

**Breast Cancer Research Council Meeting  
Minutes  
June 2-3, 2000  
Oakland, CA**

**Members Present:** Susan Blalock, Vicki Boriack, Barbara Brenner, Teresa Burgess, Floretta Chisom, Hoda Anton-Culver, Bobbie Head, Akua Jitahadi, Mary Anne Jordan, Liana Lianov, Michele Rakoff, Judith Luce, Tammy Tengs, Anne Wallace

**Staff Present:** DeShawn Boyd, Brenda Dixon-Coby, Sally Dadres, Larry Fitzgerald, Charles Gruder, Marion Kavanaugh-Lynch, Kim Landry, Katie McKenzie, Tabitha Nadolny, Walter Price, Serena Wright

**I. Call to Order and Introduction**

Meeting was called to order at 9:00 am. The interns, Sally Dadres, Tabitha Nadolny, and Serena Wright, were introduced to the Council. Mhel announced that Felicia Hodge resigned from the Council due to her new job in Minnesota

**II. Approval of February 4, 2000 Minutes (attachment )**

Corrections were submitted by Liana Lianov.

**Motion: A motion that the minutes be approved was made by Floretta Chisom and seconded by Barbara Brenner.** Minutes were approved with corrections.

Vicki Boriack asked if the BCRP Staff would distribute a copy of the action items with meeting minutes to ensure follow-up.

**III. Cycle VI Funding**

The Council met in 5 different Programmatic Review Committees to review applications and develop funding recommendations. The Council then re-convened and each committee presented its recommendations.

1. *Finalize Recommendations*

BCRC discussed and selected the grants to be recommended for funding in Cycle VI. (see attached list)

**Motion: A motion was made by Judy Luce and seconded by Barbara Brenner to recommend to the University of California that the grants on the attached list be funded. The motion passed unanimously.**

No grants were recommended for a waiting list for funding.

## 2. *Choose Tax Check Off Grants*

Four of the funded grants were selected to be designated from *Tax Check-off funds*: grants 6JB0118, 6AB1100, 6JB0030, and 6PB0061, totaling \$748,000.

## 3. *Debriefing on Portfolio of Grants and Future Changes to Call*

Issues that were discussed were:

- Programmatic Review vs. scientific merit scores
- Programmatic Review criteria (i.e., “Underfunded” criterion) and how they are/should be defined
- Lack of inclusion of advocates in the research and whether inclusion of advocates should be a requirement
- Lack of clinician involvement in the research
- Possibility of clinical traineeships and/or awards for more senior clinicians
- Whether BCRP should discourage multiple postdoctoral applications from the same lab
- Inappropriate use of technical terms and concepts in Lay Abstracts.

It was suggested that these issues should be reviewed by a Council committee and suggestions brought to a future meeting.

The Council discussed the Cycle VII *Call for Applications*, and any changes that should be made based on the results of Cycle VI. Barbara Brenner and Judith Luce stated that they were concerned about the lack of advocate involvement during the writing of the grant proposals. Vicki Boriack stated that she was concerned about the comprehension of the Lay Abstracts--are they addressing the needs of their target audiences? Yet, the council members agreed that the problem might be due to the lack of thorough readings of the application guidelines. It was suggested that the scientists be given a sample lay abstract for their review.

Put headings on both lay and scientific abstract forms – background, rationale, objective, hypothesis, etc. Also, place bold on Lay Abstract form: **DO NOT USE TECHNICAL LANGUAGE IN THIS ABSTRACT.**

On responsiveness page, place headings of “Responsiveness to Award Type” and “Responsiveness to Priority Area.”

The Council then had an extensive discussion of the role of breast cancer advocates in the research we fund, whether it should be encouraged or required, and how to get this message across to applicants. They also discussed at length the lay abstracts and how the Program can see that they are improved.

**Motion: Barbara Brenner moved the following: “For Cycle VII, applicants will be instructed that failure to submit a Lay Abstract that is comprehensible to non-scientists, as evaluated by a committee of 3 Council members, will put at risk the eligibility of the application for scientific and Programmatic review.” The motion was seconded by Mary Ann Jordan. The motion was subsequently withdrawn.**

**Motion: A motion was made by Hoda Anton-Culver and seconded by Floretta Chisom that staff will write a simple statement to be signed by applicants, stating that the applicant understands that the lay abstract is an important part of the Programmatic Review, and that failure to write a lay abstract that is comprehensible to non-scientists will impact the success of the application. The motion was passed by a unanimous vote.**

#### **IV. Presentation of Results of Reviewer Questionnaires and focus Groups**

Walter Price and Larry Fitzgerald presented the results of the reviewer questionnaires and focus groups. Walter explained the three roles that reviewers were asked to consider: 1. *BCRP Staff or Advisory Council Member*--determine how the program can best spend approximately \$16 million per year and continue to carry out its mandated mission. 2. *Potential Applicants*--What can the program do that would encourage a diverse pool of scientists to apply? 3. *Program Evaluator*--How should we judge whether BCRP is succeeding in its mission?

The reviewers discussed several suggestions on award types: emphasizing career development, (increasing institutional commitment, providing longer-term awards, encouraging more institutions to apply, targeting assistant professors, offering sabbaticals both for Californians to go elsewhere and for out-of-state researchers to come to CA, clinical training awards). The reviewers thought IDEA awards should be encouraged, but some are cut-down ROIs and are not appropriate. The CRC Awards are unique and important. They suggested adding a service funding component. RFA's are also looked at favorably. They also suggested funding small clinical trials. The lack of clinician involvement was noted in several areas.

It was pointed out that our current award types cover the research spectrum well, with the exception of implementation and dissemination research. The addition of awards covering this end of the spectrum should be considered.

The research directions that reviewers thought BCRP should consider are: emphasize earlier detection methodologies, biologically targeted therapy, treatment profiling, academic-biotechnology interfacing, separate the different types of breast cancer, support CRC, and increase disciplines.

The reviewers thought BCRP was a Program of the highest quality and thought it would be difficult to substantially improve the current program. However, a few suggestions were made for improvement, such as: increase public outreach and awareness, focus on

selected important topics, build in more time between cycles, bridge the gaps between "professional advocates" and the lay public and increase the portfolio of health policy research.

Larry Fitzgerald concluded by presenting a summary of the reviewer responses from the questionnaire. Some of the highlights mentioned were: 1) the reviewers liked BCRP's scoring method, in which the scores are broken out into different criteria; 2) the reviewers believe there are priority areas that deserve more attention than they are currently receiving; and 3) the reviewers believe that Health Care policy research is one area that would make the Program stand out.

The council briefly discussed the questionnaire and focus group presentation. The main point was that collaboration is difficult to achieve because there is a language barrier among the different disciplines. The suggestions given to improve communication due to language barriers were:

- Program staff could play a role in bridging the collaborations,
- BCRP can investigate if any other programs have a successful model that encourages collaborations across multiple disciplines,
- Teach basic biology courses and clinical breast cancer courses for investigators (Hoda Anton-Culver will share a curriculum from UCI),
- Encourage post doctoral fellows to visit clinical settings.

## **V. Council Committee Reports**

### **A. Priority-Setting Committee (attachment 7) Call for Applications**

The committee presented their recommendations with the full council. The council made the following amendments to the recommendations. The recommendations are:

1. Discontinue the Prevention RFA
2. Add 2 new RFAs in Health Policy/Health Services and in Racial/Ethnic Differences
3. Separate the IDEA I and IDEA II into 2 more separate awards; increase the duration of the IDEA I to 18 months and decrease the application burden; increase cap for IDEA II;
4. increase cap for New Investigator Awards and decrease institutional commitment required;
5. add back the sabbatical awards and make them more flexible (shorter durations, housing costs, both into and out of California).

The following changes were suggested by the Council:

- 1) In the RFA on Racial/Ethnic Differences in Breast Cancer, edits are "Research disciplines can include **but are not limited to** biological sciences, epidemiology,

clinical research and health services research. Examples of areas of interest include **but are not limited to** the following broad areas; and Contribution of (non-heredity) **social** determinants

- 2) Change the names of IDEA I and IDEA II to "IDEA and Small Grants."
- 3) Change name of Sabbatical to avoid turning people away who are earlier in their careers; Emphasize that the purpose of the Sabbatical is to train people who are already accomplished in their own field to gain new skills in other areas; NOT for entry-level training; NOT replacement for Post-doctoral or New Investigator Awards; applicant must have a minimum 5 years as independent researcher.

The Council developed another new Award Type – the Clinical Research Transition Award – to give experienced breast cancer clinicians the opportunity to pursue research training and to bring clinical experience to bear on the translation of basic laboratory or theoretical research. The applicant must be an independent clinician (minimum of 5 years in clinical practice after completion of training) and have a sponsor who is an established breast cancer research scientist. It is expected that the applicant and sponsor would establish an on-going collaboration and one product would be a future application to BCRP or another agency.

**Motion: Barbara Brenner moved that the recommendations of the committee, as modified above, be adopted for Cycle VII. The motion was seconded by Terry Burgess and approved unanimously by the Council.**

Walter Price informed the Council that BCEDP has received approval to use the patient database for research purposes and will make this data available to BCRP researchers. Mhel requested that Walter obtain agreement that requests come to BCRP and that BCEDP agree to accept our scientific reviews in lieu of any other reviews (not including IRB approvals).

#### **B. Evaluation Committee (Attachment 4)**

The intern Serena Wright is developing an evaluation plan and will submit the findings to BCRP.

#### **C. Dissemination (Attachment 5)**

Teresa Burgess reported that the Oakland Marriott is the committee's first choice for the 2000 Symposium, but she suggested other dates and times in the event the Marriott is not available. Teresa explained that they have a list of possible speakers, but there are no final decisions. In addition, Katie McKenzie told the council that she had attended a face-to face meeting with BCEDP and asked for volunteers to help with the Symposium; there has been no response to date.

Michele Rakoff, Barbara Brenner and Akua Jitahadi shared ideas for exhibits and special presentations that can be highlighted at the Symposium. They will get the information to BCRP for follow-up.

Also Katie discussed the BCRP Newsletter and asked the council if they were interested in writing articles for future issues. She explained that this responsibility would entail writing articles about their specialized field and other editorials. Mary Ann Jordan and Barbara Brenner expressed an interest.

#### **D. Collaboration with BCEDP Committee**

Intern Sally Dadres explained that she's working on a project to determine the current status of the relationship between BCEDP and BCRP and if necessary, to increase and improve communications. Liana Lianov suggested that BCEDP and BCRP have a joint council reception.

Walter Price also explained the BCEDP wanted to know if BCRP was interested in publishing information about their now available database in our next call. The council agreed that Walter would gather information about their database and submit his findings to Mhel. And at that time, Mhel will decide if we should include BCEDP's database into our next Call.

#### **VII. New Business**

##### **A. Election of Chair and Vice Chair**

Council members voted by secret ballots, which were tallied by Larry Fitzgerald. Mary Ann Jordan was elected Chair and Barbara Brenner was elected Vice Chair.

#### **XI. Announcements**

Mhel regretfully stated that Ellen Godstein will not be an consultant for BCRP.

Lastly, Mhel took the opportunity to thank the retiring council members (Floretta Chisom, Bobby Head, Felicia Hodge, Judith Luce, Kevin Scanlon, and Anne Wallace) for their hard work and dedication by presenting each with a plaque.

#### **XI. Adjournment**

**Motion: A motion for adjournment was made by Anne Wallace and seconded by Barbara Brenner.** The motion was passed unanimously and the meeting was adjourned at 2:45 p.m.