### Health Sciences Faculty Council
Minutes March 3, 2004

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| Present: | Chair, D Trauner; D Blanchard; H Chin; DEaster; S Harrity; R Lieber; A Manoguerra; R Mehta; R Pedowitz; K Prisk; M Weinger | • Dr. Trauner called the meeting to order at 5:03 p.m.  
• Minutes for February 2004 meeting were reviewed | • Minutes were approved |
| Unable to attend: | J Corey-Bloom (Resigned); I Grant; M Sawyer | • Dr Jody Corey-Bloom has resigned due to a conflict with the standing meeting time. Need decision about replacing her now, or waiting for the regular election. | • Council agreed it is more efficient to wait for the next regular election |
| Absent: | S Baird; P Fedullo; D Roth | • Project Scientist Series Update -- “Shadow Scale” | • Academic Senate approved the “shadow scale” concept unanimously |
| Guests present: | D Bailey; K Barrett; D Rapaport; M Savoia; J Schneider and Speaker: Dr Gary Firestein | • Thank you to Dr Jerry Schneider for years of service | |
| Recorder: | P Lock | | |

#### Call to Order and Approval of Minutes
- Dr. Trauner called the meeting to order at 5:03 p.m.
- Minutes for February 2004 meeting were reviewed
- Minutes were approved

#### Chair Announcements
- Dr Jody Corey-Bloom has resigned due to a conflict with the standing meeting time. Need decision about replacing her now, or waiting for the regular election.
- Project Scientist Series Update -- “Shadow Scale”
- Thank you to Dr Jerry Schneider for years of service

#### Guest Speaker – David N Bailey, MD, Deputy Vice Chancellor, with Kim E Barrett, MD
- Dr Bailey presented a synopsis of the work of the Gender Equity Task Force (GETF), along with an overview of the Plan of Action for dealing with those results deemed to require action.
- GETF is looking to HSFC to track the education and clinical missions’ disparities (if any) based on faculty gender. Q: What does this mean?
- Stressed that any actions taken must meet all requirements of Proposition 209
- What is the time line to implement the action plan?
- NCLAM was suggested as a good avenue for assisting junior faculty with career development.
- Q: Does HSFC feel the report should be disseminated to the entire faculty?
- A: Are women or men being singled out for work in education, rather than clinical? Please think about ways to track and analyze these contributions.
- Most of the plan will be implemented this year, and the balance as soon as possible.
- Discussed at length the importance of insuring the Action Plan is disseminated with the report.
- ACTION: The report and Dr Bailey’s presentation with the Action Plan will be reviewed by the HSFC. HSFC will read and review the documents and provide feedback to the Task Force.
- Dr. Bailey agreed to make his presentation, including Action Plan, to the Wed, April 14, 2004 General Faculty Meeting
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| **Guest Speaker, Gary Firestein, MD, Director of Clinical Investigation Institute** | • Dr Firestein presented an update on CII the proposal to receive ORU status.  
• Q: The original concept of CII was presented as “bench to bedside” and the health services portion is no longer as evident.  
• Q: Is it possible to pull more things into the CII? i.e., to integrate more things from around the Campus, such as GCRC?  
• What Grants have been submitted by CII to date?  
• Q: How will CII help junior faculty to do their work? And, what’s the advantage for a senior faculty member?  
• Q: How much will be devoted to clinical research, versus pre-clinical? | • A: A great many people will be part of CII who are health-services oriented. Right now, K12 addresses this specifically. The K12 award will provide much-needed funding to develop the career of young clinical investigators at UCSD. The program is part of the NIH Roadmap and is an interdisciplinary mentored institutional award specifically targeted for senior fellows and junior faculty. If funded, it will obviate the need for individual K23 awards for many junior faculty.  
• A: Some are mandated and cannot be integrated, others will come with time, receiving the ORU designation is a critical first step  
• There are 2 grants "submitted" by the CII right now: Dr. Mehta's K30 competitive renewal (CREST program) and Dr. Kavanaugh's K12 grant. Because the CII is not an ORU yet, they are both actually submitted through the department of medicine.  
• A: Until now everyone had to develop his or her own infrastructure. CII will provide that infrastructure, including assistance with IRB, documentation preparation, administrative help getting recharge systems setup, etc. CII will be a place where someone can hire one-quarter of a Clinical Coordinator.  
• A: Out of 150,000 square feet, 30,000 will be wet lab. There are a lot of plans to involve and include education, and other programs.  
• **MOTION**: Recommending CII for ORU status was approved unanimously. |
| **Committee Reports** | • Nomination Committee was taken out of sequence. Chair M Weinger reported:  
  o Using a web-based process for the Committee Preferences uncovered a few glitches. Overall, we had a slightly higher response this year than last and the process will only get better as we learn from this year.  
  o A preliminary election ballot was discussed | • HSFC members were encouraged to provide Dr
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<td>Adjointment</td>
<td>• The meeting was adjourned at 6:40 p.m.</td>
<td>Weinger with feedback and additional names.</td>
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| NEXT MEETING| • Wednesday, April 7, 2004 at 5:00 pm in the Dean’s Large Conference Room  
• General Faculty Meeting, Wednesday, April 14, 2004 at 5:00 pm in Garren Auditorium |                                                                                                                                        |