

Research Directors Meeting
April 23, 2013
Meeting Minutes

Attendees: Robert Touchon, MD, Yoram Elitsur, MD, Frank Shuler, MD, Todd Gress, MD, Tracy LeGrow, PhD, Anne Silvis, PhD, Todd Davies, PhD, Robin Ashford, PharmD, Mary Beth Cordle, MS, Trish Sacconi, CMOM

Called to Order: The meeting was called to order by Dr. Gress.

Agenda: Open format

Introductions: Dr. Gress introduced Todd Davies, Ph.D. (Director of Development and Translation), and Trish Sacconi, CMOM – (Administrator), the two newest members of the Marshall Clinical Research Center staff.

Development of MCRC – Dr. Davies reviewed the following goals/ initiatives for the Clinical Research Center:

- ❖ Grants- Improve the amount and quality of research that is currently coming out of the university.
- ❖ Regulatory Issues/Items – Facilitate and coordinate regulatory processes and issues
- ❖ Measured outcomes – Provide services and coordinate studies in a more cost effective way to the departments.
- ❖ Grant writing – support role in the grant writing, planning, and process while increasing the number of grants. Dr. Davies indicated that he could assist junior faculty in writing and facilitating grants. Discussion was led by Dr. Gress.

Dr. Elitsur led much discussion in regards to the grant writing, matching and funding. He expressed the need for a statistician to increase the grant and research activities within the school of medicine. The idea of creating a web service for statistics was highlighted.

MCRC Fees and Services- Dr. Gress outlined the following fees/services provided by the Research Center:

- ❖ Startup fees -\$2,500
- ❖ Pilot grant money and related services – discussion ensued.
- ❖ Percentages of research income- 40% to the MCRC and 60% to the department (site).

Dr. Gress led much discussion in these regards and indicated that it was vital that each department employ a coordinator with support services being provided by the MCRC staff/coordinator.

Department Updates:

- ❖ Pediatrics – Dr. Elitsur reported that Pediatrics recently held a research consortium with discussions in regards to Methadone use for drug addicts and premature babies. He also reported that at the WV American Academy of Pediatrics conference, 5 researchers presented with 2 orals, of which 2 placed.

Dr. Elitsur also inquired, and led discussions in regards to the abstract regulations are not being followed. He expressed his concern that faculty are not available to assist with the submission of

student abstracts, and concluded that these students are not placing on the national level. He suggested to the group that the faculty/director co-sign each abstract. This would suggest to the students the level of knowledge that is missing in these regards. After much discussion, it was agreed that the faculty/director would be required to sign off on each abstract with a cap of 68.

Research by Resident physicians – Discussion ensued in regards to residents not being mandated to do research. Dr. Shuler reported that each Orthopaedic Resident was required to publish before graduating their program.

Dr. Davies indicated that the scientific methods were significantly missing and that mentors were greatly needed. Discussion ensued and Dr. LeGrow reiterated the validity of having resources/opportunities to assist the students. An open-mic/internal study session concept was openly discussed.

Dr. Gress asked the group to outline specific issues of priority in the following areas:

- ❖ Project review meetings
- ❖ Research in progress sessions
- ❖ Centralized resources – which looks to this group for direction, are not currently in place
- ❖ Research ethics and possibly adding to the curriculum
- ❖ IRB proposal/process resources and assistance - Ms. Cordle reported that recently two studies had been rejected by the IRB due to poor design.

Dr. Touchon led a brief discussion in regards to the difference of clinical and academic faculty and the recruitment needs for additional academic faculty. It was suggested by Dr. Davies for the committee to consider the following items as they relate to mentoring students and residents:

- ❖ Identify seasoned faculty to serve as mentors (minimum of 2-3 from each department) this could initiate the “teach a teacher” concept.
- ❖ Provide them with the necessary resources
- ❖ Central hub for the mentorship idea (i.e. consider should it be school-wide or departmental-wide?)

Dr. Legrow reported that a project in progress approach for her department would be helpful and suggested that RVUs could/should be an initiative for starting such a program. Much discussion ensued. Dr. Gress reminded the committee that support from each department chair was essential and Dr. Davies suggested that an email be sent to rally support (this would assist in identifying those that would benefit from these mentoring resources).

There being no further items for discussion, the meeting was adjourned by Dr. Gress.

Respectfully submitted,
Trish Sacconi, CMOM - Administrator/MCRC