14	CHAIRMAN KLEIN: DR. PENHOET MAKES THE
15	SECOND. DISCUSSION ON THE MOTION?
16	DR. PRIETO: DOES THIS INCLUDE REMOVING
17	THE LIMITATION?
18	CHAIRMAN KLEIN: REMOVES THE LIMITATION,
19	YES. THIS IS FOR AN EXPERIMENT FOR TWO, FOR DISEASE
20	TEAMS AND FOR BASIC SCIENCE.
21	DR. STEWARD: I DO HAVE A QUESTION. AND I
22	STILL HAVE MAJOR CONCERNS ABOUT THIS. WE SAW AT
23	THIS MEETING EARLIER A SITUATION WHERE WE ACTUALLY
24	REREVIEWED A PROPOSAL THAT GOT AN UNFAIR REVIEW,
25	THAT THE INVESTIGATOR FELT GOT AN UNFAIR REVIEW.
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1	MS. SAMUELSON: THERE'S ANOTHER SOLUTION I
2	THOUGHT WAS BEING DRAFTED, WASN'T IT?
3	CHAIRMAN KLEIN: WE'RE NOT JOAN, WE'RE
4	NOT AWARE OF ANOTHER SOLUTION THAT PASSES ALL THE
5	LEGAL TESTS. WE'RE NOT.
6	MS. SAMUELSON: I'M NOT PRIVY TO WHATEVER
7	IT WAS YOU WERE
8	DR. PULIAFITO: I LIKE THE IDEA OF
9	PRESCREENING, BUT WHAT I'M UNCOMFORTABLE WITH IS
10	THAT WE'VE SEEN A SLIDE. I WOULD LIKE TO SEE A REAL
11	DOCUMENT OF WHAT THE POLICIES AND PROCEDURES ARE
12	ABOUT THIS. I DON'T EVEN KNOW REALLY WHAT WE'RE
13	VOTING ON AND WHAT THE CITIZENS OF CALIFORNIA HAVE
14	TOLD US, AND WHAT WE HEARD EARLIER TODAY IS THEY
15	WANT THE DOORS WIDE OPEN, PARTICULARLY WHEN IT COMES
16	TO DISEASE TREATMENT GRANTS. AND THEN IT'S UP TO
17	THIS BOARD TO MAKE SURE THAT THE PROCESS IS FAIR AND
18	FREE OF CONFLICT OF INTEREST. AND I'M NOT SURE THAT
19	I'VE SEEN AN ARTICULATED PLAN THAT SUGGESTS THAT'S
20	THE CASE. THAT'S MY CONCERN. NOT THE FACT THAT WE
21	NEED PREAPPLICATION. BUT I HAVEN'T SEEN A DETAILED
22	PLAN OR
23	DR. CSETE: THIS IS A CONCEPT PROPOSAL,
24	AND THEY GO CONCEPT PROPOSAL FIRST, DETAILED PLAN
25	SECOND. SO THIS WASN'T MEANT TO BE A DETAILED PLAN
	225
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1	BY DESIGN.
2	CHAIRMAN KLEIN: LET ME TRY AND BE
3	RESPONSIVE. I'M PREPARED TO SEE IF WE CAN GET A
4	TELEPHONIC PHONE CALL MEETING. IF WE PASS THIS
5	RESOLUTION, THIS MOTION, WE WOULD WE HAVE TO,
6	PRIOR TO POSTING, HAVE THE DEFINEMENT OF THE
7	OBJECTIVE CRITERIA. WE CAN HAVE A TELEPHONIC
8	MEETING SO WE DON'T HOLD UP THE ENTIRE POSTING OF
9	THIS WHOLE RFA. GO OVER THIS, SO, DR. PULIAFITO,
10	YOU'LL SEE THE ACTUAL CRITERIA BEFORE THAT IS POSTED
11	AND IT'S RELEASED. WE'RE TALKING ABOUT IN THE NEXT
12	COUPLE OF WEEKS. WE'LL POST THIS IMMEDIATELY.
13	DR. CSETE: IT HAS TO BE THE NEXT COUPLE
14	OF WEEKS FOR US TO BE ON TIME OF ALL OF THE SCHEDULE
15	OF GRANTS POSTINGS AND REVIEWS THAT WE HAVE THIS
16	YEAR.
17	MR. SHEEHY: THE ONLY THING I MIGHT
18	SUGGEST IS COULD YOU I KNOW THAT PEOPLE REALLY
19	CARE ABOUT THIS. IF YOU COULD APPOINT A COUPLE OF
20	SUBCOMMITTEE MEMBERS SO THAT WE GET SOME OF THESE
21	YOU KNOW, JUST A COUPLE OF PEOPLE TO WORK WITH STAFF
22	SO WE CAN WE'RE NOT GOING TO SETTLE THIS ALL 29
23	OF US. SO IF WE CAN GET TWO VOLUNTEERS MY THING
24	IS WE HAVE TWO VOLUNTEERS. I THINK EVERYBODY'S
25	MOTIVATION HERE

1	CHAIRMAN KLEIN: WHAT ABOUT, DR. FRIEDMAN,
2	WOULD YOU VOLUNTEER?
3	DR. FRIEDMAN: SURE.
4	CHAIRMAN KLEIN: JEFF, WILL YOU VOLUNTEER?
5	MR. SHEEHY: SURE.
6	CHAIRMAN KLEIN: SO I'LL FOLLOW THAT
7	SUGGESTI ON.
8	(SIMULTANEOUS DISCUSSION)
9	CHAIRMAN KLEIN: SINCE WE CAN'T HAVE
10	MR. SHEEHY: I DON'T HAVE TO BE ON IT. I
11	JUST THINK THAT IF HE'S WILLING TO DO IT.
12	DR. PULIAFITO: I'LL DO IT WITH DR.
13	FRI EDMAN.
14	(APPLAUSE.)
15	CHAIRMAN KLEIN: OKAY. THANK YOU. AND SO
16	WE HAVE A MOTION THAT'S ON THE FLOOR, BUT IN
17	IMPLEMENTING THIS MOTION MADE A STATEMENT THAT
18	LEGALLY WE HAVE TO HAVE THE CRITERIA IN PLACE BEFORE
19	WE POST, SO I'M COMMITTING TO CALL A TELEPHONIC
20	BOARD MEETING TO REVIEW THAT CRITERIA AS SOON AS
21	POSSIBLE. AND WE HAVE A SUBCOMMITTEE TO WORK WITH
22	THE STAFF TO GET OBJECTIVE CRITERIA.
23	WITH THAT SAID, PUBLIC COMMENT?
24	MR. CUMMINGS: I'M STILL BRIAN CUMMINGS,
25	UC IRVINE. I WOULD JUST RECOMMEND THAT WHEN YOU
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	1 JJ <i>I</i>

1	CONSIDER THIS, THAT YOU SWITCH THE NUMBER OF PEOPLE
2	THEN AND HAVE THREE EXPERTS BEING THE REVIEWERS AND
3	THEN TWO PEOPLE BEING THE STAFF MEMBERS SO THAT THE
4	SCIENTISTS OUT THERE REALIZE THAT THE MAJORITY OF
5	THE INPUT IS COMING FROM THE UNBIASED EXPERTS, AND
6	THEN THEY'RE GETTING GUIDANCE FROM THE CIRM STAFF.
7	CHAIRMAN KLEIN: OKAY. I'M GOING TO STAY
8	WITH MY MOTION, BUT I DEEPLY RESPECT YOUR
9	SUGGESTION. THE STAFF HAS WORKED VERY HARD ON THIS.
10	DR. PIZZO: CALL THE QUESTION, PLEASE.
11	CHAIRMAN KLEIN: LET ME CALL THE QUESTION.
12	AND CAN WE HAVE A ROLL CALL VOTE, PLEASE.
13	MS. KING: ROBERT PRICE.
14	DR. PRICE: YES.
15	MS. KING: GORDON GILL.
16	DR. GILL: YES.
17	MS. KING: SUSAN BRYANT.
18	DR. BRYANT: YES.
19	MS. KING: KIM WITMER.
20	DR. WITMER: YES.
21	MS. KING: MARCY FEIT.
22	MS. FEIT: YES.
23	MS. KING: MICHAEL FRIEDMAN.
24	DR. FRIEDMAN: YES.
25	MS. KING: LEEZA GIBBONS.
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	DARRISTERS REPORTING SERVICE
1	MS. GIBBONS: YES.
2	MS. KING: MICHAEL GOLDBERG.
3	MR. GOLDBERG: YES.
4	MS. KING: SAM HAWGOOD.
5	DR. HAWGOOD: YES.
6	MS. KING: BOB KLEIN.
7	CHAIRMAN KLEIN: YES.
8	MS. KING: SHERRY LANSING.
9	MS. LANSING: YES.
10	MS. KING: ED PENHOET.
11	DR. PENHOET: YES.
12	MS. KING: PHIL PIZZO.
13	DR. PI ZZO: YES.
14	MS. KING: CLAIRE POMEROY.
15	DR. POMEROY: YES.
16	MS. KING: FRANCISCO PRIETO.
17	DR. PRI ETO: YES.
18	MS. KING: CARMEN PULIAFITO.
19	DR. PULIAFITO: YES.
20	MS. KING: ROBERT QUINT.
21	DR. QUINT: YES.
22	MS. KING: JEANNIE FONTANA.
23	DR. FONTANA: YES.
24	MS. KING: DUANE ROTH.
25	MR. ROTH: YES.
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1	MS. KING: JOAN SAMUELSON.
2	MS. SAMUELSON: YES.
3	MS. KING: DAVID SERRANO-SEWELL.
4	MR. SERRANO-SEWELL: YES.
5	MS. KING: JEFF SHEEHY.
6	MR. SHEEHY: YES.
7	MS. KING: JONATHAN SHESTACK.
8	MR. SHESTACK: YES.
9	MS. KING: AND OSWALD STEWARD.
10	DR. STEWARD: YES.
11	MS. KING: AND THAT MOTION CARRIES.
12	CHAIRMAN KLEIN: THANK YOU VERY MUCH. I
13	DEEPLY APPRECIATE IT. AND I THINK WE SHOULD GIVE A
14	HAND TO THE STAFF FOR ALL THE EFFORT THEY PUT INTO
15	THI S.
16	(APPLAUSE.)
17	CHAIRMAN KLEIN: VERY QUICKLY. I WANT TO
18	MOVE TO ITEM 13, DISEASE TEAMS. WE'VE SEEN THIS,
19	DISCUSSED THIS BEFORE. ARE WE PREPARED TO DISCUSS
20	DI SEASE TEAMS?
21	MR. SERRANO-SEWELL: BOB, JUST ONE MOMENT.
22	BEFORE WE DO THAT, I WANTED TO MAKE A QUICK
23	ANNOUNCEMENT. YOU AND I HAD SPOKEN, AND I HAD THE
24	PLEASURE OF SPEAKING WITH PRESIDENT TROUNSON
25	BRIEFLY, AND I WANTED TO SHARE WITH MY COLLEAGUES.
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1	THIS IS COMING SORT OF FROM THE FACILITIES WORKING
2	GROUP.
3	WITHIN THE NEXT 60 DAYS OR SO, WE'RE GOING
4	TO CONVENE A MEETING, GET AN UPDATE OF WHERE THINGS
5	STAND WITH THE GRANTS, ADDRESS SOME OTHER ISSUES,
6	BUT THAT'S JUST SORT OF HEADS UP AS TO WHAT'S COMING
7	DOWN THE ROAD. SO STAFF, THEY DID A WORKSHOP WITH
8	GMP'S, SO THERE ARE THINGS TO DO WITH THE WORKING
9	GROUP. THAT'S ALL THAT NEEDS TO BE SAID ABOUT THAT.
10	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
11	THANK YOU FOR THE HUGE AMOUNT OF DEDICATION YOU PUT
12	INTO THAT EFFORT AND THE TREMENDOUS PROGRESS ALL THE
13	INSTITUTIONS ARE MAKING.
14	ITEM NO. 13, CONCEPT PLAN. DR. TROUNSON,
15	WHO WILL ADDRESS THIS?
16	DR. TROUNSON: DR. STEFFEN.
17	DR. STEFFEN: I THINK EVERYBODY NEEDS A
18	DEEP BREATH. MR. CHAIRMAN, BOARD MEMBERS, STAFF,
19	AND MEMBERS OF THE AUDIENCE, TODAY I WOULD LIKE TO
20	PRESENT THE CONCEPT PLAN FOR THE DISEASE TEAM
21	RESEARCH AWARD. FOR JUST ONE MINUTE, I WOULD LIKE
22	TO RECOGNIZE, ALTHOUGH I AM SPEAKING TO YOU TODAY,
23	THIS REALLY WAS AN EFFORT OF THE ENTIRE SCIENCE
24	TEAM. THERE WERE MANY LITTLE WHAT I CALL TIGER
25	TEAMS THAT PICKED OUT SPECIFIC BUSINESS PROCESSES
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1	AND WORKED ON DEVELOPING THESE. YOU WILL ALSO SEE A
2	LOAN PROGRAM THAT WILL BE BROUGHT FORTH IN JANUARY,
3	AND ALL THESE FOLKS HAVE CONTRIBUTED TO THIS
4	I NI TI ATI VE.
5	THIS DIAGRAM IS THE OUTLINE OF THE CIRM'S
6	CORE RESEARCH INITIATIVES. THE ARROWS AT THE TOP
7	ILLUSTRATE THE TYPICAL PATH THAT A THERAPY WOULD
8	TAKE FROM DISCOVERY TOWARD CLINICAL TESTING. NOW,
9	THE CLINICAL PROGRAMS THAT COMPRISE CIRM'S
10	TRANSLATIONAL RESEARCH PROGRAM ARE THE TOP FOUR BARS
11	IN THE DIAGRAM. THE DISEASE TEAMS INITIATIVE IS
12	REPRESENTED TWICE THERE, SO THERE ARE THREE
13	TRANSLATIONAL CORE INITIATIVES GOING FORWARD.
14	BASIC BIOLOGY AND INNOVATION INITIATIVE IS
15	THE GREEN BAR AT THE BOTTOM. YOU WILL BE HEARING A
16	CONCEPT PROPOSAL FROM DR. GRIESHAMMER REGARDING THIS
17	INITIATIVE IMMEDIATELY FOLLOWING.
18	THE DISEASE TEAM INITIATIVE IS THE FOCUS
19	OF THE DISCUSSION TODAY. AND THE FIRST ROUND OF
20	THIS INITIATIVE BEGINS AT LATE DISCOVERY AND ENDS IN
21	SUBMISSION OF AN APPROVABLE INVESTIGATIONAL NEW DRUG
22	APPLICATION OR IND. THE FILING OF AN IND IS THE
23	LAST REGULATORY STEP PRIOR TO BEGINNING TESTING IN
24	HUMANS.
25	NOW, AS THE FIELD OF STEM CELL THERAPY
	242
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1	DEVELOPMENT MATURES, SUBSEQUENT ROUNDS OF THE
2	DISEASE TEAM RESEARCH AWARDS MAY INCLUDE EARLY
3	CLINICAL TRIALS. IN THIS FIRST ROUND OF DISEASE
4	TEAM AWARDS, IF A PROJECT TEAM WERE TO SUCCESSFULLY
5	FILE AN APPROVABLE IND WITHIN A SHORTER PERIOD OF
6	TIME, CIRM WOULD CONSIDER FUNDING THE CONTINUATION
7	OF THAT PROJECT THROUGH A SUPPLEMENTAL PROGRAM TO
8	BEGIN THOSE CLINICAL STUDIES. WE'LL ADDRESS THIS
9	LATER IN THE CONCEPT PROPOSAL DISCUSSION.
10	THE KEY GOAL OF THIS PROGRAM IS FOR TEAMS
11	TO PRODUCE AN APPROVABLE IND WITHIN FOUR YEARS OF
12	THE PROJECT START. IT'S BY THIS MEASURE THAT CIRM
13	WILL KNOW IF THE INITIATIVE HAS BEEN SUCCESSFUL.
14	A SECOND GOAL IS TO MOVE THERAPIES TOWARD
15	THE CLINIC. AND FINALLY, TO CONTINUE TO DEVELOP
16	THERAPEUTICS FOR WHICH THERE IS AN UNMET MEDICAL
17	NEED.
18	THE SCOPE OF THE RESEARCH AWARDS HAS BEEN
19	CRAFTED TO ACHIEVE THAT GOAL OF PRODUCING APPROVABLE
20	IND'S WHILE ALSO HELPING PAVE THE PATH TO THE CLINIC
21	FOR CELL THERAPIES. I THINK THE POINT WAS MADE
22	EARLIER TODAY THAT, ALTHOUGH YOU MIGHT BE FUNDING AN
23	EFFORT ON A VERY SPECIFIC DISEASE, THAT ADVANCE OF
24	THE SCIENCE IN A PARTICULAR DISEASE CAN HELP ADVANCE
25	THE FIELD BROADLY.

1	SO FOR THIS REASON, CIRM PROPOSES A BROAD
2	SCOPE OF DISEASES AND CELL TYPES. THE INITIATIVE IS
3	OPEN TO PROPOSALS IN ALL DISEASE AREAS AND INJURIES.
4	CIRM SEEKS PROPOSALS TO DEVELOP CLINICALLY
5	COMPETITIVE, NOVEL THERAPEUTICS FOR WHICH THERE IS
6	AN UNMET MEDICAL NEED. AND CIRM WILL SUPPORT
7	RESEARCH USING THE FULL SPECTRUM OF PLURIPOTENT
8	CELLS WITH AN EMPHASIS ON EMBRYONIC STEM CELLS AND
9	WILL CONSIDER MULTIPOTENT AND PROGENITOR STEM CELL
10	TYPES.
11	NOW, THERE'S ONE AREA IN WHICH THIS
12	INITIATIVE WILL BE MORE STRINGENT, AND THAT'S IN THE
13	SCIENTIFIC MATURITY OF THE PROJECT. IN ORDER TO
14	MEET OUR GOAL OF APPROVABLE IND'S, SUITABLE PROJECTS
15	WILL HAVE AT A MINIMUM REPRODUCIBLE EVIDENCE OF
16	DISEASE-MODIFYING ACTIVITY. PROJECTS THAT ARE
17	FURTHER ALONG IN THE DEVELOPMENT SPECTRUM, EITHER IN
18	PRECLINICAL RESEARCH OR IN PRECLINICAL DEVELOPMENT,
19	ARE ALSO SUITABLE FOR THESE AWARDS. SO YOU NEED TO
20	BE AT THAT EARLY STAGE TO GET IN THE GAME. YOU CAN
21	BE LATER ALONG.
22	FOR THIS INITIATIVE CIRM HAS ATTEMPTED TO
23	TAILOR THE ELIGIBILITY REQUIREMENTS TO SUPPORT
24	TEAM-BASED RESEARCH. BASED ON THE RECOMMENDATIONS
25	FROM THE ICOC TASK FORCE AND THE REQUIREMENTS
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1	EXPRESSED BY OUR APPLICANTS AND GRANTEES, THIS
2	RESEARCH AWARD WILL ALLOW FOR A PRINCIPAL
3	INVESTIGATOR AND UP TO TWO ADDITIONAL CO-PRINCIPAL
4	I NVESTI GATORS.
5	THE PI WILL HOLD THE SCIENTIFIC AND
6	FINANCIAL ACCOUNTABILITY FOR THE TOTAL PROJECT. FOR
7	REPORTING PURPOSES, SEPARATE BUDGETS WILL BE
8	PRODUCED FOR CO-PRINCIPAL INVESTIGATORS. WE FEEL
9	THIS IS A GOOD COMPROMISE BETWEEN MAINTAINING A
10	SINGLE POINT OF ACCOUNTABILITY FOR GRANT MONITORING
11	PURPOSES AND OUR GRANTEES' DESIRE TO BE RECOGNIZED
12	FOR THE RESEARCH AND FUNDING THAT THEY MANAGE.
13	A 30-PERCENT MINIMUM EFFORT WILL APPLY TO
14	PI'S AND A 20-PERCENT MINIMUM TO THE CO-PI'S. I
15	THINK IT'S WORTH MENTIONING THAT WHEN THE ICOC TASK
16	FORCE BROUGHT FORTH ITS RECOMMENDATIONS, THERE WAS
17	THE POTENTIAL FOR CIRM PRESIDENT TO GRANT AN
18	EXCEPTION TO THE MINIMUM PERCENT REQUIREMENT FOR
19	SENIOR INVESTIGATORS.
20	AN INVESTIGATOR MAY ONLY APPLY ONCE AS A
21	PRINCIPAL INVESTIGATOR AND SUBMIT THEIR NAME ON NO
22	MORE THAN TWO TOTAL APPLICATIONS AS A PI OR CO-PI.
23	AND THEN AS A REMINDER FROM OUR PREVIOUS MEETING, A
24	PI MAY APPLY FOR EITHER A DISEASE TEAM OR AN EARLY
25	TRANSLATIONAL AWARD.

1	BOTH NONPROFIT AND FOR-PROFIT INSTITUTIONS
2	ARE ELIGIBLE TO APPLY TO THIS INITIATIVE. AND AS WE
3	HAVE JUST DISCUSSED, CIRM WILL NOT IMPOSE
4	INSTITUTIONAL LIMITS ON THE NUMBER OF
5	PREAPPLICATIONS FOR THIS INITIATIVE. WE DISCUSSED
6	THE PREAPPLICATION REVIEW PROCESS. WE BELIEVE THAT
7	THE OUTCOME WILL BE THE MOST PROMISING, COMPETITIVE,
8	AND RESPONSIVE APPLICATIONS. WE'LL TARGET 30 TO 40
9	INVITATIONS TO SUBMIT FULL APPLICATIONS, AND THE
10	PREAPPLICATIONS WILL BE EVALUATED ON THE BASIS OF
11	THEIR SIGNIFICANCE AND IMPACT AND ALSO THEIR
12	FEASIBILITY AND TIMELINE. THESE ARE TWO OF THE
13	STANDARD REVIEW CRITERIA THAT FORM THE FOUNDATION OF
14	OUR GRANTS WORKING GROUP PROCESS.
15	CIRM ANTICIPATES MAKING 10 TO 12 AWARDS IN
16	THIS FIRST ROUND OF THE DISEASE TEAM RESEARCH
17	INITIATIVE. INDIVIDUAL AWARDS WILL BE FOR UP TO
18	FOUR YEARS WITH TOTAL JUSTIFIABLE COSTS OF UP TO \$20
19	MILLION EACH. CIRM ANTICIPATES THAT THE BULK OF THE
20	PROJECT COSTS WILL OCCUR IN THE PRECLINICAL
21	DEVELOPMENT PHASE WHERE THERE'S A SIGNIFICANT
22	STEP-UP IN FUNDING. THE PROGRAM WILL TARGET UP TO
23	\$210 MILLION FOR THIS RFA.
24	WE SPOKE ABOUT EARLIER YESTERDAY THAT
25	ADDITIONAL FUNDS AVAILABLE OUTSIDE CIRM MAY BE
	3.16

1	AVAILABLE TO SOME TEAMS VIA THE COLLABORATIVE
2	FUNDING PARTNER PROGRAM. GROUPS THAT HAVE COMMITTED
3	TO DATE AND HAVE EARMARKED FUNDS FOR THIS ARE THE
4	STATE OF VICTORIA, THE CANADIAN STEM CELL
5	CONSORTIUM, AND THE JUVENILE DIABETES RESEARCH
6	FOUNDATI ON.
7	THE AWARD INSTRUMENTS FOR THIS PROGRAM
8	WILL BE A CIRM GRANT AND FOR FOR-PROFIT INSTITUTIONS
9	A LOAN.
10	I'D LIKE TO GIVE YOU A BRIEF UPDATE ON THE
11	STATUS OF THE LOAN PROGRAM. STAFF WILL BE
12	PRESENTING TO YOU THE RECOMMENDATIONS FROM THAT
13	FINANCE SUBCOMMITTEE AT THE JANUARY 2009 ICOC
14	MEETING. IT'S CIRM'S EXPECTATION THAT THE LOAN
15	PROGRAM WILL BE AVAILABLE FOR THE DISEASE TEAM
16	RESEARCH AWARDS. THE POLICY PROVISIONS ARE
17	INCORPORATED INTO THE CIRM LOAN ADMINISTRATION
18	POLICY, WHICH WILL BE AVAILABLE ALSO FOR REVIEW IN
19	JANUARY 2009. ANY DISEASE TEAM RFA-SPECIFIC
20	CONSIDERATIONS WILL BE DISCUSSED IN JANUARY.
21	BECAUSE OF THE MAGNITUDE OF THESE AWARDS
22	AND CIRM'S COMMITMENT TO STEWARDSHIP OF THE FUNDS,
23	BOTH CIRM AND GRANTEES WILL BE INVOLVED IN THE
24	ACTIVE MANAGEMENT OF THESE PROJECTS. CIRM'S ROLE
25	WILL EXPAND IN MANAGEMENT ACTIVITIES. SO IN
	247

1	ADDITION TO REQUIRING THE ANNUAL PROGRESS REPORTS,
2	DISEASE TEAM GRANTEES WILL NEED TO PARTICIPATE IN
3	EVALUATION MEETINGS.
4	AN EVALUATION MEETING WOULD OCCUR AT TWO
5	POINTS IN THESE PROJECTS, BETWEEN THE PRECLINICAL
6	RESEARCH AND PRECLINICAL DEVELOPMENT PHASES WHERE
7	SIGNIFICANT STEP-UP IN FUNDING HAPPENS, OR WHEN A
8	TEAM IS READY TO PREPARE REGULATORY FILING FOR
9	FIRST-IN-MAN STUDIES. THESE ARE THE KEY DECISION
10	POINTS IN DEVELOPMENT PROJECTS, AT WHICH TIME A
11	DETERMINATION IS MADE TO GO FORWARD OR TO
12	DISCONTINUE. AND THOSE ARE REPRESENTED BY THE LIGHT
13	GRAY ARROWS ON THE DIAGRAM.
14	NOW, AT THIS EVALUATION MEETING, GRANTEES
15	WOULD PRESENT TO THE CIRM PRESIDENT AND AN EXPERT
16	ADVISORY COMMITTEE. THE MEETING WOULD BE A
17	DATA-DRIVEN MEETING, AND THE QUESTIONS ASKED WOULD
18	BE DO THE DATA SUPPORT GOING INTO PRECLINICAL
19	DEVELOPMENT OR GOING INTO FIRST-IN-MAN STUDIES? THE
20	OUTCOME OF THE MEETING WOULD BE A RECOMMENDATION
21	FROM THE ADVISORY COMMITTEE TO THE PRESIDENT OF
22	CIRM. AND POSSIBLE OUTCOMES WOULD INCLUDE
23	CONTINUATION OF SUCCESSFUL PROJECTS, REDIRECTION, IF
24	IT'S POSSIBLE, WITHIN THE FRAMEWORK AND SCOPE OF THE
25	ORIGINAL PROPOSAL, OR DISCONTINUATION.
	240

1	A GO/NO-GO DETERMINATION WOULD MADE BY
2	CIRM PRESIDENT IN CONSULTATION WITH THE STAFF. IN
3	THIS FIRST ROUND, IT'S FEASIBLE THAT WE COULD SEE
4	PROJECTS THAT MEET THE MILESTONE OF AN APPROVABLE
5	IND IN A SHORTER THAN FOUR-YEAR TIMEFRAME, AND THEY
6	WOULD BE READY TO ENTER CLINICAL STUDIES.
7	I BELIEVE, MR. CHAIRMAN, AT THIS TIME YOU
8	WANTED TO DISCUSS THE POSSIBLE FINANCING FOR THOSE
9	PROJECTS THAT WERE READY TO MOVE INTO CLINICAL
10	STUDI ES.
11	CHAIRMAN KLEIN: DO YOU WANT TO MAKE
12	COMMENTS ON THAT DIRECTLY? I WILL MAKE SOME
13	COMMENTS, AND LET'S SEE IF YOU HAVE REACTION TO
14	THOSE COMMENTS.
15	SO ONE OF THE ISSUES IS THAT AS WE GO
16	DOWNSTREAM, IF WE HAVE THESE GRANTS THAT GET TO A
17	PHASE I APPROVAL EARLIER THAN THIS TWO-YEAR TIME
18	PERIOD, IF, WHEN WE DO THE APPROVAL OF THESE DISEASE
19	TEAM AWARDS, WE HAVE ACCESS TO ADDITIONAL FUNDS, WE
20	COULD SET ASIDE 30 MILLION, \$40 MILLION IN A
21	POTENTIAL POOL THAT WOULD BE AVAILABLE FOR GRANTS
22	THAT HAVE BEEN APPROVED BY US THAT HAD JUST REACHED
23	PHASE I EARLIER THAN THE PERIOD, AND THEY WOULD THEN
24	HAVE A CLINICAL APPLICATION THEY WOULD TAKE TO THE
25	ADVISORY GROUPS, HAVE A REVIEW OF THAT CLINICAL
	0.40

1	APPLICATION AND, WITHIN THE LIMITATIONS OF FUNDING
2	WE HAD APPROVED, BE PREPARED TO ALLOW THEM TO GO
3	FORWARD ON THAT WITH FULL FDA APPROVALS, FULL IRB
4	APPROVALS, ETC.
5	NOW, IF, IN FACT, IT IS THE DESIRE OF THIS
6	ORGANIZATION TO HOLD THEM UP, AND IF THEY GET A
7	PHASE I APPROVAL, TO HAVE THEM WAIT UNTIL WE DO A
8	SEPARATE CLINICAL ROUND TO GET CLINICAL FUNDS, THAT
9	IS ANOTHER OPTION. SO THIS IS AN OPTION.
10	SECONDLY, THERE'S AN ISSUE THAT IF THEY
11	GET TO A PHASE I TRIAL EARLY AND HAVE ADDITIONAL
12	FUNDS LEFT OVER, CAN THEY SUBMIT TO THE ADVISORY
13	GROUP A CLINICAL PLAN AND USE THE REMAINING FUNDS TO
14	PROCEED SUBJECT TO THAT LIMITATION OF FUNDS?
15	SO THESE ARE TWO POINTS THAT ARE IMPORTANT
16	BECAUSE WHAT WE NEED TO UNDERSTAND IS THAT THIS IS,
17	AS CERTAINLY MANY OF THE MEMBERS OF THIS BOARD
18	UNDERSTAND MUCH BETTER THAN I DO, THIS IS NOT A
19	STATIC SYSTEM WHERE EVERYTHING IS GOING TO HAPPEN IN
20	EXACTLY FOUR YEARS. SO WE NEED TO LOOK DOWNSTREAM
21	AND SAY WE HAVE TWO DIFFERENT CASES: A, WE MIGHT
22	SET ASIDE SEPARATE FUNDS FOR CLINICAL. WE MIGHT
23	ALLOW THEM WITH AN ADVISORY GROUP APPROVAL OF A
24	CLINICAL SUBMISSION WITH THE STAFF SUPPORT TO GO
25	FORWARD INTO CLINICAL TO THE EXTENT OF ANY SAVINGS.
	250

1	SO THOSE FUNDING OPTIONS ARE JUST
2	ADDITIONAL ITEMS WHICH YOU MAY ELECT TO ADDRESS AT
3	THIS TIME OR JUST PUT THEM ON THE TABLE AND ADVANCE
4	WITH THE DISEASE TEAM AWARDS WITHOUT DISCUSSING
5	THOSE OPTIONS.
6	DR. TROUNSON: MR. CHAIR, I WONDER IF I
7	COULD JUST SIMPLIFY WHAT YOU JUST SAID. ONE, IF
8	THEY MAKE THE IF THEY'RE ABLE TO GET TO A
9	CLINICAL TRIAL WITHIN THE PERIOD OF THE TIME OF THE
10	GRANT, WITHIN THE FOUR YEARS, IN AN UNEXPECTEDLY
11	RAPID RATE, THAT, SUBJECT TO THE ADVICE OF THE
12	ADVISORY BOARD ON THAT PROJECT, THAT MONEY COULD BE
13	CONVERTED TO ASSIST THEM IN INITIATION OF CLINICAL
14	TRI ALS.
15	SECONDLY, I THINK, IF IT WARRANTS THAT, IF
16	THE COMMITTEE WARRANTED IT, THAT WE WOULD BE ABLE TO
17	COME BACK TO THE ICOC WITH A POSSIBLE
18	SUPPLEMENTATION BY A PROCESS OF MAKING AN
19	APPLICATION TO THE ICOC AT THE NEXT MEETING OR, IF
20	THAT'S TOO FAR AWAY, IN A SPECIALLY CONVENED
21	OPPORTUNI TY.
22	BUT I THINK IF YOU SAY IF THE FUNDS COULD
23	BE CONVERTED, THE ORIGINAL GRANT COULD BE CONVERTED
24	TO THE CLINICAL TRIAL, I THINK THAT, SUBJECT TO THE
25	APPROVAL OF THE MONITORING TEAM OR APPROVAL TEAM,

1	AND THEN IF IT REQUIRES ADDITIONAL SUPPLEMENTATION,
2	IF WE CAME BACK TO THE BOARD WITH THE CASE ENDORSED
3	BY THAT COMMITTEE, THEN I THINK THAT WOULD BE AN
4	EASIER PROCESS FOR THE BOARD TO UNDERSTAND.
5	CHAIRMAN KLEIN: I LIKE YOUR DESCRIPTION.
6	I WAS TRYING TO LISTEN AND DESCRIBE THE PROCESS YOU
7	MORE APPROPRIATELY DESCRIBED. OKAY. SO I THINK
8	THAT'S THE PROPOSAL. IS THERE DISCUSSION?
9	MR. SHEEHY: CAN I MAKE THE MOTION TO JUST
10	ADOPT THIS AS WRITTEN, AND WE CAN COME BACK ON THIS
11	OTHER ISSUE BECAUSE THIS IS DOWN THE ROAD, AND WE
12	DON'T HAVE ANY PAPER TRAIL. AND I AM EXHAUSTED.
13	I'VE BEEN HERE SINCE YESTERDAY, AND I'M ABOUT TO
14	LEAVE. I THINK WE BETTER START FIGURING OUT WHAT
15	WE'RE GOING TO NEED TO DO BEFORE WE LOSE QUORUM.
16	CHAIRMAN KLEIN: THAT'S FINE.
17	MR. SHEEHY: I'D LIKE TO MOVE TO APPROVE
18	THI S.
19	DR. STEWARD: SECOND.
20	CHAIRMAN KLEIN: MOVED AND SECONDED. ANY
21	ADDITIONAL COMMENT? OKAY. ANY PUBLIC COMMENT?
22	MR. BASHAM: DARYL BASHAM AGAIN. THIS IS
23	THE LAST TIME I'LL BOTHER YOU TODAY. WHAT WE HAVE
24	IS SOME DEFINITIONS WE THINK WILL WORK WELL FOR THE
25	BIOTECHNOLOGY INDUSTRY. YOU SHOULD HAVE THEM IN
	352

352

1	YOUR FOLDER. IT SAYS PUBLIC COMMENT.
2	FOR OUR PURPOSES, WE'D LIKE THE
3	DEFINITIONS FOR PRINCIPAL INVESTIGATOR OF AN
4	ACADEMIC INSTITUTION SEPARATED FROM WHAT WE CALL A
5	PD, OR PUBLIC DEVELOPER, OF A COMMERCIAL ENTITY.
6	THE REASON WHY WE'D WANT THESE TWO DEFINITIONS, IT
7	SEEMS LIKE THE FORCE OF OR THE THRUST OF THE
8	BACKGROUND FOR A PI SEEMS TO BE A STRONG PUBLIC
9	HIS OR HER STRONG PUBLICATION TRACK RECORD, THE FACT
10	THAT THEY HAVE ADVANCED DEGREES, AND THAT THEY CAN
11	MANAGE A PARTICULAR PROJECT.
12	FOR PRODUCT DEVELOPERS, WE BELIEVE THAT
13	THE BIGGEST DIFFERENCE WOULD BE THAT THE PD WANTS TO
14	PUT A PRODUCT INTO DEVELOPMENT OR INTO THE STREAM OF
15	COMMERCE.
16	WE BELIEVE IF WE CAN HAVE THOSE
17	DEFINITIONS PLACED INTO THE RECORD OR DEFINITIONS
18	CONSIDERED, THAT WOULD DO FAR BETTER FOR INDUSTRIAL
19	APPLI CATI ONS.
20	LAST, WE HAVE CO-PI'S AND CO-PD'S.
21	ANYWAY, CO-PI'S AND CO-PD'S, WHAT WE SEE NOW FROM
22	THE PROPOSAL SAYS AROUND 20 PERCENT FOR THEIR
23	PARTICULAR TIME. WHAT WE'RE ASKING FOR IS 5
24	PERCENT. WE UNDERSTAND THAT WILL PROBABLY BE TOO
25	LOW, BUT CERTAINLY WE WOULD WANT SOME MORE
	353

1	FLEXIBILITY INTO HOW MUCH TIME A CO-PI OR CO-PD
2	WOULD BE INVOLVED IN A PARTICULAR RFA.
3	SO, AGAIN, WE'D LIKE YOU TO CONSIDER THESE
4	THREE DEFINITIONS. THANK YOU VERY MUCH FOR
5	LI STENI NG.
6	CHAIRMAN KLEIN: THANK YOU.
7	DR. CSETE: I'D LIKE TO RESPOND TO THAT.
8	A PRODUCT DEVELOPER CAN CERTAINLY BE PART OF THE
9	TEAM, BUT IT'S OUR CONSIDERED JUDGMENT THAT THE PI
10	SHOULD NOT BE A PRODUCT DEVELOPER. THE PI NEEDS NOT
11	ONLY AN ADVANCED DEGREE, BUT THE APPROPRIATE
12	EXPERTISE TO LEAD THE PROJECT.
13	IN TERMS OF THE PERCENT EFFORT, THIS,
14	AGAIN, WAS MADE MINDFUL OF HOW AGGRESSIVE THESE
15	DISEASE TEAM AWARDS ARE MEANT TO BE. WE REALLY WANT
16	A LARGE EFFORT. WE WANT PEOPLE IN THE TRENCHES
17	DRIVING THESE GRANTS AS THE PI AND CO-PI BECAUSE
18	THAT IS GOING TO LEAD TO THE SUCCESS IN A SHORT
19	PERIOD OF TIME.
20	MR. ROTH: MR. CHAIR, I WANT TO STRONGLY
21	DISAGREE WITH THAT. I THINK YOU CAN HAVE LEADERSHIP
22	COMING OUT OF EITHER SIDE, PARTICULARLY THE PRODUCT
23	DEVELOPMENT AREA. THOSE OF US THAT HAVE WORKED IN
24	PRODUCT DEVELOPMENT UNDERSTAND THERE'S A VERY LARGE
25	DIFFERENCE BETWEEN A RESEARCH PRINCIPAL INVESTIGATOR

1	AND SOMEBODY THAT'S GOING TO LEAD PRODUCT
2	DEVELOPMENT, WHICH IS WHAT MANY AROUND THE TABLE ARE
3	VERY INTERESTED IN. AND I WOULD JUST KEEP A VERY
4	OPEN MIND ABOUT WHO CAN LEAD AND WHO CAN'T.
5	AND THE IMPORTANCE OF THE ADVANCED
6	DEGREES, SOME OF THE BRIGHTEST PEOPLE I EVER WORKED
7	WITH WERE EXTREMELY CREATIVE IN GETTING PRODUCTS TO
8	PATIENTS, AND THEY JUST DIDN'T HAVE THE PUBLICATION
9	RECORDS OR ANYTHING CLOSE TO THAT.
10	SO I WOULD ENCOURAGE US TO THINK ABOUT
11	THIS VERY CAREFULLY.
12	CHAIRMAN KLEIN: DR. PIZZO, DID YOU HAVE A
13	COMMENT?
14	DR. PIZZO: I WON'T COMMENT ON THAT. I
15	APPRECIATE DUANE'S POINT. I DO WANT TO SAY THAT,
16	DESPITE MY EARLIER COMMENTS ABOUT PERCENT EFFORT, I
17	DO THINK THAT THIS IS AN AREA WHERE, GIVEN THE SIZE
18	AND MAGNITUDE OF THESE GRANTS, THAT THE
19	RECOMMENDATIONS ARE VERY APPROPRIATE. AND THAT
20	WHILE I RECOGNIZE THAT THERE MAY BE PRESIDENTIAL
21	DISCRETION, I THINK A HIGH ACCOUNTABILITY HERE IS
22	REALLY IMPORTANT. SO I SUPPORT THAT.
23	CHAIRMAN KLEIN: OKAY. SO IS THERE A
24	MOTION?
25	MR. HARRISON: THERE'S A MOTION PENDING
	355

1	MADE BY JEFF SHEEHY AND SECONDED BY OS STEWARD TO
2	APPROVE THE DISEASE TEAM CONCEPT PROPOSAL.
3	CHAIRMAN KLEIN: SO THERE ARE SOME
4	SUGGESTIONS ON THE FLOOR. I'M GOING TO TAKE AND
5	FIND OUT DOES ANYONE WANT TO MODIFY THE MOTION FOR
6	ANY OF THE SUGGESTIONS THAT WERE MADE, OR ARE WE
7	GOING WITH THE MOTION AS MADE?
8	MR. ROTH: I'M GOING TO RESPECTFULLY ASK,
9	THOUGH, THAT THERE BE A BALANCE IN CONSIDERATION.
10	AND IF THAT'S GOING TO BE WRITTEN IN, THAT THE PI
11	HAS TO BE AN ACADEMIC LEADER, THEN I WOULD HAVE A
12	PROBLEM. I DON'T SEE THAT. I WANT TO TAKE THE BLAS
13	OUT. AND I HEAR BLAS.
14	CHAIRMAN KLEIN: BETTINA, COULD YOU PLEASE
15	COMMENT.
16	DR. STEFFEN: I DON'T BELIEVE THE INTENT
17	WAS TO EXCLUDE. I BELIEVE THE LANGUAGE IS A PH.D.,
18	M.D., OR EQUIVALENT DEGREE, AND WITH THE APPROPRIATE
19	EXPERIENCE TO LEAD THE PROJECT.
20	DR. TROUNSON: MR. CHAIR, WE'LL MAINTAIN
21	THE FLEXIBILITY I THINK THAT THE BOARD'S ASKING FOR
22	IN THIS REGARD.
23	DR. POMEROY: I HAVE A QUESTION. JUST
24	BEFORE I VOTE ON THIS, CAN YOU JUST REVIEW FOR US ON
25	THE COLLABORATIVE FUNDING PARTNER PROGRAM? I JUST
	254

1	WANT IT CLEAR WHEN WE HAVE GRANTS THAT COME IN WITH
2	THESE COLLABORATORS, HOW THE MONEY WILL WORK. IN
3	OTHER WORDS, HOW DO WE KEEP THE CIRM MONEY DISTINCT
4	FROM THE MONEY OF THE COLLABORATING INSTITUTION AND
5	ENSURE THAT WE'RE IN COMPLIANCE WITH IT ONLY BEING
6	SPENT IN CALIFORNIA?
7	DR. CSETE: SO THIS IS SOMETHING WE'VE
8	WORKED OUT IN THE NEGOTIATIONS WITH THE VARIOUS
9	AGENCIES AND FOUNDATIONS, THAT THE SCIENCE AS A
10	WHOLE IS JUDGED AS A WHOLE RESEARCH INITIATIVE JUST
11	AGAINST ALL THE CALIFORNIA GRANTS WITHOUT ANY
12	SPECIAL CONSIDERATION OF THE GEOGRAPHIC BOUNDARIES.
13	BUT THE BUDGET, HOWEVER, IS MADE WITH THE GEOGRAPHIC
14	BOUNDARIES SO THAT THE WORK DONE IN CALIFORNIA HAS
15	TO BE CLEARLY DESCRIBED, AND THAT WORK IS FUNDED BY
16	CIRM. THE WORK THAT'S DONE BY OUR PARTNERS IS
17	CLEARLY DESCRIBED, THE BUDGET IS GIVEN, AND THAT
18	WORK IS FUNDED BY OUR OUTSIDE COLLABORATORS. IS
19	THAT OKAY?
20	DR. POMEROY: SO WHEN THERE'S A CO-PI WHO
21	IS A NON-CALIFORNIA RESIDENT, SAY, THEY WOULD NOT BE
22	PAID AT ALL BY CIRM DOLLARS.
23	DR. CSETE: CORRECT.
24	CHAIRMAN KLEIN: OKAY. I THINK WE'RE
25	PREPARED TO CALL THIS QUESTION. ALL RIGHT. AND I
	357

1	DON'T THINK WE'RE GOING TO NEED A ROLL CALL VOTE
2	HERE. SO ALL IN FAVOR. OPPOSED? THANK YOU VERY
3	MUCH. THANK THE STAFF FOR THANK YOU, BETTINA,
4	FOR YOUR TREMENDOUS WORK.
5	MS. KING: MR. CHAIR, IS IT TRUE FOR THE
6	RECORD THE MOTION CARRIES?
7	CHAIRMAN KLEIN: THE RECORD SHOWS THAT THE
8	MOTION CARRIES. THANK YOU.
9	DR. FONTANA: I HAVE A VERY IMPORTANT
10	INTERRUPTION. I KNOW A COUPLE PEOPLE ARE GOING TO
11	BE LEAVING SHORTLY, AND I JUST WANTED TO ACKNOWLEDGE
12	THAT I BELIEVE IT'S ED PENHOET'S BIRTHDAY TOMORROW.
13	(APPLAUSE.)
14	CHAIRMAN KLEIN: LET ME ASK VERY QUICKLY
15	HERE.
16	DR. CSETE: BASIC CONCEPT APPROVAL.
17	CHAIRMAN KLEIN: THE BASIC SCIENCE CONCEPT
18	APPROVAL IS NO. 17, RIGHT?
19	DR. GRIESHAMMER: MR. CHAIRMAN, BOARD
20	MEMBERS, I WOULD LIKE TO PRESENT THE CONCEPT
21	PROPOSAL FOR THE BASIC BIOLOGY AWARDS PROGRAM,
22	AGENDA ITEM 17.
23	THE FIELD OF STEM CELL BIOLOGY IS MOVING
24	AT A RAPID PACE, AND IT IS ONE OF THE GOALS OF THE
25	BASIC BIOLOGY INITIATIVE TO FOSTER THIS CUTTING-EDGE
	358

1	RESEARCH. AT THE SAME TIME, CERTAIN HURDLES
2	CONTINUE TO EXIST THAT HAMPER PROGRESS IN
3	UNDERSTANDING AND CONTROLLING STEM CELL FATE. AND
4	CIRM INTENDS TO SUPPORT STUDIES THAT TACKLE THESE
5	SIGNIFICANT AND UNRESOLVED ISSUES.
6	IN ORDER TO ACHIEVE THESE GOALS AND TO
7	PROMOTE BASIC RESEARCH THAT CAN SERVE AS THE
8	KNOWLEDGE BASE FOR ADVANCES IN REGENERATIVE
9	MEDICINE, CIRM HAS IDENTIFIED PRIORITY AREAS FOR
10	FUNDING. THESE PRIORITY AREAS ARE LISTED IN THE
11	CONCEPT PROPOSAL DOCUMENT THAT'S INCLUDED IN YOUR
12	BINDERS, AND I WON'T READ THAT TO YOU RIGHT NOW.
13	BUT I WOULD LIKE TO HIGHLIGHT TWO MAIN AREAS OF
14	FOCUS.
15	ONE OF THESE AREAS OF FOCUS WILL BE ON
16	HUMAN PLURIPOTENT STEM CELL BIOLOGY, WHICH INCLUDES
17	THE STUDY OF HUMAN EMBRYONIC STEM CELLS AND HUMAN
18	INDUCED PLURIPOTENT STEM CELLS. AND WE'RE
19	PARTICULARLY INTERESTED IN HAVING OUR INVESTIGATORS
20	STUDY THE MECHANISMS THAT CONTROL THE SELF-RENEWAL,
21	THE DIFFERENTIATION, AND THE ONCOGENIC POTENTIAL OF
22	THESE PLURIPOTENT STEM CELLS.
23	AS YOU KNOW, REPROGRAMMING HAS GENERATED A
24	LOT OF EXCITEMENT IN THE STEM CELL COMMUNITY AND
25	INCLUDES NOT ONLY REPROGRAMMING OF SOMATIC CELLS
	250

1	BACK TO A PLURIPOTENT STATE, BUT ALSO REPROGRAMMING
2	OF ONE CELL TYPE INTO ANOTHER CELL TYPE, PROCESS
3	TERM TRANSDIFFERENTIATION. AND CIRM INTENDS TO
4	SUPPORT RESEARCH INTO THE MECHANISMS INVOLVED IN ALL
5	TYPES OF CELLULAR REPROGRAMMING.
6	WITH CIRM'S OVERALL MISSION IN MIND,
7	STUDIES WILL BE LIMITED MOSTLY TO HUMAN CELLS AND
8	ONLY IN EXCEPTIONALLY GROUNDBREAKING CASES WILL THE
9	USE OF OTHER MAMMALIAN SYSTEMS BE CONSIDERED.
10	THE ELIGIBILITY CRITERIA FOR PI'S OR
11	PRINCIPAL INVESTIGATORS IS IDENTICAL TO THE ONES
12	USED IN CIRM'S RECENTLY OR IN THE RECENT EARLY
13	TRANSLATION RFA AND HAVE BEEN APPROVED BY THIS BOARD
14	ON RECOMMENDATION BY THE BOARD TASK FORCE.
15	BRIEFLY, THE CIRM BASIC BIOLOGY RESEARCH
16	AWARDS PROGRAM WILL BE OPEN TO PRINCIPAL
17	INVESTIGATORS WITH A PH.D., M.D., OR EQUIVALENT
18	DEGREE WHO ARE AUTHORIZED BY THE APPLICANT
19	INSTITUTION TO CONDUCT THE PROPOSED RESEARCH IN
20	CALI FORNI A.
21	FURTHERMORE, FOR THIS INITIATIVE CIRM
22	REQUIRES A 20-PERCENT MINIMUM EFFORT COMMITMENT BY
23	THE PRINCIPAL INVESTIGATOR. ALTHOUGH, AS DR.
24	STEFFEN ALREADY MENTIONED, UNDER EXTRAORDINARY
25	CIRCUMSTANCES AND AT THE DISCRETION OF THE
	360

1	PRESIDENT, CIRM MAY ALLOW A REDUCED EFFORT FOR
2	SENI OR I NVESTI GATORS.
3	THIS NUMBER OF PERCENT EFFORT IS DRIVEN BY
4	THE URGENCY OF CIRM'S MISSION. THERE ARE HIGH
5	EXPECTATIONS FROM PATIENTS AND FROM TAXPAYERS THAT
6	WE REACH OUR MISSION, AND WE FEEL STRONGLY THAT
7	SUBSTANTIAL LEVELS OF COMMITMENT BY PI'S TO
8	CIRM-FUNDED PROJECTS IS REQUIRED TO HAVE A CHANCE TO
9	REACH CIRM'S GOALS.
10	IN TERMS OF INSTITUTIONAL ELIGIBILITY,
11	BOTH NONPROFIT AND FOR-PROFIT INSTITUTIONS WILL BE
12	ELIGIBLE TO APPLY FOR THIS AWARD.
13	AS DISCUSSED AND APPROVED EARLIER TODAY,
14	CIRM WILL IMPLEMENT A PREAPPLICATION REVIEW
15	PROCEDURE AND WILL NOT IMPOSE INSTITUTIONAL LIMITS
16	ON THE NUMBER OF PREAPPLICATIONS FOR THIS
17	INITIATIVE. AS WAS FURTHER APPROVED, WE WILL HAVE A
18	TELEPHONE APPROVAL OF THE CRITERIA BEFORE THE ACTUAL
19	RELEASE OF THIS RFA.
20	STEM CELL RESEARCHERS FROM OUTSIDE OF
21	CALIFORNIA ACTUALLY I DON'T HAVE TO REPEAT WHAT
22	DR. CSETE ALREADY PRESENTED TO YOU IN TERMS OF THE
23	PROCESS WE WILL USE. THE TARGET RANGE FOR THE
24	INVITATIONS TO APPLY FOR THE BASIC BIOLOGY
25	INITIATIVE WILL BE 50 TO 60 INVITATIONS WHICH WE
	361

1	THINK OUR REVIEWERS CAN REASONABLY HANDLE, AND THEN
2	THE GRANTS WORKING GROUP WILL INDEED REVIEW THOSE 50
3	TO 60 FULL APPLICATIONS.
4	IN ANTICIPATION OF A VERY LARGE APPLICANT
5	POOL FOR THE BASIC BIOLOGY AWARDS, WE DECIDED TO
6	SPLIT THIS INITIATIVE INTO TWO IDENTICAL RFA'S THAT
7	WILL BE RELEASED SEVERAL MONTHS APART. AND EACH
8	INVESTIGATOR CAN ONLY SUBMIT ONE PREAPPLICATION TO
9	EITHER WHAT WILL BE RFA 0807, THE FIRST INSTALLMENT
10	OF THE BASIC BIOLOGY, OR RFA 0902, THE SECOND
11	INSTALLMENT OF THIS INITIATIVE, BUT NOT BOTH.
12	THE FIRST ONE OF THESE RFA'S WHICH WILL BE
13	RELEASED AT THE END OF THIS MONTH PROVIDES THE
14	OPPORTUNITY TO CAPTURE SUCCESSFUL SEED PROJECTS. AS
15	YOU RECALL, THE SEED GRANTS WERE DESIGNED TO ATTRACT
16	INVESTIGATORS NOT ENGAGED IN HUMAN EMBRYONIC STEM
17	CELL RESEARCH INTO THE HUMAN EMBRYONIC STEM CELL
18	FIELD. AND THOSE AWARDS ARE COMING TO AN END NEXT
19	YEAR. AND THE BASIC BIOLOGY AWARDS COULD PROVIDE
20	FURTHER FUNDING FOR EXCEPTIONALLY SUCCESSFUL SEED
21	PROJECTS THAT COMPETE WELL WITH OTHER PROPOSALS.
22	AN IMPORTANT REVIEW CRITERION FOR THE
23	BASIC BIOLOGY PROPOSALS WILL BE THE QUALITY OF THE
24	PRELIMINARY DATA, AND INVESTIGATORS WHO NEED MORE
25	TIME TO COLLECT CONVINCING DATA HAVE THE OPPORTUNITY

1	TO DO SO AND CAN PARTICIPATE IN THE SECOND
2	INSTALLMENT OF THIS INITIATIVE LATER NEXT YEAR.
3	IN CONTRAST TO I NEED TO COME TO AN
4	END. I DO WANT TO PROPOSE THAT THE COMPREHENSIVE
5	AND THE NEW FACULTY RECIPIENTS, CURRENT GRANTEES
6	THAT HAVE COMPREHENSIVE AND NEW FACULTY AWARDS WILL
7	NOT BE ELIGIBLE TO APPLY TO BROADEN OUR OVERALL
8	SCIENTIFIC BASE. A PROVISIONAL TIMETABLE IS
9	ILLUSTRATED HERE. DR. CSETE ALREADY BRIEFLY ALLUDED
10	TO IT. I JUST WANT TO POINT OUT THAT INDEED THE
11	RELEASE FOR RFA 0902 WILL BE AUGUST NEXT YEAR.
12	I ALSO WANT TO EMPHASIZE THAT THIS IS ONE
13	SINGLE INITIATIVE AND IS THEN LIKELY TO BE REPEATED
14	IN FUTURE INITIATIVES IN YEARS TO COME.
15	SO IN CLOSING, I WOULD LIKE TO ON THE NEXT
16	SLIDE SHOW YOU WHAT WE'RE SPECIFICALLY ASKING FOR.
17	WE'RE HOPING TO BE ABLE TO AWARD 40 TOTAL AWARDS
18	WITH 20 PER RFA. THESE WILL BE THREE-YEAR AWARDS
19	FOR \$300,000 PER YEAR FOR A TOTAL COST FOR BOTH
20	RFA'S COMBINED AT \$60 MILLION.
21	CHAIRMAN KLEIN: THANK YOU.
22	DR. PIZZO: GREAT PROPOSAL. I MOVE
23	APPROVAL.
24	CHAIRMAN KLEIN: DR. PIZZO MOVES APPROVAL.
25	IS THERE A SECOND?
	2/2

DR. PULI AFI TO: SECOND.
CHAIRMAN KLEIN: SECOND DR. PULIAFITO. IS
THERE DISCUSSION BY THE BOARD? SEEING NO
DISCUSSION, IS THERE DISCUSSION BY THE PUBLIC?
SEEING NO DISCUSSION BY THE PUBLIC, CALL THE
QUESTION. ALL IN FAVOR. OPPOSED? ITEM PASSES.
COUPLE OF VERY QUICK ITEMS THAT WE CAN DO.
I WANT TO DO ITEM NO. 22, CONSIDERATION OF
APPOINTMENT OF NEW SCIENTIFIC MEMBERS FOR GRANTS
WORKING GROUP. CAN WE GET THOSE MEMBERS? THOSE
MEMBERS ARE ALREADY IN OUR BOOKS AND AVAILABLE FOR
THE PUBLIC, SO THEY'RE A MATTER OF PUBLIC RECORD
ALREADY. DOES ANYONE WANT TO MAKE A MOTION
DR. PRIETO: MOVE THEIR APPROVAL.
CHAIRMAN KLEIN: MOVE APPROVAL, DR.
PRIETO. IS THERE A SECOND?
MS. LANSING: SECOND.
CHAIRMAN KLEIN: SECOND SHERRY LANSING.
IS THERE A DISCUSSION BY THE BOARD? DISCUSSION BY
THE PUBLIC? ALL IN FAVOR. OPPOSED? SHOW THE ITEMS
PASSES.
NEXT ITEM IS THE INTERNATIONAL CONFERENCE
FOR NO. 21. THE INTERNATIONAL SOCIETY FOR STEM
CELL RESEARCH HAS ELECTED SAN FRANCISCO FOR THEIR
2010 CONFERENCE. AS IS THE CASE ACROSS THE WORLD,
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1	THEY ASKED FOR A CONTRIBUTION FROM THE SPONSORING OR
2	HOST ORGANIZATION.
3	MR. GOLDBERG: CAN WE GIVE THEM FREE HOTEL
4	ROOMS?
5	CHAIRMAN KLEIN: MANY OF THOSE HAVE
6	EXPIRED. AND SO THEY'VE ASKED FOR A \$400,000
7	CONTRIBUTION. WHAT'S IMPORTANT HERE TO REALIZE IS
8	BY IT BEING IN CALIFORNIA, OUR CIRM SCHOLARS CAN
9	ATTEND AT GROSSLY LOWER COST IN VERY HIGH
10	PROPORTIONS. SO DR. PENHOET.
11	DR. PENHOET: I MOVE APPROVAL OF THIS ITEM
12	SUBJECT TO THE 400,000 BEING TAKEN FROM THE DOLBY
13	MONEY, WHICH IS NOT PART OF THE BOND FUNDING.
14	MR. ROTH: I'LL SECOND IT, BUT I WANT TO
15	MAKE A COMMENT. THAT'S AN INCREDIBLE ASK, FROM MY
16	EXPERI ENCE.
17	DR. POMEROY: I ALSO HAVE SOME DISCOMFORT
18	SUPPORTING IT WITHOUT SEEING THE BUDGET THAT
19	SUPPORTS HOW THEY CAME UP WITH THIS FIGURE. I THINK
20	THE DOLBY MONEY IS A MUCH MORE APPROPRIATE SOURCE,
21	BUT I STILL THINK WE HAVE TO DO DUE DILIGENCE WITH
22	THOSE DONOR FUNDS, AND I WOULD LIKE TO SEE A BUDGET.
23	CHAIRMAN KLEIN: SO LET ME ASK THIS
24	QUESTION. DR. PENHOET, WOULD YOU BE WILLING TO
25	MODIFY YOUR MOTION TO MAKE IT TO APPROVE IT SUBJECT
	365

1	TO ADEQUATE DOCUMENTATION OF THE BUDGET?
2	DR. PENHOET: BROUGHT TO US AT THE NEXT
3	MEETI NG?
4	CHAIRMAN KLEIN: YES.
5	DR. PENHOET: OKAY.
6	MS. SAMUELSON: AND A FRIENDLY AMENDMENT,
7	DOCUMENTATION AND DEFENSE OR SOME WORDS.
8	CHAIRMAN KLEIN: THEY HAVE A TREMENDOUS
9	AMOUNT OF LEAD-TIME IN PROCESSING THE COMMITMENTS.
10	DR. ROBSON: WE HAVE RECEIVED A BUDGET AND
11	A PROPOSAL FROM THEM. UNFORTUNATELY IT CAME JUST
12	THIS PAST WEEK. IT WAS TOO LATE FOR US TO GET INTO
13	YOUR BROCHURES. WE CAN BRING IT NEXT TIME.
14	THEY NEED A DECISION SO THAT THEY CAN DO
15	THEIR PLANNING, AND THEY CAN START ACKNOWLEDGING US
16	AS A CO-SPONSOR IMMEDIATELY.
17	CHAIRMAN KLEIN: THEY HAVE FACILITIES THEY
18	HAVE TO LOCK DOWN AND SECURE.
19	DR. POMEROY: I APPRECIATE THAT, BUT DID
20	YOU NOT JUST SAY THAT YOU'RE GOING TO NOTICE AN ICOC
21	MEETING IN TEN DAYS FROM NOW IN ORDER TO GO OVER
22	SOME
23	DR. ROBSON: THE TOTAL BUDGET, AS I
24	RECALL, WAS ABOUT ONE AND A HALF MILLION.
25	DR. POMEROY: WHY DON'T WE DO IT THEN?
	366

1	CHAIRMAN KLEIN: THAT'S A VERY GOOD
2	SUGGESTION. DR. PENHOET, WOULD YOU BE WILLING TO
3	DEFER THIS TO THAT POINT?
4	DR. PENHOET: SURE.
5	CHAIRMAN KLEIN: THANK YOU VERY MUCH. SO
6	THIS GIVES US AN OPPORTUNITY TO DISTRIBUTE THIS
7	I NFORMATION.
8	MS. SAMUELSON: MAY I ADD I THINK WE
9	PROBABLY SHOULD SET A POLICY, AND WE PROBABLY DON'T
10	WANT TO DO IT NOW. IT'S TOO LATE. BUT AT SOME
11	POINT WE SHOULD PUT IN WRITING THE FACT THAT WE WILL
12	MAKE FINANCIAL DECISIONS JUST AS ANY OTHER
13	ECONOMICALLY STRUGGLING RESEARCH FUNDING
14	ORGANIZATION WOULD. WE CAN'T BE INFLUENCED BY THE
15	FACT WE HAVE A LOT OF MONEY IN THE BANK. WE CAN'T.
16	CHAIRMAN KLEIN: SO I WANT TO MOVE TO THE
17	NEXT ITEM, NO. 18. IAN, COULD YOU QUICKLY PRESENT
18	THIS. THIS IS CONSIDERATION OF APPROVAL OF STAFF,
19	THEY'RE FINALIZING REGULATIONS UPDATED WITH
20	AMENDMENTS FOR THE GRANT ADMINISTRATION POLICY.
21	MR. SWEEDLER: I'LL KEEP THIS BRIEF. WE
22	WORK OFF OF A GRANT ADMINISTRATION POLICY THAT YOU
23	ADOPTED TWO YEARS AGO. IT PROVIDES THE BASIC
24	GUIDELINES AND RULES THAT GRANTEES AND THE INSTITUTE
25	FOLLOW IN THE GRANT MAKING PROCESS FROM RFA THROUGH
	367

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1	CLOSE-OUT OF A GRANT.
2	IT'S NOW BEEN TWO YEARS OF EXPERIENCE WITH
3	THAT. IN JUNE YOU AUTHORIZED STAFF TO GO AHEAD WITH
4	A REGULATORY PROCESS TO INTRODUCE A SERIES OF
5	AMENDMENTS. THESE ARE PRIMARILY TECHNICAL
6	AMENDMENTS, CLARIFYING PROCEDURES TO MAKE IT READ
7	MORE CLEARLY TO ACCURATELY REFLECT CURRENT PRACTICE.
8	ALSO TO INCORPORATE A VARIETY OF POLICY DECISIONS
9	THAT THE ICOC HAS ADOPTED IN THE MEANTIME.
10	SINCE YOUR AUTHORIZATION IN JUNE, WE HAVE
11	BEEN THROUGH A PUBLIC NOTICE AND COMMENT PROCESS.
12	WE'VE HAD TWO OPEN MEETINGS FOR INTERESTED PARTIES,
13	AND WE ARE NOW SEEKING YOUR APPROVAL TO FORWARD THIS
14	TO THE OFFICE OF ADMINISTRATIVE LAW FOR FINAL
15	APPROVAL.
16	I HAVE A WHOLE SLIDE PRESENTATION
17	PREPARED. I CAN GO THROUGH ALL OF THE DETAILS WITH
18	YOU, BUT I THINK THAT PRESENTATION ACCURATELY
19	CAPTURES WHAT THIS IS ABOUT. IT'S IN YOUR PACKETS
20	AT ITEM 18.
21	DR. PRIETO: I WOULD SAY WE ALL SAW THIS
22	LAST WEEK. MOVE APPROVAL.
23	DR. POMEROY: SECOND.
24	CHAIRMAN KLEIN: ANY BOARD DISCUSSION?
25	DR. STEWARD: I THINK IT WAS DR. PIZZO
	368

1	LAST NIGHT MADE A RECOMMENDATION TO CHANGE THE TERM
2	"PROFESSIONAL CONFLICT" BACK TO "SCIENTIFIC
3	CONFLICT, " IF I REMEMBERED CORRECTLY. UNFORTUNATELY
4	HE'S NOT HERE. MAYBE SOMEONE REMEMBERS.
5	MR. SWEEDLER: I DO RECALL THAT. AND WITH
6	MY GRANT ADMINISTRATION POLICY EARS ON, I NOTICED
7	THAT. LET ME JUST MENTION PROCESS A LITTLE BIT. WE
8	CAN CERTAINLY MAKE CHANGES TO THIS IN THAT ONCE WE
9	MAKE A CHANGE LIKE THAT, WE WILL THEN HAVE TO DO A
10	15-DAY NOTICE AND COMMENT PERIOD AND THEN BRING IT
11	BACK TO THE BOARD END OF JANUARY AGAIN TO SEEK FINAL
12	APPROVAL. SINCE
13	CHAIRMAN KLEIN: I BELIEVE THIS ALSO IS
14	INTEGRATED IN TERMINOLOGY INTO OUR OTHER DOCUMENTS
15	AND BYLAWS OF DIFFERENT GROUPS.
16	DR. STEWARD: IT'S FINE. I JUST WANTED TO
17	REMIND THE BOARD OF DR. PIZZO'S COMMENT. I AM NOT
18	MAKING THAT COMMENT.
19	CHAIRMAN KLEIN: OKAY. ADDITIONAL
20	COMMENTS?
21	MS. SAMUELSON: IN A PERFECT WORLD, I
22	WOULD LOVE TO HAVE A CHANCE TO REVIEW THE
23	SUBSTANTIVE CHANGES, BUT I DEFER TO THE WISDOM OF
24	THE GROUP, IF MOST PEOPLE HAD THE OPPORTUNITY IN THE
25	LAST WEEK TO READ IT.

1	CHAIRMAN KLEIN: LAST WEEK, YEAH. SO IT'S
2	THE PLEASURE OF THE BOARD. LET ME SEE WHAT THE
3	ANY PUBLIC COMMENTS? JOAN, I'M GOING TO CALL THE
4	QUESTION BECAUSE I THINK QUITE A FEW BOARD MEMBERS
5	HAVE REVIEWED IT. ALL IN FAVOR. OPPOSED? THANK
6	YOU.
7	AND NAMES FOR CIRM-FUNDED MAJOR
8	FACILITIES.
9	MR. HARRISON: WE DON'T NEED TO CONSIDER
10	THAT ITEM.
11	CHAIRMAN KLEIN: ARE THE MINUTES NOW IN A
12	CONDITION THAT YOU WANT TO ACT ON THOSE? NO.
13	THERE'S SOME TECHNICAL CORRECTIONS TO THOSE MINUTES.
14	AT THIS POINT DO WE HAVE ANY ITEM LEFT
15	OTHER THAN 23? NO. THIS IS NOT WELL, COULD WE
16	HAVE A PRESENTATION ON ITEM 23. THIS IS AN ATTEMPT
17	TO DEAL WITH CASH FLOW ISSUES FOR FOR-PROFIT
18	INSTITUTIONS AND TO BE RESPONSIVE TO ACCELERATE OUR
19	FUNDING OF THEM SO THERE'S NOT SUCH A GREAT TIME GAP
20	BETWEEN PEER REVIEW AND THE ACTUAL FUNDING. WE'RE
21	TRYING TO CUT DOWN THAT TIME PERIOD.
22	MR. ROTH: MR. CHAIR, IF WE APPROVE THESE
23	TODAY, WILL THEY HAVE AN IMPACT ON THINGS THAT WERE
24	JUST DONE?
25	CHAIRMAN KLEIN: IF WE APPROVE THE
	070
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1	ACCELERATION OF THE FUNDING?
2	MR. ROTH: IF THIS POLICY IS ADOPTED
3	TODAY, THEN IT WILL AFFECT THE GRANTS THAT WE DID
4	THIS MORNING?
5	CHAIRMAN KLEIN: TO THE EXTENT POSSIBLE.
6	DR. ROBSON: THIS CAN GO INTO EFFECT.
7	WE'RE JUST SENSITIVE TO THE NEEDS OF THE BIOTECH
8	COMPANIES AND THE ECONOMIC TIMES WE'RE IN. AND SO
9	WE'VE TRIED TO DEVELOP TO TWEAK OUR POLICY TO
10	STAY WITHIN ALL OF OUR REGULATIONS AND RULES, BUT BE
11	ABLE TO GET THE MONEY TO THESE PEOPLE AS SOON AS
12	POSSI BLE.
13	SO WHAT WE ARE PROPOSING IS YOU HAVE A
14	DOCUMENT THAT DESCRIBES IT IN MORE DETAIL. I'LL
15	JUST MENTION JUST GO THROUGH VERY BRIEFLY.
16	CHAIRMAN KLEIN: AND JUST I WANT TO
17	REEMPHASIZE JUST WHAT YOU JUST SAID. WE DON'T
18	ELIMINATE ANY APPROVALS. WE DON'T CHANGE ANY OF OUR
19	RULES. THIS IS JUST EXPEDITE PAYMENT.
20	DR. ROBSON: EXPEDITE PAYMENT SO THAT THE
21	PLAN WOULD BE THAT AFTER THE GRANTS WORKING GROUP
22	HAD MET, THOSE COMPANIES THAT WERE WHOSE
23	PROPOSALS THAT WERE IN TIER 1 WOULD BE OFFERED THE
24	OPPORTUNITY TO START THROUGH THE ADMINISTRATIVE
25	REVIEW THAT WE DO PRIOR TO MAKING AN AWARD.
	371

1	NORMALLY WE DO THAT AFTER THE AWARD HAS BEEN
2	APPROVED BY THE I COC.
3	WE WILL GIVE THEM THE OPPORTUNITY TO START
4	THAT ADMINISTRATIVE PROCESS WITHOUT ANY COMMITMENT
5	ON OUR PART, BUT IF THEY SO CHOOSE TO DO THAT, IF
6	THEY COMPLETE THE ADMINISTRATIVE PROCESS, THEN IF
7	THEIR APPLICATION IS APPROVED BY THE ICOC, WE CAN
8	ISSUE A NOTICE OF GRANT AWARD AND PAYMENT
9	IMMEDIATELY. AND THAT'S THE BASIS OF WHAT WE'RE
10	HOPING TO DO OR PLANNING TO DO JUST TO SPEED THINGS
11	ALONG.
12	DR. PRICE: POINT OF INFORMATION. WHAT
13	ARE YOU REFERRING TO WHEN YOU SAY ADMINISTRATIVE
14	PROCESS? WHAT DO THEY DO IN THAT PROCESS?
15	DR. ROBSON: WE HAVE SOME
16	PREADMINISTRATIVE REVIEW THAT THEY HAVE TO GO
17	THROUGH TO GET THE I THINK MARIE MIGHT BE ABLE TO
18	SPEAK TO THIS MORE DIRECTLY.
19	DR. CSETE: IRB, IACUC, SCRO.
20	DR. ROBSON: COMPLIANCE SORTS OF THINGS.
21	IF WE HAVE LOANS INVOLVED, THERE MAY BE OR
22	COMPANIES INVOLVED, THERE MAY BE FINANCIAL
23	FEASIBILITY REVIEW THAT WE HAVE TO DO. THAT'S PART
24	OF THE LOAN PROGRAM. THAT WILL COME TO YOU AT A
25	LATER POINT. ANY OF THAT STUFF COULD BE DONE IN
	372

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1	ADVANCE OF THE ICOC MEETING SUBSEQUENT TO THE GRANTS
2	WORKING GROUP.
3	DR. PRIETO: QUESTION. MR. CHAIRMAN, WILL
4	THEY HAVE ACCESS TO THEIR RAW SCORE AND HOW CLOSE
5	THEIR APPLICATION IS TO THE FUNDING LINE?
6	DR. ROBSON: THEY WILL BE IN THE TOP
7	FUNDING LINE.
8	DR. PRIETO: THEY'LL BE IN TIER 1.
9	DR. ROBSON: THEY'LL BE IN TIER 1.
10	DR. PRIETO: THAT FUNDING LINE IS SUBJECT
11	TO CHANGE.
12	CHAIRMAN KLEIN: THERE IS NO FUNDING UNTIL
13	THIS BOARD ACTS.
14	DR. PRIETO: CORRECT. IF THEY WILL
15	KNOW THINKING THAT SOMEONE WHOSE SCORE IS 90 AND
16	IS AT THE TOP OF THE GROUP IS MORE LIKELY TO TAKE
17	THIS CHANCE THAN SOMEBODY WHOSE SCORE IS RIGHT AT
18	THE FUNDING LINE, KNOWING THAT WE MAY MOVE THE
19	FUNDING LINE UP OR MOVE AN APPLICATION UP OR DOWN.
20	DR. PULIAFITO: SO THE OTHER APPLICANTS IN
21	TIER 1 WILL KNOW THAT THEY'RE IN TIER 1 TOO,
22	CORRECT?
23	DR. ROBSON: YES.
24	DR. PULIAFITO: SO NOT-FOR-PROFIT OR
25	PROFIT?
	272

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1	DR. CSETE: THEY WILL HAVE THEIR SCORES,
2	DR. PRIETO. THAT'S PART OF THE EXECUTIVE SUMMARY
3	THAT GOES BACK TO THE REVIEWERS, AND IT'S NOT A
4	BURDEN ON THEM SO MUCH AS ON OUR GRANTS
5	ADMINISTRATION STAFF TO GET GOING.
6	MR. ROTH: I THINK IT'S A GREAT IT'S
7	VOLUNTARY. AND IF YOU'RE ON THE BUBBLE AND YOU
8	DECIDE NOT TO DO IT, THAT'S FINE. BUT THE PEOPLE
9	THAT ARE IN THE RECOMMENDED FOR FUNDING CATEGORY,
10	THEY WANT TO GET A JUMP ON IT, THIS WILL ALLOW US TO
11	SIMULTANEOUSLY PARALLEL.
12	DR. ROBSON: THIS COULD SAVE THEM UP TO
13	TWO MONTHS.
14	DR. PRICE: BUT YOU CAN DO THAT. YOU
15	DON'T NEED ANY OF THE ANY INTERNAL PROCESS,
16	ANYBODY CAN ENGAGE IN. THEY DON'T NEED ICOC
17	APPROVAL TO GO TO THEIR OWN LACUC.
18	DR. ROBSON: I DON'T THINK THIS REQUIRES A
19	VOTE. FOR YOUR INFORMATION
20	CHAIRMAN KLEIN: INSTEAD OF WAITING UNTIL
21	AFTER THE ICOC MEETING TO DO THE ADMINISTRATIVE
22	COMPLIANCE, THEY'LL DO IT TO THE EXTENT POSSIBLE
23	BEFORE THE
24	DR. PRICE: YES, BUT THE ADMINISTRATIVE
25	COMPLIANCE THAT WAS JUST DISCUSSED, HUMAN SUBJECTS

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REVIEW, IACUC REVIEW, SCRO REVIEW, ALL OF THAT CAN
BE DONE INTERNALLY BY AN INSTITUTION WITHOUT ANY
CHAIRMAN KLEIN: WE HAVE
DR. CSETE: WE HAVE TO CHECK IT OFF.
CHAIRMAN KLEIN: THERE'S TWO THINGS. OUR
ADMINISTRATIVE STAFF GOES THROUGH A DETAILED
ADMINISTRATIVE PROCESS WHICH IS MUCH GREATER THAN
JUST SEEING WHETHER IRB REVIEW IS DONE. WE'VE GOT
TO HAVE ALL OF THE RIGHT DOCUMENTS AND EVERYTHING
BEFORE WE CAN FUND. SO BY PROCESSING THAT BEFORE
THE ICOC, IF THE ICOC THEN APPROVES IT, THEN IT CAN
BE PAID RIGHT AWAY RATHER THAN TRAILING.
DR. PRICE: SUBMITTING IT TO THE ICOC.
MR. ROTH: IT'S LIKE DUE DILIGENCE. IT'S
CIRM'S DUE DILIGENCE ON THE GRANT.
CHAIRMAN KLEIN: IT SAVES UP TO TWO
MONTHS, WHICH HAS BEEN TAKING FOR THE PERIOD AFTER
I COC.
DR. PRICE: I AM JUST CONCERNED THAT IT
SORT OF UNDERMINES OUR POSITION, WHICH WE'VE HELD
EVER SINCE THE LAWSUITS, EVER SINCE THE PROPOSITION,
THAT NOTHING IS FUNDED UNTIL THE ICOC.
CHAIRMAN KLEIN: IT'S PRETTY CLEAR WE JUST
TOOK TWO OUT OF THE RECOMMENDED FOR FUNDING
CATEGORY. SO PEOPLE ARE GOING TO BE AWARE THAT
375

1	THEY'VE GOT A RISK THAT THEY'RE NOT GOING JUST
2	BECAUSE WE'RE PROCESSING THEM, THERE WILL BE A
3	DISCLAIMER, SO IT DOESN'T MEAN WE'RE GOING TO FUND
4	THEM.
5	OKAY. ANY PUBLIC COMMENT?
6	MR. SIMPSON: JOHN SIMPSON, CONSUMER
7	WATCHDOG. IT MAKES PERFECT SENSE.
8	CHAIRMAN KLEIN: THANK YOU.
9	MR. ROTH: CALL THE QUESTION.
10	CHAIRMAN KLEIN: I'D LIKE TO THANK THE
11	STAFF FOR BEING RESPONSIVE. THIS IS A SUGGESTION
12	THAT I MADE TO BRING TO THIS BOARD BEING CONCERNED
13	WITH BIOTECH CASH FLOWS IN THIS PERIOD.
14	I'D LIKE TO CALL THE QUESTION.
15	MR. ROTH: IS THERE A MOTION ON THE FLOOR?
16	MOTION TO APPROVE.
17	CHAIRMAN KLEIN: MOTION TO APPROVE BY
18	DUANE.
19	MS. GIBBONS: SECOND.
20	CHAIRMAN KLEIN: SECOND BY LEEZA GIBBONS.
21	CALL THE QUESTION. ALL IN FAVOR. THANK YOU VERY
22	MUCH. TREMENDOUSLY PRODUCTIVE SESSION.
23	MS. KING: FOR THE RECORD, MOTION CARRIES.
24	CHAIRMAN KLEIN: CAN WE GIVE A HAND TO THE
25	STAFF, PLEASE.
	07/

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1	(APPLAUSE.)
2	CHAIRMAN KLEIN: AND MELISSA, WHO'S STAYED
3	UP TILL MIDNIGHT ON NIGHTS, AND JENNA, WHO STAYED UP
4	HORRENDOUS HOURS GETTING THIS ALTOGETHER, CAN WE
5	GIVE A SPECIAL HAND OF APPLAUSE TO THEM?
6	(APPLAUSE.)
7	(THE MEETING WAS THEN CONCLUDED AT
8	04: 56 P. M. )
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### REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE 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

UNI VERSITY OF CALIFORNIA IRVINE IRVINE, CALIFORNIA ON WEDNESDAY, DECEMBER 10, 2008

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.

rain

BETH C. DRAIN, CSR 7152

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