EXECUTIVE SUMMARY, RESEARCH WORKING GROUP

Executive Summary: The Research Working Group was composed of the following people:

- Donna Ambrosino, MD – Director, Massachusetts Biologic Laboratories, Michael Czech, PhD – Chair, Molecular Medicine, Walter Ettinger, MD, MBA – President, UMass Memorial Medical Center; Associate Dean for Clinical & Population Health Research, Jerry Gurwitz, MD – Chief, Division of Geriatric Medicine; Executive Director, Meyers Primary Care Institute, John Keaney, MD – Chief, Division of Cardiovascular Medicine; Professor, Medicine, Craig Mello, PhD – Howard Hughes Medical Institute Investigator, Blais University Chair in Molecular Medicine; Nobel Laureate, Louis Messina, MD – Chief, Division of Vascular Surgery, Melissa Moore, PhD - Professor, Biochemistry & Molecular Pharmacology, Ira Ockene, PhD – Director, Preventive Cardiology Program; David and Barbara Milliken Professor of Preventive Cardiology, Lori Pbert, PhD - Associate Professor of Medicine and Associate Chief, Division of Preventive and Behavioral Medicine, Kenneth Rock, MD – Chair, Pathology, Celia Schiffer, PhD – Professor, Biochemistry & Molecular Pharmacology, Gary Stein, PhD – Chair, Cell Biology, Ronald Steingard, MD – Associate Vice Chancellor & Chief Medical Officer, CWM; Director, Center for Health Policy and Research, Gyongi Szabo, MD, PhD – Director of Hepatology & Liver Center; Associate Director, MD, PhD Program; Professor, Medicine, Zhiping Weng, PhD – Director, Program in Bioinformatics and Integrative Biology; Professor, Biochemistry & Molecular Pharmacology, Philip Zamore, PhD – Gretchen Stone Cook Professor of Biomedical Sciences, and Douglas Ziedonis, MD, MPH – Chair, Psychiatry

The Charge of the Working Group was: To identify and prioritize research areas to develop and expand over the next five years, and to analyze and justify the resource needs to fulfill those priorities. Open meetings were held on Friday, November 30, Friday, December 14, 2007, Thursday, January 3, 2008, Wednesday, January 16, 2008, Wednesday, January 30, 2008, Tuesday, February 5, 2008, Friday, February 15, 2008, and Friday February 22, 2008.

Meetings were well attended and marked by a free flowing discussion. Although the committee was broadly representative, in order to try to obtain suggestions about the direction of research from the entire faculty, a solicitation was sent out to all UMass Medical School faculty. In response to the solicitation, a large number of new programs, and suggestions for additional support for existing programs were received. The working group felt it was beyond the scope of its mission to prioritize all the suggested programs. A list of these areas is provided in Appendix A.

There was considerable discussion about the necessity to continue to maintain and build the basic science infrastructure as well building a clinical research infrastructure. Again, the Working Group received suggestions from faculty members on the support and creation of core facilities. These suggestions are included in Appendix B. In order to understand the overall scope of research planned, the Working Group also requested summaries of the research plans from each Department. These statements varied considerably from Department to Department and included both recruitment packages and “wish lists.” In retrospect, it would have been better to have requested much more specific information and used a template. It is the recommendation of the Research Working Group that a list of all planned recruitments by Departments should be compiled using a standard template that would allow the data to be easily analyzed.

The Research Working Group discussed, at length, the need to invest in areas that would support the advancement of the Academic Health Center. A consensus was reached on the following points:

The workgroup endorses current commitments for research expansion, namely the Department of Quantitative Health Sciences, the Bioinformatics Program, and the Advanced Therapeutics Cluster. However, the work group strongly recommends coordination of these efforts to maximize collaboration and value.
The highest priority recommendation of the workgroup is a commitment to clinical research. Each of the Clinical Centers of Excellence (Cancer, Diabetes/Obesity, Heart & Vascular Diseases, and Musculoskeletal Diseases) must have a well-articulated plan for the development of clinical research within the center.

In order to develop clinical research it will be necessary to recruit mid to senior level clinical researchers to the Clinical Centers of Excellence (Cancer, Diabetes/Obesity, Heart & Vascular Diseases, and Musculoskeletal Diseases) and other emerging research areas (neuroscience, and others). These individuals will serve as a draw for more junior recruits and the ultimate creation of a critical mass in each center.

This can only be achieved by creating the appropriate environment which will include establishing new cores and providing a “platform of support” for clinical researchers to sustain them beyond recruitment packages.

The workgroup recommends the creation of endowed chairs, as well as the infrastructure support (sophisticated instrumentation, core technologies) to attract the “best and brightest” clinical investigators. Examples of infrastructure support for the clinical research initiative include advanced/sophisticated imaging and clinical data management.

The Research Working Group strongly supports commitments to both T1 research (the development of new therapies) and especially to T2 Research (translation of the results of clinical studies into practice). The collaboration of UMMS and UMMHC in the support of research that advances quality and patient safety, and promotes delivery of healthcare to diverse populations is critical to the building of an outstanding Academic Health Center. The support of research that promotes delivery of healthcare to diverse populations is critical to the mission of Commonwealth Medicine and UMass Medical School as a whole. Along these lines a commitment to Quality and Patient Safety is critical to building the Academic Healthcare center and therefore should be considered critical to the Research Mission.

The workgroup strongly recommends the continuing support and maintenance of the infrastructure which has supported the basic science enterprise, and support for growth in infrastructure where needed to maintain our competitive edge.

The workgroup recommends a strategic initiative to assess and build infrastructure for clinical research. Careful consideration should be given to information technology, clinical research organization and imaging among others.

There must be a financial engine to drive the clinical research enterprise. This engine should be a combination of funds generated by development (capital campaign, branding, public relations) and a robust, revenue-generating clinical enterprise.

The Research Working Group felt strongly that there must be a mechanism developed to make decisions on what clinical research initiatives should be supported and this mechanism should be a joint process supported by both UMMHC (UMass Memorial Health Care) and UMMS (UMass Medical School). The Research Working Group favored the development of a joint strategic plan for clinical research. It was felt that this would need input from both UMMS and UMMHC in terms of the resources that could be found and generated in the future and should involve the Department Chairs and other leaders.