

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

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

LOCATION: VIA ZOOM

DATE: JULY 22, 2022  
11 A.M.

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

FILE NO.: 2022-29

**133 HENNA COURT, SANDPOINT, IDAHO 83864  
208-920-3543 DRAIBE@HOTMAIL.COM**

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JULY 22, 2022; 11 A.M.

CHAIRMAN GOLDSTEIN: ALL RIGHT. LET'S DO IT. SO LET ME CALL US TO ORDER. AND AS I REMEMBER THE ORDER OF THE --

MS. BONNEVILLE: REALLY QUICKLY, LARRY, LET'S JUST GET THE YOUTUBE STARTED. WE'VE GOT YOU-TUBE GOING, SO I WILL CALL ROLL.

LOREN ALVING.

DR. ALVING: HERE.

MS. BONNEVILLE: MARK FISCHER-COLBRIE.

DR. FISCHER-COLBRIE: HERE.

MS. BONNEVILLE: ELENA FLOWERS.

DR. FLOWERS: PRESENT.

MS. BONNEVILLE: JUDY GASSON.

DR. GASSON: HERE.

MS. BONNEVILLE: LARRY GOLDSTEIN.

CHAIRMAN GOLDSTEIN: HERE.

MS. BONNEVILLE: DAVID HIGGINS.

DR. HIGGINS: HERE.

MS. BONNEVILLE: SHLOMO MELMED.

DR. MELMED: HERE.

MS. BONNEVILLE: CHRISTINE MIASKOWSKI.

DR. MIASKOWSKI: MORNING.

MS. BONNEVILLE: JONATHAN THOMAS.

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1 CHAIRMAN THOMAS: HERE.

2 MS. BONNEVILLE: ART TORRES.

3 MR. TORRES: PRESENT.

4 MS. BONNEVILLE: KAROL WATSON. KEITH  
5 YAMAMOTO.

6 DR. YAMAMOTO: HERE.

7 MS. BONNEVILLE: AND THEN I WOULD NOTE  
8 THAT DEBORAH DEAS AND PAT LEVITT ARE NOT PRESENT.  
9 SO WE CAN START.

10 CHAIRMAN GOLDSTEIN: OKAY. GREAT. FIRST  
11 ORDER OF BUSINESS IS CHANGES TO THE CLINICAL PLAN  
12 ADVISORY COMMENTS. I BELIEVE ABLA CREASEY IS DOING  
13 THAT ONE; IS THAT CORRECT?

14 MS. BONNEVILLE: ABLA CREASEY IS DOING  
15 THAT, YES.

16 DR. CREASEY: YES, GOOD MORNING. I'LL SEE  
17 IF I CAN SHOW MY SLIDES. OKAY.

18 GOOD MORNING, EVERYONE, DEAR MEMBERS OF  
19 THE SCIENCE SUBCOMMITTEE. SO I AM THE HEAD OF  
20 THERAPEUTICS DEVELOPMENT AT CIRM, AND I'M BEING  
21 TODAY GIL SINCE HE IS ON VACATION THIS WEEK AND HE  
22 USUALLY GIVES THESE PRESENTATIONS. SO I AM  
23 PRESENTING THE PROPOSED REVISIONS TO THE CLIN2  
24 CONCEPT.

25 THE PROPOSED REVISION TO CLIN2 CONCEPT IS

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1 AS FOLLOWS. THERAPEUTIC CANDIDATES CURRENTLY ALLOW  
2 CLINICAL TRIAL STUDIES WITH A CANDIDATE THAT'S  
3 EITHER STEM CELL THERAPY OR GENETIC THERAPY PHASE I,  
4 II, OR III CLINICAL TRIALS WHILE SMALL MOLECULE OR  
5 BIOLOGICS INVOLVE STEM CELLS, PHASE I CLINICAL  
6 TRIALS ONLY.

7 WE PROPOSE TO UNIFY ELIGIBILITY TO ALLOW  
8 ALL THREE CATEGORIES TO QUALIFY FOR A PHASE I, II,  
9 OR III TRIALS. THIS ACTION ALLOWS FOR CONSISTENT  
10 ELIGIBILITY REQUIREMENT ACROSS ALL CLINICAL  
11 APPLICATIONS AND PROVIDES THE POSSIBILITY OF ONGOING  
12 CIRM SUPPORT FOR SMALL MOLECULES AND BIOLOGICS THAT  
13 ARE READY TO ADVANCE TO LATE STAGE CLINICAL  
14 DEVELOPMENT.

15 THE EXISTING ELIGIBILITY LANGUAGE WOULD  
16 THEN BE EXTENDED TO PHASE II AND PHASE III CLINICAL  
17 TRIALS. THIS IS WHAT YOU SEE ON THE SLIDE. A SMALL  
18 MOLECULE OR A BIOLOGIC THAT ACTS ON OR IS DEPENDENT  
19 ON ENDOGENOUS HUMAN STEM CELLS FOR ITS THERAPEUTIC  
20 EFFECT, THAT IS DEPENDENT ON TARGETING HUMAN CANCER  
21 STEM CELLS FOR ITS THERAPEUTIC EFFECT, THAT MODIFIES  
22 A STEM CELL THERAPY, OR WHERE A HUMAN STEM CELL IS  
23 NECESSARY TO MANUFACTURE THE THERAPY; SUCH AS,  
24 EXTRACELLULAR VESICLES.

25 THERE ARE ADDITIONAL MINOR REVISIONS THAT

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1 ARE BEING PROPOSED MAINLY FOR CLARIFICATION SUCH AS  
2 GENE THERAPY TO GENETIC THERAPY. THERE ARE ALSO A  
3 FEW INSTANCES WHERE THE UPDATE WAS MISSED IN THE  
4 LAST ROUND OF CHANGES TO ALIGN WITH ADOPTED  
5 DEFINITION OF GENETIC THERAPY. CLARIFICATION THAT  
6 FEASIBILITY TRIALS FOR MEDICAL DEVICES ARE INCLUDED  
7 WITHIN THE REQUIREMENTS FOR AWARD AMOUNT LIMITS AND  
8 COFUNDING AMOUNTS.

9 SO THE ACTION REQUESTED IS TO PLEASE  
10 APPROVE OF THE PROPOSED AMENDMENTS TO THE CLIN2  
11 CONCEPT PLAN. WITH THAT I'LL STOP.

12 CHAIRMAN GOLDSTEIN: OKAY. QUESTIONS FOR  
13 ABLA OR OTHER CIRM STAFF REGARDING THIS PROPOSAL?

14 CHAIRMAN THOMAS: LARRY, WHY DON'T WE GET  
15 A MOTION ON THE TABLE. I'LL MOVE.

16 CHAIRMAN GOLDSTEIN: OKAY. THANK YOU,  
17 J.T. SECOND?

18 DR. HIGGINS: SECOND.

19 CHAIRMAN GOLDSTEIN: OKAY. NOW THEN,  
20 DISCUSSION OR QUESTIONS PLEASE. LET'S SEE. JUDY,  
21 DID YOU JUST WAVE YOUR HAND?

22 MS. BONNEVILLE: DR. MELMED HAD HIS HAND  
23 RAISED.

24 DR. MELMED: OBVIOUSLY THIS SOUNDS VERY,  
25 VERY IMPORTANT AND HELPFUL TO PROCEED WITH THIS.

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1 I'M JUST CURIOUS, BEING AN OLD VETERAN ON THIS  
2 COMMITTEE, WHAT WAS OUR ORIGINAL RATIONALE FOR  
3 SPLITTING IT UP? J.T., DO YOU REMEMBER, OR WAS IT  
4 EVEN BEFORE YOUR TIME? WHY WAS THIS DISTINCTION  
5 MADE? WAS THERE A REASON FOR IT WHICH WE'RE  
6 CURRENTLY UNAWARE OF?

7 DR. CREASEY: CAN I ANSWER THAT QUESTION?

8 CHAIRMAN THOMAS: OF COURSE, ABLA, PLEASE.

9 DR. CREASEY: AGAIN, AS A NEWCOMER TO CIRM  
10 AND HAVING WORKED FOR PHARMA, I THINK THE IDEA WAS  
11 BEYOND PHASE I, IT'S LIKELY THAT THE PHARMA AND  
12 BIOTECH COMPANIES WILL INVEST IN SUCH A PROGRAM AND  
13 PROBABLY WAS ONE OF THE REASONS, BUT MAYBE J.T. HAS  
14 OTHERS.

15 CHAIRMAN THOMAS: ONE OF THE BIG DRIVERS,  
16 SHLOMO, WAS WHEN WE WERE RUNNING OUT OF FUNDS A  
17 COUPLE YEARS PRIOR TO THE PASSAGE OF PROP 14, THERE  
18 WAS DISCUSSION ABOUT CUTTING BACK ON CERTAIN THINGS  
19 THAT WERE ELIGIBLE FOR FUNDING, AND THIS WAS ONE OF  
20 THOSE. AND SO THE IDEA HERE, I THINK, IS TO  
21 REINSTATE IT BECAUSE ALL OF THE PHASE II AND PHASE  
22 III WORK, IT ALL STILL MUST HAVE TO DO IN SOME  
23 CAPACITY WITH STEM CELLS ONE WAY OR ANOTHER, WHETHER  
24 IT'S SMALL MOLECULES, BIOLOGICS, OR ANYTHING ELSE.

25 SO KEEPING THAT REQUIREMENT IN PLACE AND

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1 NOW HAVING THE LUXURY, COURTESY OF THE VOTERS OF  
2 HAVING THE FUNDING AVAILABLE, I THINK IT WAS THE  
3 TEAM'S VIEW THAT IT'S TIME TO EXPAND THE DEFINITION  
4 TO INCLUDE EVERYTHING IN PHASE II AND PHASE III AS  
5 WELL.

6 DR. CREASEY: AND TOWARDS THE END OF  
7 PROPOSITION 71, WE HAD LIMITED FUNDS. SO WE HAD TO  
8 PRIORITIZE. AND NOW THAT WE HAVE THE PROPOSITION  
9 14, THE FUNDS COULD BE MADE AVAILABLE IF YOU DECIDE  
10 TO DO THAT.

11 MS. BONNEVILLE: LARRY, MARIA HAS HER HAND  
12 RAISED.

13 CHAIRMAN GOLDSTEIN: MARIA MILLAN PLEASE.

14 DR. MILLAN: ABSOLUTELY. I JUST WANTED TO  
15 MAYBE GIVE SOME CONTEXT AS TO WHY WE'RE BRINGING IT  
16 TO YOUR ATTENTION NOW. IT REALLY CAME TO OUR  
17 ATTENTION THAT, ESPECIALLY WITH THE MARKET AS IT IS  
18 IN TERMS OF INVESTMENT INTO EARLY STAGE PROGRAMS,  
19 AND SOME OF THE PROGRAMS WE HAD FUNDED THROUGH THE  
20 EARLY STAGES INTO PHASE I THAT SHOWED SOME PROMISE,  
21 INCLUDING COMBINATION THERAPIES WHERE SMALL  
22 MOLECULES OR BIOLOGICS ARE NEEDED FOR THE SUCCESS OF  
23 CELL TRANSPLANT, LIKE A NONTOXIC CONDITIONING  
24 REGIMEN, FOR INSTANCE, OR SOME OF THE NOVEL SMALL  
25 MOLECULES AND BIOLOGICS THAT TARGETED A STEM CELL



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1 REGENERATIVE MEDICINE MECHANISM OF ACTION THAT IS  
2 NOT NECESSARILY OUT IN THE STANDARD DEVELOPMENT  
3 PATH, OR THE TYPES OF APPROACHES THAT ADDRESS RARE  
4 DISEASE, ULTRA RARE DISEASE WHICH CURRENTLY RIGHT  
5 NOW ARE BEING TAKEN CARE OF BY ACADEMIA, THESE ARE  
6 THE TYPES OF PROGRAMS THAT ARE UNIQUELY THE TYPES OF  
7 PROGRAMS THAT WOULDN'T HAVE EVEN GOTTEN THIS FAR  
8 WERE IT NOT FOR CIRM.

9 AND THEY ALSO WOULD HAVE HAD A HARD TIME  
10 GETTING INDUSTRY SUPPORT EVEN UNDER THE BEST  
11 CIRCUMSTANCE, BUT ESPECIALLY WITH THE MARKET WHERE  
12 IT IS AND INVESTMENTS OR ACCESS TO CAPITAL IS VERY  
13 CHALLENGING, VERY COMPETITIVE RIGHT NOW. WE WANTED  
14 TO MAKE SURE THAT PROGRAMS THAT WE HAD INVESTED IN  
15 AND ESPECIALLY THOSE THAT COULD BE VERY IMPACTFUL TO  
16 THE MISSION AND TO THE PATIENTS AND TO THE TYPES OF  
17 TECHNOLOGIES WE ARE BRINGING FORWARD, THAT WE HAVE A  
18 WAY TO TAKE CARE OF THOSE PROGRAMS.

19 SO THAT'S THE CONTEXT OF WHY TODAY IN  
20 ADDITION TO THE FACT THAT WE ALSO HAVE, AS J.T. AND  
21 ABLA HAD POINTED OUT, WE HAVE THE ABILITY TO SUPPORT  
22 IT THROUGH THE RENEWED FUNDING.

23 DR. MELMED: I WAS JUST CONCERNED THERE  
24 WAS A POLICY. BUT BASED ON WHAT YOU SAID NOW, AND I  
25 APPLAUD THIS APPROACH AND IT'S GREAT THAT WE ARE

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1 DOING THIS, BUT WE HAVE TO REALIZE WE ARE IN FOR  
2 HUNDREDS OF MILLIONS OF DOLLARS. I MEAN A  
3 SUCCESSFUL PHASE III TRIAL, IF IT'S WELL-DESIGNED,  
4 IS EXTREMELY EXPENSIVE.

5 DR. CREASEY: OUR FUNDING WILL CONTINUE TO  
6 BE THE SAME, MEANING WE WILL, FOR EXAMPLE, A PHASE  
7 III TRIAL WILL GET \$15 MILLION FROM US, AND THE REST  
8 WILL BE THROUGH COFUNDING AND OTHER RESOURCES THE  
9 PARTY WOULD HAVE TO IDENTIFY.

10 THE KEY HERE ALSO IS PLEASE REMEMBER THAT  
11 THERAPEUTICS, SMALL MOLECULES, AND BIOLOGICS WILL  
12 HAVE TO HAVE SOME RELATIONSHIP INVOLVEMENT WITH STEM  
13 CELLS. SO THOSE ARE THE ONES WE ARE ADVOCATING FOR.

14 DR. MELMED: THANK YOU.

15 CHAIRMAN GOLDSTEIN: OTHER QUESTIONS FROM  
16 MEMBERS OF THE SUBCOMMITTEE? OKAY. HEARING NONE,  
17 LET'S SEE, MARIA, IS IT TIME FOR PUBLIC COMMENT?

18 MS. BONNEVILLE: IT IS AND I DO NOT SEE  
19 ANY HANDS RAISED FOR PUBLIC COMMENT.

20 CHAIRMAN GOLDSTEIN: OKAY. SO I  
21 SUGGEST -- LET'S SEE. DO WE HAVE TO HAVE ANOTHER  
22 MOTION TO VOTE OR WE GO STRAIGHT TO THE VOTE, MARIA?

23 MS. BONNEVILLE: WE CAN GO STRAIGHT TO THE  
24 VOTE.

25 CHAIRMAN GOLDSTEIN: OKAY. CALL THE

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1 QUESTION AND VOTE PLEASE.  
2 MS. BONNEVILLE: LOREN ALVING.  
3 DR. ALVING: YES.  
4 MS. BONNEVILLE: MARK FISCHER-COLBRIE.  
5 DR. FISCHER-COLBRIE: YES.  
6 MS. BONNEVILLE: ELENA FLOWERS.  
7 DR. FLOWERS: YES.  
8 MS. BONNEVILLE: JUDY GASSON.  
9 DR. GASSON: YES.  
10 MS. BONNEVILLE: LARRY GOLDSTEIN.  
11 CHAIRMAN GOLDSTEIN: YES.  
12 MS. BONNEVILLE: DAVID HIGGINS.  
13 DR. HIGGINS: ENTHUSIASTIC YES.  
14 MS. BONNEVILLE: SHLOMO MELMED.  
15 DR. MELMED: YES.  
16 MS. BONNEVILLE: CHRISTINE MIASKOWSKI.  
17 DR. MIASKOWSKI: YES.  
18 MS. BONNEVILLE: JONATHAN THOMAS.  
19 CHAIRMAN THOMAS: YES.  
20 MS. BONNEVILLE: ART TORRES.  
21 MR. TORRES: AYE.  
22 MS. BONNEVILLE: KAROL WATSON.  
23 DR. WATSON: YES.  
24 MS. BONNEVILLE: KEITH YAMAMOTO.  
25 DR. YAMAMOTO: YES.

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1 MS. BONNEVILLE: THE MOTION CARRIES.

2 CHAIRMAN GOLDSTEIN: OKAY. THANK YOU,  
3 EVERYBODY.

4 NEXT UP IS SHYAM TELLING US ABOUT A  
5 PROPOSED CONCEPT FOR A NETWORK OF CELL AND GENE  
6 MANUFACTURING FACILITIES. SHYAM, TAKE IT AWAY.

7 DR. PATEL: THANK YOU, DR. GOLDSTEIN. SO  
8 I'M GOING TO PUT UP MY PRESENTATION. ONE SECOND  
9 PLEASE. JUST TRANSFERRED TO A NEW LAPTOP. I'M  
10 HAVING SOME PERMISSION ISSUES. SO I'M TRYING TO  
11 WORK IT OUT.

12 MS. BONNEVILLE: SHYAM, DO YOU WANT US TO  
13 SHARE THE SCREEN WITH WHAT'S POSTED ONLINE? YOU  
14 JUST LET US KNOW.

15 DR. PATEL: I GUESS I COULD GO WITH THAT  
16 BECAUSE THIS IS NOT WORKING AT THE MOMENT.

17 MS. BONNEVILLE: MARIANNE, DO YOU WANT TO  
18 SHARE THE DOCUMENT THAT SHYAM SENT YOU THAT WE  
19 POSTED?

20 DR. PATEL: THANK YOU, MARIANNE. AND I'LL  
21 JUST LET YOU KNOW WHEN TO PROGRESS SLIDES. SO I  
22 APOLOGIZE FOR THAT.

23 AND TODAY I WANT TO PRESENT A CONCEPT PLAN  
24 FOR A MANUFACTURING NETWORK IN THE STATE OF  
25 CALIFORNIA FOR CELL AND GENE THERAPY MANUFACTURING.

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1 I'M GOING TO TELL YOU IN ADVANCE THAT THERE WERE  
2 SUPPOSED TO BE QUITE A FEW ANIMATIONS IN THE SLIDES,  
3 SO I'LL DO MY BEST HERE WITH RESPECT TO WALKING YOU  
4 THROUGH A LOT OF TEXT. SO JUST BEAR WITH ME PLEASE.

5 SO AS WE ALWAYS START OFF WITH THE MISSION  
6 STATEMENT, ACCELERATING WORLD-CLASS SCIENCE TO  
7 DELIVER TRANSFORMATIVE REGENERATIVE MEDICINE  
8 TREATMENTS IN AN EQUITABLE MANNER TO A DIVERSE  
9 CALIFORNIA AND WORLD. SO NEXT SLIDE PLEASE.

10 LATE LAST YEAR THE BOARD HAD APPROVED OUR  
11 FIVE-YEAR STRATEGIC PLAN, AND WITHIN THAT PLAN THERE  
12 WERE THREE MAJOR THEMES. AND THIS PARTICULAR  
13 CONCEPT PLAN ADDRESSES ONE OF THE OBJECTIVES IN THE  
14 DELIVERY OF REAL WORLD SOLUTIONS THEME, WHICH WAS  
15 CREATING A MANUFACTURING PARTNERSHIP NETWORK, BUT IT  
16 ALSO TOUCHES ON THE COMPETENCY HUBS AND THE  
17 WORKFORCE DEVELOPMENT OBJECTIVES OF THE OTHER TWO  
18 THEMES. AND I'LL BE WALKING THROUGH THE  
19 PRESENTATION, THE CONCEPT PLAN, OVER THE NEXT FEW  
20 SLIDES.

21 BEFORE I DO THAT, I WANT TO SET THE  
22 BACKGROUND IN TERMS OF THE CURRENT BOTTLENECKS IN  
23 MANUFACTURING. NEXT SLIDE PLEASE, MARIANNE.

24 SO WE ARE ALL AWARE THAT THERE'S BEEN A  
25 RAPID GROWTH IN REGENERATIVE MEDICINE, PARTICULARLY

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1 IN CELL AND GENE THERAPIES, AND NOW THEY'RE RAPIDLY  
2 PROGRESSING THROUGH CLINICAL TRIALS IN MANY  
3 INSTANCES. AND THAT RAPID PROGRESSION OF THESE  
4 THERAPEUTIC CANDIDATES OFTEN CREATES A BURDEN ON  
5 MANUFACTURING WHERE SOME OF THE BOTTLENECKS IN  
6 MANUFACTURING DEVELOPMENT CAN ACTUALLY SLOW DOWN THE  
7 OVERALL DEVELOPMENT OF THE THERAPIES THEMSELVES.

8 AND SO THERE ARE A FEW INFRASTRUCTURE  
9 BOTTLENECKS AS WELL AS SOME TECHNICAL BOTTLENECKS  
10 AND RESOURCE BOTTLENECKS THAT ARE ADDRESSED HERE.  
11 SO FIRST AND FOREMOST, THE ACADEMIC INSTITUTIONS ARE  
12 THE CENTER OF TECHNOLOGY INNOVATION, INITIAL PROCESS  
13 DEVELOPMENT, AND GMP MANUFACTURING, BUT THEY DON'T  
14 HAVE SUFFICIENT CAPACITY, RESOURCES, OR PROCESSES  
15 FOR LATE STAGE MANUFACTURING. AND OFTEN THIS IS BY  
16 DESIGN.

17 ON THE INDUSTRY SIDE, THERE ARE INDUSTRY  
18 CONTRACT DEVELOPMENT AND MANUFACTURING ORGANIZATIONS  
19 THAT SPECIALIZE IN MANUFACTURING FOR SPONSORS OR  
20 IN-HOUSE MANUFACTURING OPERATIONS OF COMPANIES OF  
21 ALL SIZES, AND THESE ARE BEST POSITIONED TO  
22 INDUSTRIALIZE MANUFACTURING PROCESSES FOR LATE STAGE  
23 CLINICAL TRIALS AND COMMERCIALIZATION, BUT THEY  
24 DON'T ALWAYS HAVE THE EXPERTISE IN EMERGING  
25 TECHNOLOGY PLATFORMS THAT ARISE FROM ACADEMIA, WHICH

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1 IS OFTEN THE CASE FOR CELL AND GENE THERAPIES IN  
2 PARTICULAR.

3 ON TOP OF THAT, THERE'S TECHNICAL  
4 BOTTLENECKS THAT ARISE FROM THE COMPLEXITY OF THE  
5 PRODUCTS AND PROCESSES THEMSELVES. THESE ARE LIVING  
6 PRODUCTS IN MANY CASES, AND THEY HAVE COMPLICATED  
7 MULTISTEP PROCESSES.

8 AND THEN, LASTLY, BECAUSE OF THE RAPID  
9 GROWTH IN THE INDUSTRY, THERE'S AN EVER-GROWING  
10 DEMAND FOR TRAINED MANUFACTURING AND QUALITY  
11 WORKFORCE. AND SOME OF THESE AREAS ARE BEING  
12 ADDRESSED BY THE CONCEPT PLAN BEING PRESENTED TO YOU  
13 TODAY.

14 FIRST AND FOREMOST, I WANT TO LAY OUT THE  
15 LANDSCAPE. SO NEXT SLIDE PLEASE, MARIANNE. SO IN  
16 CALIFORNIA WE BENEFIT FROM HAVING A VERY RICH  
17 NETWORK OF ACADEMIC GMP MANUFACTURING FACILITIES.  
18 IN FACT, A MAJORITY OF CIRM-FUNDED PROJECTS UTILIZE  
19 THESE GMP MANUFACTURING FACILITIES FOR THEIR CELL  
20 AND GENE THERAPY PROCESS DEVELOPMENT. THESE INCLUDE  
21 FACILITIES THAT HAVE BEEN AROUND FOR A LONG TIME,  
22 LIKE THE UC DAVIS, UC SAN DIEGO, AND CITY OF HOPE,  
23 AS WELL AS RECENT ONES THAT HAVE JUST OPENED; FOR  
24 EXAMPLE, CEDARS-SINAI, UC IRVINE, AND USC.

25 ON THE INDUSTRY SIDE, THERE'S BEEN A

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1 GROWING PRESENCE OF CONTRACT DEVELOPMENT AND  
2 MANUFACTURING ORGANIZATIONS. THESE EITHER PROVIDE  
3 FEE FOR SERVICE OR HAVE PARTNERSHIP MODELS. THERE'S  
4 BEEN A RAPID GROWTH OF THESE ESPECIALLY IN THE LAST  
5 COUPLE YEARS, AND PRIOR TO THAT THERE REALLY WEREN'T  
6 THAT MANY CDMO'S IN THE STATE OF CALIFORNIA.

7 IN ADDITION TO THAT, SEVERAL BIOPHARMA  
8 COMPANIES ARE ALSO MANUFACTURING IN CALIFORNIA FOR  
9 THEIR PARTNER PROJECTS. AND TWO OF OUR INDUSTRY  
10 ALLIANCE PROGRAM PARTNERS, BAYER AND NOVO AND  
11 NORDISK, BOTH HAVE THIS CAPACITY AT THEIR BAY AREA  
12 FACILITIES AT THE MOMENT FOR PARTNER PROJECTS.

13 NEXT SLIDE PLEASE.

14 SO GIVEN THAT LANDSCAPE, IN THE STRATEGIC  
15 PLAN WE HAD PROPOSED TO CREATE A MANUFACTURING  
16 NETWORK THAT LINKS THE ADVANTAGES OF THE ACADEMIC  
17 GMP FACILITIES WITH THE ADVANTAGES OF THE INDUSTRY  
18 PARTNERS ALL IN SERVICE OF THE THREE CORE GOALS.  
19 THE FIRST WOULD BE TO ACCELERATE AND DERISK THE  
20 PATHWAY TO COMMERCIALIZATION FOR CIRM-FUNDED CELL  
21 AND GENE THERAPY PROJECTS. SECOND, TO ADVANCE  
22 STANDARDS AND QUALITY-BY-DESIGN INDUSTRY STANDARDS  
23 THAT WOULD HELP INDUSTRIALIZE THE PROCESS AND CREATE  
24 MORE CONSISTENCY AND HIGHER QUALITY PRODUCTS. AND,  
25 LASTLY, TO BUILD THE MANUFACTURING LEADERSHIP AND



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1 WORKFORCE IN THE STATE OF CALIFORNIA.  
2 SO NEXT SLIDE PLEASE, MARIANNE. WHAT  
3 COULD BE SOME OF THE POTENTIAL FUNCTIONS OF THE  
4 MANUFACTURING NETWORK TO ADDRESS THOSE THREE GOALS,  
5 AND THOSE ARE DESCRIBED IN THIS SLIDE HERE. SO  
6 FIRST AND FOREMOST, WORLD CLASS EXPERTISE ACROSS THE  
7 FULL RANGE OF MANUFACTURING AND ANALYTICAL  
8 TECHNOLOGY PLATFORMS FROM STEM CELLS TO GENE  
9 EDITING, FOR EXAMPLE; TO SUPPORT THE MANUFACTURING  
10 OF THERAPIES FOR RARE, ULTRA RARE DISEASES. THESE  
11 ARE PLATFORM-BASED APPROACHES THAT COULD POTENTIALLY  
12 DEVELOP AND MANUFACTURE VARYING CELL AND GENE  
13 THERAPY PRODUCTS FOR A LARGE NUMBER OF ULTRA RARE  
14 DISEASES. TO ACCELERATE AND DERISK LATE STAGE AND  
15 COMMERCIAL MANUFACTURING OF THERAPIES. THIS IS  
16 PARTICULARLY IMPORTANT AS THE FIELD MATURES AND AS  
17 DOES CIRM'S PORTFOLIO AND THE NEED FOR LATE STATE  
18 MANUFACTURING FOR LARGER CLINICAL TRIALS AS WELL AS  
19 COMMERCIAL MANUFACTURING FOR APPROVED THERAPIES  
20 INCREASING IN THE STATE OF CALIFORNIA.

21 TO ESTABLISH CENTERS FOR QUALITY OR  
22 ACCREDITATION OF MANUFACTURING FACILITIES. THIS IS  
23 EQUALLY IMPORTANT AS THE FIELD MATURES.

24 AND LASTLY, TO BUILD INCLUSIVE WORKFORCE  
25 ENTRY AND ADVANCEMENT OPPORTUNITIES IN TECHNICAL AND

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1 LEADERSHIP CAREER PATHWAYS THAT PARTNER WITH OUR  
2 EDUC PROGRAMS AS WELL AS INDUSTRY STAKEHOLDERS  
3 RANGING FROM COMMUNITY COLLEGES TO BIOTECH COMPANIES  
4 TO THE CONTRACT MANUFACTURERS IN THE STATE AS I  
5 LISTED PREVIOUSLY.

6 SO THE NEXT FEW SLIDES I'M GOING TO WALK  
7 YOU THROUGH THE CONCEPT PLAN. THIS IS A BROAD  
8 OVERVIEW FIRST AND THEN POTENTIAL ACTIVITIES. SO  
9 THIS IS A BIPHASIC FUNDING OPPORTUNITY THAT WE'RE  
10 PRESENTING IN THIS CONCEPT PLAN COMPOSED OF TWO  
11 DISTINCT, BUT INTERRELATED RFA'S. SO THE FIRST  
12 PHASE OF THE RFA WOULD BE TO HAVE A PROGRAM BUDGET  
13 OF \$20 MILLION. THESE WOULD BE MAX TWO YEAR, MAX \$2  
14 MILLION AWARDS, AND THE APPLICANT AND AWARDEE WOULD  
15 BE ACADEMIC GMP MANUFACTURING FACILITIES WITH THE  
16 INTENT THAT THESE PHASE I AWARDS ARE FOCUSED ON  
17 INDIVIDUAL FACILITY ENHANCEMENTS AT THOSE FACILITIES  
18 THEMSELVES.

19 THE PHASE II RFA WOULD HAVE A PROGRAM  
20 BUDGET OF \$60 MILLION WITH A MAX AWARD DURATION OF  
21 FIVE YEARS AND A MAX AWARD AMOUNT OF \$5 MILLION.  
22 HERE THE APPLICANT GMP FACILITY WOULD BE APPLYING TO  
23 PROPOSE COLLABORATIONS WHICH IN TURN WOULD ALLOW FOR  
24 SCALING OF THE ENHANCEMENTS AND SPECIALIZATIONS AND  
25 TRAINING PROGRAMS THAT THEY HAD MADE PROGRESS TOWARD

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1 IN THE PHASE I APPLICATION. SO BASICALLY THE PHASE  
2 II IS SCALING UP IN COLLABORATION WITH OTHERS OF THE  
3 ACTIVITIES THAT THEY HAD DONE IN PHASE I.

4 SO IN ADDITION TO THE AWARDS THEMSELVES,  
5 CIRM WOULD COORDINATE A STEERING COMMITTEE OF  
6 AWARDEES AND EXTERNAL PARTICIPANTS. THIS STEERING  
7 COMMITTEE WOULD PLAY AN IMPORTANT ROLE WHICH WILL  
8 ACT AS THE GLUE BETWEEN THE AWARDEES THEMSELVES AS  
9 WELL AS TO FACILITATE THE TRANSITION FROM PHASE I TO  
10 PHASE II.

11 SO IN THE NEXT FEW SLIDES, I'M GOING TO  
12 WALK THROUGH POTENTIAL ACTIVITIES FOR PHASE I AND  
13 PHASE II, HOW PHASE I AND PHASE II INTERPLAY WITH  
14 EACH OTHER, AS WELL AS WHAT THE STEERING COMMITTEE  
15 ITSELF CAN BE DOING. BUT I DO WANT TO NOTE THAT  
16 BOTH IN THE PHASE I AND PHASE II RFA'S, THE  
17 ENCOURAGEMENT EXPECTATION IS THAT THE AWARDEES ARE  
18 WORKING IN COLLABORATION WITH OTHER ACADEMIC  
19 FACILITIES AS WELL AS THE INDUSTRY STAKEHOLDERS IN  
20 THE STATE OF CALIFORNIA.

21 SO THIS IS A VERY BUSY SLIDE BECAUSE IT  
22 WAS MEANT TO PROGRESS THROUGH SOME OF THESE THINGS,  
23 SO JUST BEAR WITH ME AS I WALK THROUGH THIS. SO THE  
24 POTENTIAL AWARD ACTIVITIES THAT WE ENVISION FOR BOTH  
25 PHASE I AND PHASE II, AGAIN, THESE ARE MEANT TO BE

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1       EXAMPLES AS INFORMATIVE INFORMATION ONLY AND NOT  
2       MEANT TO BE LIMITING IN ANY WAY FOR THE EVENTUAL RFA  
3       AND AWARDS.

4                 WE ARE BUCKETING THE THREE MAJOR  
5       CATEGORIES. SO FIRST AND FOREMOST IS TO DERISK AND  
6       ACCELERATE MANUFACTURING AS I'VE BEEN CONSTANTLY  
7       TALKING ABOUT THROUGHOUT THIS PRESENTATION. AND SO  
8       HERE POTENTIAL ACTIVITIES COULD INVOLVE QUALITY  
9       DRIVEN OPERATIONAL ENHANCEMENTS THAT DERISK PROCESS  
10      DEVELOPMENT, GMP MANUFACTURING, AND TECHNOLOGY  
11      TRANSFER FROM PRE-IND THROUGH TO COMMERCIALIZATION.  
12      IT COULD INVOLVE ACTIVELY MITIGATING CAPACITY AND  
13      EXPERTISE GAPS BY COORDINATING PROJECT EXECUTION  
14      ACROSS THE NETWORK. OFTENTIMES SOME PROJECTS MAY  
15      HAVE LEAD TIMES OF A COUPLE YEARS, OR SOME  
16      FACILITIES MAY NOT HAVE THE EXPERTISE IN A  
17      PARTICULAR AREA, BUT THEY COULD COORDINATE WITH  
18      OTHERS TO SUPPORT THOSE PROJECTS.

19                WE WOULD ENCOURAGE APPLICANTS TO PROPOSE  
20      SPECIALIZATION IN PARTICULAR AREAS. SO THESE COULD  
21      BE BUILDING NETWORKWIDE SPECIALIZATION IN AREAS SUCH  
22      AS TECHNOLOGY PLATFORMS, CRISPR, FOR EXAMPLE,  
23      ANALYTICAL METHODS, PIONEERING QUALITY-BY-DESIGN  
24      IMPLEMENTATION, AUTOMATION OF MANUFACTURING, OR  
25      HAVING RARE DISEASE MANUFACTURING PLATFORMS.

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1 THE LAST THING ON THE WORKFORCE  
2 DEVELOPMENT SIDE, THEY WOULD BE PROPOSING  
3 DEVELOPMENT AND IMPLEMENTATION OF TRAINING PROGRAMS  
4 FOR TECHNICAL POSITIONS THAT COULD INVOLVE  
5 INTERNSHIPS AND CERTIFICATION PROGRAMS, AS WELL AS  
6 MENTORING PROGRAMS FOR LEADERSHIP POSITIONS. AND  
7 THESE WILL BE IN PARTNERSHIP WITH OUR EDUC PROGRAMS,  
8 WHICH COULD BE THE FEEDER FOR A LOT OF THESE  
9 POSITIONS, AS WELL AS INDUSTRY STAKEHOLDERS WHICH  
10 COULD BE BOTH THE FEEDER AND DESTINATION FOR SOME OF  
11 THE TRAINEES.

12 SO AS I MENTIONED PREVIOUSLY, THE PHASE I  
13 AWARDS WOULD FOCUS ON INITIAL PROGRESS IN THESE  
14 AREAS AT THE ACADEMIC FACILITIES WHILE PHASE II  
15 WOULD BE HOW TO SCALE THESE ACROSS THE NETWORK. AND  
16 SO WHAT I'M GOING TO DO IS TO ILLUSTRATE THE  
17 INTERPLAY BETWEEN PHASE I AND PHASE II IS TO WALK  
18 YOU THROUGH POTENTIAL ACTIVITIES THAT COULD BE DONE  
19 IN PHASE I AND PHASE II FOR THAT FIRST EXAMPLE WHICH  
20 IS OUTLINED IN THAT BOX AROUND DERISKING  
21 MANUFACTURING. NEXT SLIDE PLEASE, MARIANNE.

22 SO HERE ON THE PHASE I SIDE, TO DERISK  
23 MANUFACTURING, THOSE INDIVIDUAL AWARDEES COULD BE  
24 MAKING QUALITY SYSTEM IMPROVEMENTS AT THEIR  
25 FACILITIES. THEY COULD BE IMPLEMENTING

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1 QUALITY-BY-DESIGN PRINCIPLES. AND THEY COULD BE  
2 HIRING AND TRAINING NEW STAFF AROUND THAT TO  
3 BASICALLY BOLSTER THEIR OPERATIONS ALL WITH THE  
4 INTENT OF BEING ABLE TO BETTER SUPPORT PROCESS  
5 DEVELOPMENT, BETTER TECH TRANSFER PROJECTS INTO  
6 THEIR FACILITIES FOR EARLY STAGE MANUFACTURING, AND  
7 THEN TO BETTER TRANSITION THOSE PROJECTS OUT OF  
8 THEIR FACILITIES FOR LATE STAGE MANUFACTURING WHEN  
9 THE NEED ARISES FOR THOSE PROJECTS FOR LATER STAGE  
10 CLINICAL TRIALS AS WELL AS COMMERCIAL MANUFACTURING.

11 SO POTENTIAL OUTCOME METRIC FOR A PHASE I  
12 AWARD FOR THIS PARTICULAR SET OF ACTIVITIES COULD BE  
13 HOW WELL DID THOSE QUALITY SYSTEM IMPROVEMENTS  
14 IMPACT PROJECT EXECUTION COMPARED TO HISTORICAL  
15 PERFORMANCE AT THOSE FACILITIES OR GLOBALLY? AND  
16 THEN TO TIE THEM TO THE PHASE II, BASED ON KNOWING  
17 WHICH QUALITY-DRIVEN IMPROVEMENTS WERE SUCCESSFUL,  
18 THOSE COULD BE SCALED ACROSS THE PARTICIPANT  
19 ORGANIZATIONS. AND THEN THEY CAN ALSO  
20 OPERATIONALIZE PARTNERSHIPS TO EFFECTIVELY  
21 TRANSITION PROJECTS FOR LATE STAGE COMMERCIAL  
22 MANUFACTURING. SO BASED ON WHAT WERE THE BEST  
23 PRACTICES IN TERMS OF COORDINATION BETWEEN ACADEMIC  
24 FACILITIES AND INDUSTRY PARTNERS TO FACILITATE  
25 PROGRESSION OF PROJECTS FROM INITIAL MANUFACTURING

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1 TO LATE STAGE MANUFACTURING, THOSE COULD BE  
2 OPERATIONALIZED MORE FULLY IN THE PHASE II AWARDS.

3 SO POTENTIAL OUTCOME METRICS FOR PHASE II  
4 AWARDS COULD BE WHAT IS THE SUCCESS RATE OF  
5 TRANSITIONING PROJECTS TO LATE STAGE MANUFACTURING,  
6 AS WELL AS HOW WELL WERE THE QUALITY STANDARDS,  
7 PROTOCOLS, AND BEST PRACTICES APPLIED ACROSS THE  
8 NETWORK?

9 SO TO GO BACK TO THE OTHER TWO CATEGORIES  
10 AND PROPOSE SOME OUTCOME METRICS FOR THOSE. SO WITH  
11 RESPECT TO SPECIALIZATION AREAS, IN PHASE I THE  
12 AWARDEES COULD DEMONSTRATE COMPETENCIES IN  
13 SPECIALIZATION AREAS BY EXECUTING PILOT PROJECTS.  
14 AND THEN IN PHASE II, THEY COULD DEMONSTRATE HOW  
15 EFFECTIVELY WERE THOSE SPECIALIZATIONS UTILIZED BY  
16 THE OTHER FACILITIES IN THE NETWORKS?

17 WITH RESPECT TO THE WORKFORCE DEVELOPMENT,  
18 IN PHASE I THE AWARDEES MAY DEMONSTRATE ENROLLMENT  
19 OF THE FIRST TRAINEE COHORTS FOR BOTH THE TECHNICAL  
20 AND LEADERSHIP TRAINING PROGRAMS. AND THEN IN PHASE  
21 II, THEY COULD DEMONSTRATE SUCCESSFUL ENROLLMENT IN  
22 TRAINING PROGRAMS AS WELL AS THE SUCCESS RATE OF  
23 TRAINEE JOB PLACEMENT.

24 AND ONE THING I SHOULD NOTE AS I'VE BEEN  
25 TALKING ABOUT THESE ACTIVITIES AND POTENTIAL OUTCOME

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1 METRICS IS THAT THE FUNDING IN THESE AWARDS WILL BE  
2 TO THE FACILITIES AROUND OPERATIONAL ENHANCEMENTS,  
3 BUT THE ACTUAL PROJECTS THAT THEY'RE SUPPORTING FOR  
4 CELL AND GENE THERAPY MANUFACTURING, THE FUNDING  
5 FROM THOSE WOULD STILL FLOW FROM THE TRAN AND CLIN  
6 AWARDS AND WILL BE CONTROLLED BY THE SPONSORS  
7 THEMSELVES. SO THE ACTUAL PROJECT SUPPORT IS COMING  
8 FROM OUR PIPELINE PROGRAMS, BUT THIS FUNDING  
9 MECHANISM AND THE FUNDING HERE IS FOCUSED WITH  
10 OPERATIONAL ENHANCEMENTS BEING MADE AT THE  
11 FACILITIES AND IN THAT SENSE IS PRETTY ANALOGOUS TO  
12 THE ALPHA STEM CELL CLINICS FUNDING OPPORTUNITIES.

13 SO NEXT SLIDE PLEASE. SO ALL OF OUR  
14 CURRENT FUNDING OPPORTUNITIES ADDRESS DEI AS WELL AS  
15 KNOWLEDGE SHARING. SO I'M JUST GOING TO BRIEFLY  
16 WALK THROUGH BOTH OF THOSE COMPONENTS THAT ARE  
17 ADDRESSED IN THIS PARTICULAR CONCEPT PLAN.

18 WITH RESPECT TO DIVERSITY, EQUITY, AND  
19 INCLUSION, THE APPLICANTS MUST PROPOSE A PLAN TO  
20 DEMONSTRATE HOW THEIR TRAINING PROGRAMS IN  
21 PARTICULAR WILL ENSURE PARTICIPATION BY UNDERSERVED  
22 POPULATIONS AS WELL AS HOW THEIR PROJECT REPRESENTS  
23 DIVERSE AND INCLUSIVE PERSPECTIVES AND EXPERIENCES.

24 NEXT SLIDE PLEASE.

25 ON THE KNOWLEDGE SHARING SIDE, THE



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1 APPLICATIONS WILL INCLUDE KNOWLEDGE SHARING PLANS  
2 THAT DESCRIBE THE PLAN TO CAPTURE AND DISSEMINATE  
3 RELEVANT KNOW-HOW, OPERATIONAL DATA, PROCESSES,  
4 EXPERTISE AND GUIDANCE IN THE NETWORK. SO THIS IS  
5 ALL THE KNOWLEDGE SHARING COMPONENT WITHIN THE  
6 NETWORK ACROSS THE DIFFERENT PARTICIPANTS THAT WILL  
7 REALLY BE THE COLLABORATIVE GLUE OF THE CONCEPT  
8 PLAN.

9 SECOND IS TO DESCRIBE ANY KNOWLEDGE  
10 SHARING PLANS THAT ARE CRITICAL TO ACHIEVING THE  
11 AWARD OBJECTIVES.

12 AND, LASTLY, IS TO DESCRIBE HOW THEIR  
13 FACILITIES DATA MANAGEMENT PROCESSES WILL SUPPORT  
14 CIRM TRAN AND CLIN AWARDEES TO EXECUTE ON THEIR  
15 RESPECTIVE DATA MANAGEMENT AND SHARING PLANS WHICH  
16 ARE NOW REQUIRED FOR ALL TRAN AND CLIN AWARDS GOING  
17 FORWARD.

18 AND SO I MENTIONED THAT CIRM WILL  
19 COORDINATE A STEERING COMMITTEE. SO I'M GOING TO  
20 DESCRIBE IN THIS SLIDE SOME OF THE FUNCTIONS THAT  
21 THE STEERING COMMITTEE COULD POTENTIALLY DO AND THE  
22 NEXT SLIDE HOW THEY TIE INTO THE ACTIVITIES  
23 THEMSELVES.

24 SO CIRM WILL COORDINATE A STEERING  
25 COMMITTEE OF AWARDEES, CALIFORNIA INDUSTRY PARTNERS,

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1 AS WELL AS A ROTATING GROUP OF NATIONAL STAKEHOLDERS  
2 TO FACILITATE IDENTIFICATION AND ADOPTION OF  
3 STANDARDS, PROTOCOLS, AND BEST PRACTICES ACROSS THE  
4 NETWORK AND TO CREATE POTENTIAL CRITERIA FOR  
5 FACILITY ACCREDITATION. TO MITIGATE CAPACITY AND  
6 EXPERTISE GAPS ACROSS PARTICIPATING SITES. TO  
7 FACILITATE COLLABORATIVE PLANNING FOR PHASE II  
8 PROPOSALS BETWEEN THE ACADEMIC AND INDUSTRY  
9 PARTICIPANTS. TO DEVELOP SYSTEMS AND PROCESSES FOR  
10 SHARING INFORMATION AND RESOURCES BETWEEN NETWORK  
11 PARTICIPANTS. AND LASTLY, TO PROMOTE COLLABORATIVE  
12 DEVELOPMENT AND IMPLEMENTATION OF WORKFORCE TRAINING  
13 PROGRAMS.

14 ON THE NEXT SLIDE I'LL DESCRIBE HOW THE  
15 STEERING COMMITTEE MIGHT PLAY A ROLE ON THE  
16 ACTIVITIES I PREVIOUSLY DESCRIBED A FEW SLIDES AGO.  
17 SO WITH RESPECT TO DERISKING MANUFACTURING, BOTH  
18 COULD BE THE ROLE OF THE STEERING COMMITTEE. WITH  
19 RESPECT TO THE PHASE I AWARDS, THE STEERING  
20 COMMITTEE COULD IDENTIFY QUALITY STANDARDS FOR  
21 ACADEMIC GMP FACILITIES TO ADOPT. IT COULD ALSO  
22 DEFINE THE KNOWLEDGE SHARING PROCESSES THAT MAY BE  
23 REQUIRED BETWEEN THE FACILITIES TO HELP FACILITATE  
24 BEST PRACTICES SHARING.

25 ON THE PHASE II SIDE, THE STEERING

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1 COMMITTEE COULD APPLY THE QUALITY STANDARDS  
2 CONSISTENTLY ACROSS THE NETWORK. THEY COULD  
3 FACILITATE KNOWLEDGE SHARING WITHIN THE NETWORK  
4 THROUGH SYSTEMS AND PROCESSES THAT ALLOW FOR THAT.  
5 AND LASTLY, THEY COULD ACTIVELY TRIAGE PROJECTS BY  
6 EXPERTISE AND CAPACITY ACROSS THE NETWORK.

7 AND NOW THE LAST SLIDE, I'M GOING TO  
8 DESCRIBE THE AWARD INFORMATION. SOME OF THIS IS  
9 INFORMATION I PRESENTED PREVIOUSLY. SO THE OVERALL  
10 PROGRAM BUDGET IS \$80 MILLION. PHASE I IS \$20  
11 MILLION, WHICH WOULD GO LIVE THIS YEAR IF IT'S  
12 APPROVED BY THE BOARD. AND THEN PHASE II WILL BE  
13 DOWN THE ROAD AND WOULD BE \$60 MILLION.

14 THE AWARDS THEMSELVES WOULD HAVE CAPS OF  
15 \$2 MILLION FOR PHASE I AND \$5 MILLION FOR PHASE II.  
16 THE ALLOWABLE COSTS FOR THESE AWARDS INCLUDE DIRECT  
17 PROJECT COSTS AND DIRECT FACILITIES COSTS. THEY  
18 DON'T INCLUDE INDIRECT COST, WHICH IS CONSISTENT  
19 WITH OTHER INFRASTRUCTURE FUNDING OPPORTUNITIES.  
20 AND THEY WILL ALSO INCLUDE A COFUNDING COMPONENT  
21 WHICH WILL BE REQUIRED FOR BOTH PHASES OF AWARDS AT  
22 20 PERCENT.

23 IN TERMS OF APPLICANTS, JUST REITERATING  
24 THE CALIFORNIA NONPROFIT GMP MANUFACTURING  
25 FACILITIES CAN APPLY, AND THEY MUST HAVE A TRACK

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1 RECORD OF CELL AND GENE THERAPY PROJECT SUPPORT.

2 AND THAT'S THE END OF MY PRESENTATION. SO  
3 CIRM ASKS THE BOARD TO APPROVE THIS CONCEPT PLAN,  
4 AND I WOULD TAKE ANY QUESTIONS THAT YOU MAY HAVE.

5 CHAIRMAN GOLDSTEIN: OKAY. LET'S SEE IF I  
6 CAN GET IT RIGHT THIS TIME. IS THERE A MOTION TO  
7 APPROVE?

8 DR. HIGGINS: SO MOVED.

9 CHAIRMAN GOLDSTEIN: THAT WAS DAVID.

10 DR. MIASKOWSKI: SECOND.

11 MS. BONNEVILLE: THANK YOU.

12 CHAIRMAN GOLDSTEIN: GREAT. ART, YOU HAVE  
13 A QUESTION?

14 MR. TORRES: THANK YOU, SHYAM, FOR THAT  
15 EXCELLENT PRESENTATION. I JUST HAD A QUESTION.  
16 WHAT IS CONSIDERED A NONPROFIT GMP?

17 DR. PATEL: THAT'S A GOOD QUESTION. SO  
18 MOSTLY IT WOULD BE THE ACADEMIC FACILITIES, ACADEMIC  
19 INSTITUTIONS THAT HAVE GMP FACILITIES, THE ONES I  
20 LISTED ON THE SLIDE. SO THOSE WOULD BE UC'S, CITY  
21 OF HOPE, STANFORD, CEDARS-SINAI, AND SO ON.

22 MR. TORRES: SO WHY DID YOU EXCLUDE  
23 INDUSTRY?

24 DR. PATEL: SO THE REASON FOR THAT IS THAT  
25 THE MAJORITY OF OUR PROJECTS GO THROUGH THE ACADEMIC

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1 GMP FACILITIES AT THE EARLY STAGES. AND SO HERE THE  
2 INTENT IS THAT IF WE START THEM OFF ON THE RIGHT  
3 TRACK IN THE FIRST PLACE, THAT THE LATE STAGE  
4 TRANSITION TO INDUSTRY PARTNERS COULD BE SMOOTHENED.  
5 IN ADDITION TO THAT, WE THOUGHT THAT WHERE THE  
6 FUNDING IS MOST CRITICAL IS FOR THE ACADEMIC  
7 PARTNERS, AND THEN THE INDUSTRY PARTNERS COULD BE  
8 ONES WHO ARE COLLABORATING, PROVIDING THEIR  
9 RESOURCES HERE, AND BEING THE EVENTUAL HOUSE FOR  
10 THOSE LATER STAGE PROJECTS.

11 MR. TORRES: THANK YOU VERY MUCH. THANK  
12 YOU, MR. CHAIRMAN.

13 CHAIRMAN GOLDSTEIN: OTHER QUESTIONS OR  
14 COMMENTS? I ACTUALLY HAVE A -- J.T., GO AHEAD. YOU  
15 HAVE YOUR HAND UP.

16 CHAIRMAN THOMAS: SHYAM, WHEN WAS THE  
17 MANUFACTURING WORKSHOP?

18 DR. PATEL: SO THE MANUFACTURING  
19 WORKSHOP -- AND I APOLOGIZE. ALL THE TIMING IS IN  
20 MY HEAD, BUT I BELIEVE IT WAS LAST YEAR OR COULD  
21 HAVE BEEN THE YEAR BEFORE.

22 MS. BONNEVILLE: NO. IT WAS LAST YEAR.  
23 IT WAS LAST YEAR, SHYAM.

24 CHAIRMAN THOMAS: EARLIER LAST YEAR. I  
25 JUST RAISE THIS JUST TO MAKE THE POINT THAT THE

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1 THINKING ON THE MANUFACTURING PROCESS AND WHAT WE  
2 CAN DO TO BE A PLAYER IN THAT HAS INVOLVED A  
3 TREMENDOUS AMOUNT OF WORK OVER MANY, MANY MONTHS.  
4 JUST THE PLANNING FOR THE MANUFACTURING WORKSHOP AND  
5 GETTING THE ATTENDEES AND EVERYTHING THAT WENT INTO  
6 THAT WAS A HUGE AMOUNT OF WORK. AND ALL THAT'S COME  
7 SUBSEQUENTLY WAS A FUNCTION OF THE LESSONS THAT WERE  
8 DERIVED FROM THAT WORKSHOP AND ULTIMATELY CULMINATES  
9 IN THIS CONCEPT PLAN, WHICH AS YOU CAN SEE FROM ITS  
10 COMPLEXITY AND THOROUGHNESS HAS INVOLVED A HUGE  
11 AMOUNT OF WORK. SO I SAY ALL OF THIS JUST TO  
12 CONGRATULATE SHYAM AND ALL MEMBERS OF THE TEAM FOR  
13 PUTTING TOGETHER A FIRST-RATE CONCEPT PLAN THAT WILL  
14 DRAMATICALLY IMPROVE THE MANUFACTURING ENVIRONMENT  
15 IN CALIFORNIA AND AS A RESULT FOR PATIENTS  
16 EVERYWHERE. JUST A COMMENT TO THAT EFFECT. VERY  
17 WELL DONE.

18 CHAIRMAN GOLDSTEIN: OTHER QUESTIONS OR  
19 COMMENTS? SHYAM, I HAVE A MINOR SUGGESTION, WHICH  
20 IS YOU MIGHT WANT TO MAKE IT CLEAR THAT THIS IS NOT  
21 INCLUDING CHEMICAL SYNTHESIS OR ANTIBODY PRODUCTION,  
22 THAT IT'S LIMITED TO PRODUCTION OF CELLS AND  
23 PROBABLY VIRAL OR OTHER TYPES OF VECTORS.

24 DR. PATEL: THANK YOU, LARRY. AS ALWAYS,  
25 YOUR RECOMMENDATIONS ARE SPOT ON.

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1 CHAIRMAN GOLDSTEIN: THANK YOU.

2 OTHER COMMENTS OR QUESTIONS? PUBLIC  
3 COMMENT? ANYBODY ON THE LINE, MARIA?

4 MS. BONNEVILLE: IF THERE'S ANY PUBLIC  
5 COMMENT, IF YOU COULD PLEASE RAISE YOUR HAND, AND  
6 THEN YOU HAVE THREE MINUTES TO SPEAK. I DO NOT SEE  
7 ANY PUBLIC COMMENT.

8 CHAIRMAN GOLDSTEIN: OKAY. HEARING  
9 NONE --

10 MS. BONNEVILLE: I'M SORRY. ZAC, YOU HAVE  
11 THREE MINUTES.

12 DR. GRODZINSKI: I'M NOT SO FAMILIAR WITH  
13 THESE PROCEDURES. I'M WONDERING WHO IS RESPONSIBLE  
14 FOR TRACKING THE OUTCOME METRICS?

15 DR. PATEL: THANK YOU. THAT'S A GOOD  
16 QUESTION. SO THESE WILL BE BUILT INTO THE AWARDS  
17 THEMSELVES. AND SO THE METRICS WILL BE -- SO  
18 CRITERIA WE ESTABLISH AS PART OF THE AWARDS WOULD BE  
19 TRACKED BY THE AWARDEES AND THEN EVALUATED BY THE  
20 CIRM SCIENCE OFFICERS.

21 DR. GRODZINSKI: THANK YOU.

22 MS. BONNEVILLE: LARRY, WE HAVE ONE MORE  
23 PERSON FOR PUBLIC COMMENT.

24 DR. SAREEN: THANK YOU, GUYS. THIS IS A  
25 GREAT CONCEPT PLAN. I HAVE A QUESTION REGARDING THE

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1 PHASE I PART OF THE PROPOSAL WHERE THERE IS SOME  
2 DESCRIPTION REGARDING SPECIALIZED OFFERINGS THAT ARE  
3 SORT OF SUPPOSED TO FUND POSSIBLY TECHNOLOGY  
4 DEVELOPMENT PLATFORMS LIKE CRISPR OR IPS CELLS OR  
5 AUTOMATION, ET CETERA. IS IT -- SO I ASSUME THIS IS  
6 SOMETHING THAT THE ACADEMIC GMP'S WILL BE DEVELOPING  
7 INDEPENDENTLY OF A CLIENT'S PROJECT OR A PARTICULAR  
8 FOR-PROFIT CLIENT OR NOT-FOR-PROFIT CLIENT THAT'S  
9 ALREADY ONGOING IN THE GMP FACILITY. CAN THEY  
10 LEVERAGE THAT TO BE PART OF THIS PROPOSAL, OR ARE  
11 THE TWO MUTUALLY EXCLUSIVE? IT WILL BE HELPFUL TO  
12 CLARIFY.

13 DR. PATEL: THANK YOU, DHRUV. GREAT  
14 QUESTION. WITH RESPECT TO THAT, SO IT COULD BE THAT  
15 YOU MIGHT HAVE TO DO SOME DEVELOPMENT INDEPENDENT OF  
16 WHAT IS BEING FUNDED THROUGH A PARTICULAR PROJECT.  
17 AND THEN YOU CAN DEMONSTRATE THAT YOU MADE THAT  
18 SPECIALIZATION WITH THAT PROJECT. SO IT DOESN'T  
19 SPECIFICALLY HAVE TO BE COMPLETELY INDEPENDENT, AND  
20 THEY COULD BE RELATED. AND THIS FUNDING MECHANISM  
21 COULD BE USED TO DO SOME OF THE DEVELOPMENT THAT YOU  
22 MIGHT WANT TO DO INDEPENDENTLY OF WHAT MIGHT BE  
23 CONTRACTED THROUGH THAT PROJECT.

24 DR. SAREEN: THANK YOU.

25 CHAIRMAN GOLDSTEIN: THANK YOU FOR THAT



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1 COMMENT AND QUESTION. LET'S SEE. ANYBODY ELSE?  
2 OKAY. IF NOT, THEN WE VOTE.  
3 MS. BONNEVILLE: LOREN ALVING.  
4 DR. ALVING: YES.  
5 MS. BONNEVILLE: MARK FISCHER-COLBRIE.  
6 DR. FISCHER-COLBRIE: YES.  
7 MS. BONNEVILLE: ELENA FLOWERS.  
8 DR. FLOWERS: YES.  
9 MS. BONNEVILLE: JUDY GASSON.  
10 DR. GASSON: YES.  
11 MS. BONNEVILLE: LARRY GOLDSTEIN.  
12 CHAIRMAN GOLDSTEIN: YES.  
13 MS. BONNEVILLE: DAVID HIGGINS.  
14 DR. HIGGINS: YES.  
15 MS. BONNEVILLE: SHLOMO MELMED.  
16 DR. MELMED: YES.  
17 MS. BONNEVILLE: CHRISTINE MIASKOWSKI.  
18 DR. MIASKOWSKI: YES.  
19 MS. BONNEVILLE: JONATHAN THOMAS.  
20 CHAIRMAN THOMAS: YES.  
21 MS. BONNEVILLE: ART TORRES.  
22 MR. TORRES: AYE.  
23 MS. BONNEVILLE: KAROL WATSON.  
24 DR. WATSON: YES.  
25 MS. BONNEVILLE: KEITH YAMAMOTO.

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DR. YAMAMOTO: YES.

MS. BONNEVILLE: THE MOTION CARRIES.

CHAIRMAN GOLDSTEIN: OKAY. THANK YOU,  
EVERYBODY.

ANY FINAL COMMENTS OR QUESTIONS? WE HAVE  
PRETTY MUCH REACHED THE END OF OUR AGENDA. ANY  
OTHER PUBLIC COMMENT NOT RELATED TO THIS TOPIC?  
NOTHING GOING. OKAY. WITH THAT, I SUGGEST THAT WE  
ADJOURN. SEE YOU AT THE NEXT MEETING. THANK YOU  
ALL FOR YOUR TIME.

MS. BONNEVILLE: THANKS, EVERYONE.

(THE MEETING WAS THEN CONCLUDED AT  
11:41 A.M.)

**REPORTER'S CERTIFICATE**

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE VIRTUAL PROCEEDINGS BEFORE THE SCIENCE SUBCOMMITTEE OF THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD ON JULY 22, 2022, WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE REPORTED STENOGRAPHICALLY BY ME AND TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

BETH C. DRAIN, CSR 7152  
133 HENNA COURT  
SANDPOINT, IDAHO  
(208) 920-3543