

**AMSPC 2020 Meeting Minutes
Nassau, Bahamas**



Saturday, January 25

Welcome and Introductions

President Kent Vrana, Ph.D. welcomed everyone and asked all new chairs to introduce themselves.

Six new chairs were present:

- Cory Abate-Shen, PhD, Columbia University
- Ted Abel, PhD, University of Iowa
- Karen Wilcox, PhD, University of Utah
- Daniela Salvemini, PhD, Saint Louis University
- Nancy Walworth, PhD, Rutgers
- David Mangelsdorf, PhD, UT Southwestern

Dr. Vrana then named the newly elected AMSPC councilors for 2020-2022:

- Donald M. Bers, PhD, UC Davis
- Joan Heller Brown, PhD, UC San Diego
- Scott Waldman, MD, PhD, Thomas Jefferson University

Dr. Vrana then introduced the event coordinator, Ms. Rita Eaddy from Rush University Medical Center who filled in for Sheila Jewart, who was attending a different chairs event. The Junkanoo event for the significant others was announced and Kent also mentioned that this year, he was reinstating the new chairs breakfast with executive committee members and previous chairs

The first speaker, Judy Siuciak, PhD was then introduced.

ASPET Strategic Plan Update: Promoting Pharmacology and Building Communities

Judy Siuciak, PhD, Executive Officer, ASPET

Dr. Siuciak first encouraged all AMSPC members to vote in the 2020 election for council and division officers. The deadline to vote was Friday, February 7, 2020, 5:00 PM EST

She then gave an update on the progress on the 2017 Strategic Plan and its six goals (see below right). There were two notable areas of recent activity: 1) ASPET Council discussions regarding changes in the annual meeting (e.g., decreasing the session length and increasing the number of symposia), 2) the rollout of a new member benefit, the Online Community engagement platform.



Judith Siuciak

Next, Dr. Siuciak then gave a brief overview of the history of ASPET (first meeting in Boston in 1909) and FASEB (first meeting in Philadelphia in 1914) and then the formation of EB 1993, which was established by the original societies, AAI, ASN, APS, ASPET, and ASIP. She then discussed the departure of several societies from EB, AAI in 2008, ASN in 2017, and APS which plans to depart in 2023.

Dr. Siuciak then discussed some of the concerns with EB that have come up over the years, such as the selection of high cost cities and hotels, a practice that does not always serve its members well. She then gave an overview of the various activities and changes that have occurred in recent years to enhance the EB experience:



Strategic Planning
Scheduling improvements
Improved oversight
Cessation of expensive printed materials
Presidential lectures across societies

All society events
Joint society events
Improved marketing
Web design improvements
Poster hour changes

Specific ASPET Efforts

- Diligent program committee involvement
- New strategic Planning
- Symposia
- Abstract reviews

Dr. Siuciak then mentioned some of the EB 2019 Survey Results:

- 1) How well were you satisfied with the EB 2019 Meeting? 88% replied that they were satisfied or very satisfied.
- 2) Would you like to see more joint programming across societies? 71% said yes

As of 2023, EB will be composed of only four societies:

- American Association for Anatomy (AAA)
- American Society for Biochemistry and Molecular Biology (ASBMB)
- American Society for Investigative Pathology (ASIP)
- American Society for Pharmacology & Experimental Therapeutics (ASPET)

The question is: should we (ASPET) stay in EB?

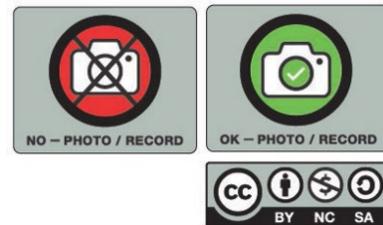
Advantages are:

- EB has a >25 year history so branding is not an issue.
- Economics of scale (more sponsors)
- Societies share members
- Fewer meetings to compete with (1 versus 5)

For the future, AAA, ASIP, and ASBMB have been asked to sign a 4-year term through 2025.

New EB Photography Policy

EB will now provide digital and hard copy icons, which indicate whether you want to allow photos or recordings of your presentation (digital for PPTs, hard copies for posters). If no icon is displayed, photos, videos, and audio are prohibited. If an allegation of noncompliance with this policy is reported to EB officials (contact information on the back of the badge), EB will refer reports of violations to the attendee's organization for its review and handling. EB staff and security personnel will not police or actively enforce noncompliance.



Dr. Siuciak then briefly discussed EBs more general, Code of Conduct and Anti-Harassment Policy, which specifically lists 13 unacceptable behaviors. These behaviors are mostly focused on intimidating, harassing, abusive, discriminatory, and derogatory conduct. Aggressive or harassing photography would fall under these behaviors. Dr. Siuciak then encouraged AMSPC members to share their university's code of conduct policies (best practices) with EB and also indicate how they might handle a code of conduct violation charge from EB. An audience discussion followed. There was a wide discussion regarding the fact that many of these unacceptable behaviors were not being adequately addressed by universities or scientific societies.

The discussion then returned to the Online Community engagement platform. Dr. Siuciak highlighted a number of advantages of the platform and indicated that "engagement matters" and that the program supports all of the goals of the ASPET strategic plan:

- Document storage, retention, and sharing
- Online journal clubs and advocacy webinars
- Membership directories
- Science policy committee discussions
- A listing of your online profile, what divisions, councils, etc., you are in

- The timeline for launching is April 2020 to the divisions for discussions.
- Notifications of events by will occur by e-mail

Next, the POPS Exercises in Pharmacology were briefly discussed and future challenges facing EB and ASPET were discussed.

- All Society Memberships are down
- Younger individuals join and become members, but do not stay very long.
- However, attendance to EB is stable and the number of abstract submissions is excellent.

Finally, there was a brief discussion about the challenges with booking hotels and meeting sites each year and the pros and cons of meeting in Indianapolis (next year's meeting site).

New Chair Presentation

An Unlikely Path: Confessions of a Novice Department Chair

Cory Abate-Shen, PhD, Columbia University

Dr. Abate-Shen was introduced and she began the presentation by discussing her educational background. She initially pursued a BA in Psychology at Fordham University and found the subject matter very easy (made all A's). Her experiences as an undergraduate and time spent in a work-study program got her excited about science. After graduating from Fordham, she pursued a Ph.D. in neurobiology at Cornell University Medical College, then later obtained post-doctoral training focused on transcriptional regulation at the Roche



Cory Abate-Shen, PhD

Institute of Molecular Biology. Dr. Abate-Shen began her independent career in 1991 as an Assistant Professor at the Center for Advanced Biotechnology and Medicine, University of Medicine and Dentistry of New Jersey-Robert Wood Johnson Medical School (now Rutgers Medical School). As a new PI, she expanded her focus on transcriptional regulation and development to cancer (prostate and bladder). In 1999, Dr. Abate-Shen founded the Prostate Program for The Cancer Institute of New Jersey and served as its co-leader until leaving UMDNJ. Over the course of her career, involvement in organizations such as AACR and NCI have afforded her excellent leadership experiences in the Cancer field.

In 2007, Dr. Abate-Shen was recruited to Columbia University College of Physicians and Surgeons as Professor in the Departments of Urology and Pathology & Cell Biology at the Herbert Irving Comprehensive Cancer Center. She was named Chair of the Department of Pharmacology at Columbia University on April 1, 2019.

Dr. Abate-Shen then transitioned to her “confessions of a novice chair”. When asked to apply for the Pharmacology chair position, she said that she was not quite sure what pharmacology really was. She now has a better understanding of the field and realizes

that pharmacology is essentially the study of basic biological and physiological mechanisms and signaling pathways to identify drug-able targets for disease. It is a translational endeavor and it should be the nexus linking basic biology to clinical practice. She then described the Department of Pharmacology at Columbia as composed of a wonderful group of core faculty and that the environment is very supportive. She also mentioned her excellent rapport with the Dean and wondered why he had not decided to combine Pharmacology and Physiology (a common practice these days) after the retirement of her predecessor. She said that he did not want to lose another basic science department.

Dr. Abate-Shen's plans for the department are to build on the existing strengths in cancer biology, cardiovascular biology, and neuropharmacology and expand in chemical biology, metabolism and metabolomics, epigenetics and genomics, and drug discovery. She is also interested in expanding relationships and partnerships with other basic science departments at Columbia, clinical departments, the hospital system, as well as the pharmaceutical industry. Her overarching goal is to build on the long and successful history of the department and direct the focus toward molecular mechanisms and personalized medicine. She has in the works a name change for the department to the "Department of Molecular Pharmacology and Therapeutics". She has openings for eight new faculty positions at all levels and is working on developing the right infrastructure for a larger department.

Dr. Abate-Shen next provided a general overview of her research program. She discussed the Pharmacogenomics of Prostate Cancer and her laboratory's multidisciplinary approach to investigating mechanisms of cancer initiation and progression using in vivo mouse models. Her laboratories have generated unique genetically engineered mouse models (GEMMs) that have provided novel insights into mechanisms of cancer and valuable preclinical models for analysis of new cancer treatments. In collaboration with other laboratories, Dr. Abate-Shen has generated "interactomes" (or regulatory networks) for both mouse and human prostate cancer, using them to pursue cross-species analyses.

She then discussed the process of matching drugs to GEMMs and then to patients with precision modeling and drug exposure analyses. She followed this discussion with the concept of "Cellular Plasticity as a mechanism of drug resistance". Here she described lineage plasticity (moving up Waddington's ladder) and the notion that cancer can be considered as a disease of excess plasticity, which has important implications for treatment interventions and resistance. She cited the example of the antiandrogen abiraterone, which accelerated advanced prostate cancer in a GEM model (Zou et al., 2017) and promoted neuroendocrine differentiation by transdifferentiation of luminal adenocarcinoma cells. The studies provided direct genetic evidence for transdifferentiation as a mechanism of drug resistance as well as for stratifying patients for treatment with antiandrogens.

Finally, Dr. Abate-Shen presented “Prognostic Targets for Cancer Metastasis” and discussed the fact that to date, there have been no adequate mouse models for studying prostate metastasis to bone. Again, using lineage-tracing analyses and GEMMs, Dr. Abate-Shen’s lab is able to demonstrate bone metastases and unregulated/dysregulated genetic factors that promote metastasis.

Current Priorities at the Center for Scientific Review

Noni Byrnes, Ph.D., CSR Director, NIH

Dr. Byrnes opened her presentation by briefly describing the 27 NIH Institutes and Centers and their overarching mission, which is primarily focused on peer review of scientific proposals. As CSR Director, Dr. Byrnes leads a staff of more than 500 personnel who collectively oversee 200 study sections and SEPs and they conduct over 1500 review meetings per year. The bread and butter of the CSR is R01 proposals, but significant efforts also include other types of proposals (R21s, fellowship applications SBIRs, etc.). Dr. Byrnes then said that less than one-half of one percent of the total NIH budget is spent on the CSR. The CSR’s focus is on the quality of peer review and fairness of the study sections and its reviewers. The peer review process should be:



Noni Byrnes, Ph.D

- Confidential
- Unbiased
- Assignments should be carefully considered and fair.
- The underlying principle is that the reviews and decisions are transparent and data driven.

Dr. Byrnes then mentioned that a new CSR office had been created, the Office of Communications and Outreach (also under the CSR Director). This office will focus on increasing engagement with the broader external scientific community, scientific societies, NIH institute/center programs and other agencies. Through communications and targeted outreach (use of blogs, webinars, etc.) CSR aims to further enhance the transparency of the peer review process.

Next, Dr. Byrnes discussed changes in the CSR Advisory Council (CSRAC). It used to be top heavy and composed primarily of study section chairs and senior investigators. The CSR is now recruiting for reviewers at different career stages. Working groups were created to revamp the “Early Career Reviewer Program”. The revamped program was launched in November of 2019. A new rule states that you must have submitted an NIH grant proposal as a PI and have received the associated summary statement.

A working group of the CSRAC was also recently convened to discuss integrity training. The result was a “Review Integrity Training Module” with case studies that will be used

on a pilot basis in Feb/March 2020 for 30 study sections. The launch for all study sections is planned for June/July 2020.

Next Topic: Simplification of the Peer Review Process

CSR wants to refocus NIH reviews on the scientific assessment and reduce reviewer burden because the length and complexity of NIH review criteria has become excessive. A working group will present an interim report that has focused on this subject at the March 2020 meeting of the full CSRAC.

A CSR Anonymization Study Update. A study was conducted where 1200 applications were redacted to make the PIs anonymous and the applications were assessed in mail review format. Preliminary results indicated that the redaction of applications did not appear to make a difference in reviews for African-American applicants while redactions appeared to slightly worsen scores for White applicants. The findings also indicate that over 20% of the reviewers were able to identify the applicants correctly. CSR is working to further assess the results and the next steps are to get the results with all of the de-identified data from the study publically available for further analysis.

Dr. Byrnes also noted that CSR is helping to pilot implicit bias training for SROs, reviewers, and Program Officers. This training is expected to be completed by late 2020 or early 2021.

Redesigned CSR Internet

All 175+ Study Section Descriptions Updated

All 175+ Study Sections Added Scientific Overlap Statements

Incoming Study Section Chair Orientations were completed in the summer of 2019

There is now a two-hour video available

- 15 min overview –chair as a role model, what chairs can do to ensure a culture of integrity/confidentiality, and how chairs can address conservatism in peer review (getting at “significance”).
- 15 min nuts-and-bolts of chairing –pre-, at-and post-meeting expectations, role of chair versus SRO, practical tips.
- 1.5 hours of interactive discussion using a vignette-based framework –facilitated by 2 CSR SROs.

CSR Staff Outreach at Scientific Societies

Actively Seeking Qualified Reviewer Recommendations for IC Program, Scientific Societies, Early-Career Reviewer (ECR)

New, User-Friendly Platform for Entering Reviewer Suggestions -Coming Soon (Spring 2020). Multiple Data Sources → One Interface → User-Friendly for SROs

Changes to Peer Review Practices

Randomizing Application Discussion Order is happening now.

But, why change it?

Instead of ordering discussion by preliminary scores, it is felt that this approach will enhance integrity, fairness, and reviewer engagement.

Active Management of Reviewers to Reduce Undue Influence is advancing, where SROs carefully consider service records and avoid those with excessive service when recruiting reviewers.

- 28,000 reviews have been evaluated thus far.
- There is a small number of reviewers who have served on multiple study sections.
- The majority of reviewers have served in just 1.5 meetings in 12 years, however.

These issues are recognized as critical by NIH and guidelines are being developed.

Reviewer incentives are also being evaluated:

- Continuous submission
- Frequent Flyer Programs

Other recommendations are to:

- Broaden the pool of assistant and associate professors.
- Obtain “balance” to achieve diversity and quality of perspective.
- A mix of senior, mid-career, and junior reviewers is a goal.

These objectives follow the arguments that:

- A reviewer with three R01s is not necessarily any better qualified than a reviewer with one R01.
- A study section with 95% full professors isn't better than one with 40% full professors.

Looking and Study Section Structure

Previous Study Section Evaluations at CSR (2003-2015)

By CSR's internal organizational/management groupings (IRG)

- Input from CSR management only (2004 -2008)
- Input from chairs/selected reviewers (2008 -2011)
- Input from blue-ribbon external scientific working group, given data re: application, workload, bibliometric (2011 –2015)

Problems Identified:

1. Reviews by study sections clustered by CSR organizational structure.
2. Too much info, too broad a scope including both science and process.

Previous Study Section Evaluations at CSR (2015-2018)

Reviewed in scientific, not organizational groupings.

Input from blue-ribbon external scientific working group, given data re: applications, workload, bibliometric data, etc.

Problems Identified:

1. Addressed scientific structure, but not study section function that can affect quality of output –i.e. reviewers, assignments, scoring, discussions, etc.

Evaluating Panel Quality in Review (ENQUIRE)

A New, Systematic Evaluation Framework for CSR Study Sections

ENQUIRE STEP 1: Scientific Evaluation

- Review by scientific clusters, not by management/organizational clusters or IRGs (10-20 SRGs).
- Assemble blue-ribbon External Scientific Working Group of scientifically broad, senior scientists (with interest in more than one SRG).
- Provide enough information for each study section in cluster (current scientific guidelines on web, sampling of titles/abstracts/specific aims, workload trends, bibliometric output of awarded grants, ESI submission and success rates)
- Provide enough time and guidance for meaningful evaluation and recommendations.
- Ask 1 question designed to focus discussion on science, not process: *“How well does the scientific scope of the study sections align with the current state of the science?”*

Multiple Actions for Restructuring Study Sections Considered:

- Change in scientific guidelines
- Merge study sections
- Create new study sections
- Eliminate study sections
- Move an area of science from one study section to another/others
- Add emerging areas of science

ENQUIRE STEP 2: Process Evaluation

- Assemble Process Working Group of NIH (Institute and CSR) extramural scientists with broad perspective and interest in more than one SRG
- Provide process-related information (workloads, web guidelines, scoring trends, survey feedback from reviewers/POs, site-visit information on meeting function/dynamics)
- Provide External Scientific Working Group’s report/recommendations for input
- Questions: *Does the study section function support optimal identification of high-impact science?*

ENQUIRE Characteristics and Timeline

- Systematic, data-driven, continuous process –about 20% of CSR study sections evaluated per year, every study section gets evaluated every 5 years
- Stakeholder input and involvement
- Iterative Approach: Continuous refinement/modification of process based on experience and feedback
- Critical to success –matching referral of applications and reviewer expertise to redefined scientific content of study section

Cluster Formation (completed) → Prioritization of Clusters (ongoing) → External Scientific Evaluation Panel (months 1-4) → Internal Process Evaluation Panel (months 5) → EAWG and CSR Advisory Council (months 6-8) → Implementation by CSR (months 9-12).

Finally, Dr. Byrnes returned to the subject of the “Integrity of the Peer Review Process”

- It is important to all of us.
- Maintaining the public trust in NIH’s stewardship of taxpayer dollars to support biomedical research
- Confidentiality is critical
- Will take the support of the entire research community
- The NIH is taking this subject very seriously, but there needs to be a culture change.

What is the NIH Doing? More reporting/action

ACTIONS

Following up on every allegation

Actions have included

- Deferral of application
- Withdrawal of application
- Removal from serving on peer review committees
- Notifying the institution of the PI or reviewer which has led to personnel actions
- Pursuing government-wide suspension and disbarment, or referral to other agencies for criminal violations

PRO-ACTIVE MEASURES

- Review Integrity Officer
- Enhanced Reporting – SRO signature
- Enhanced SRO Awareness and Training
- Reviewer/Chair Awareness and Training
- Online Module with Case Studies
- Tighter IT controls
- Outreach to scientific community – culture change

What can you do as a study section chair?

- Ensure absolute confidentiality of the meeting materials and proceedings – scores, discussions, application content, critiques.
- No ex parte hallway or dinner discussions (without the entire panel assembled and the SRO present) – model good behavior yourself, call it out when you see it, change the culture, tell the SRO.
- Be prudent about accepting seminar invitations from applicants while their application is under review
- Err on the side of caution – report any potential violations to your SRO or the CSR.

Changes in PhRMA Funding Mechanisms

Gary Rankin, PhD, Marshall University

Dr. Rankin, who serves on the Basic Pharmacology Advisory Committee for the PhRMA Foundation provided the audience with a two-page handout that provided an overview of the changes to the core funding programs offered by the PhRMA foundation in 2021. The new core programs provide grants and fellowships in four categories:

- Drug Discovery
- Drug Delivery
- Health Outcomes Research
- Translational Medicine

The handout provided information about the funding amounts for each category (i.e., fellowship, grant), the review process, and the application process.



Gary Rankin, PhD

Sunday, January 26

Kent Vrana - In Memorium

A moment of silence was observed for the following scientists who recently passed way:

Edson X. Albuquerque, MD, PhD
William C. Buss, PhD
Ernest Hodgson, PhD
Attallah Kappas, MD
Raymond W. Ruddon, MD, PhD
Elliot S. Vesell, MD

George M. Brenner, PhD
Joel Griffeth Hardman, PhD
Lowell E. Hokin, MD, PhD
Gavril Pasternak, MD, PhD
Paul Talalay, MD

Kent then mentioned the election of Dr. Mark Nelson, University Distinguished Professor and Chair of Pharmacology at the University of Vermont, as a member in the National Academy of Sciences.

Understanding Unconscious Bias in the Health Professions and How to Mitigate It

Diana Lautenberger, M.A.

Director, Diversity and Inclusion and Women in Medicine and Science
Association of American Medical Colleges (AAMC)

Ms. Lautenberger began her presentation by briefly describing her background and interests. In her graduate work, she was interested in pursuing opportunities for creativity and chose art education. Later she became interested in studying physician behaviors and issues related to gender equality. She has now been at AAMC for 10 years and has helped to lead the AAMC's efforts to develop policies around gender equity. The purpose of her training workshops and presentations is to provide an overview of the research in this area and to address questions such as “What is unconscious bias and how does it affect the workplace and other important areas of society”?



Diana Lautenberger, M.A.

She then asked the audience “What do you associate with bias or unconscious bias”? Answers included stereotypes related to race and gender, assumptions about qualifications based on looks, etc. While most are negative, they can (in some) circumstances be positive (more later). Ms. Lautenberger then cited a survey where questions were asked about whether people felt respected or disrespected in certain circumstances. One in four women answered that they did not feel respected in the workplace.

Ms. Lautenberger then went on to clarifying the term Implicit versus Explicit bias. Explicit bias is the traditional conceptualization of bias. With explicit bias, individuals are aware of their prejudices and attitudes toward certain groups. Positive or negative preferences for a particular group are conscious. The Charlottesville, Virginia, white supremacists riot would be an example where explicit bias was exhibited. Implicit (unconscious) bias refers to attitudes or stereotypes that are outside our awareness but nonetheless affect our understanding, our interactions, and our decisions. The focus of Ms. Lautenberger’s presentation was primarily on implicit bias. Examples of implicit bias, 1) you are crossing the street and do not trust that someone driving a car will stop, 2) You see a man wearing a hooded sweatshirt and automatically suspect that he is a threat and may have a knife or other weapon, 3) Oprah Winfrey is visiting Switzerland. She is not wearing makeup, is in plain clothes, and enters a shop. She want to look at a handbag that costs \$38K. The sales clerk directs her to the cheaper bags instead.

Internalized bias

Placing women and minorities on search committees should be a good thing. However, if only a few individuals are available this can put undue stress on such individuals. Ms. Lautenberger then cited a CNN Study from 2010 where black and white kids were asked a number of questions, including what skin color they would like to be. The majority of both groups picked white. Other questions revealed that both black and white children had a bias toward white although the bias was somewhat less in the black children.

Interview Opportunities-Resume reviews

Are Emily and Greg More Employable than Lakisha and Jamal? A Field Experiment on Labor Market Discrimination (2004). White sounding names received 50% more callbacks.

Applications for Medical School Faculty: Starting salary offered to “John” higher than “Jennifer”. John seen as more favorable.

Letters of recommendation: Adjectives associated with men and women are often different. For example while male candidates are often described as “a standout”, “highly talented”, women candidates are often described with communal words such as “nice” or “friendly” or other terms like “hard working” etc.

Gendered Introductions are also common (e.g., Male-Dr. Jones, versus female-Jane).

Health Care Decisions and Patterns of Communication:

Cardiac Catheterization Study: Men and whites were significantly more likely to be referred than women and blacks.”

Verbal versus nonverbal communication. Verbal communication tends to be the same regardless of race whereas, nonverbal communication is often different. Example: end of life discussions-Clinician may come into the room, engage in difficult discussions, and touch the patient. This behavior is less common when the patient is a minority.

Pain Assessment:

Assessment Racial Bias in Pain Assessment (PNAS Study 2016).

False Beliefs

- Blacks age more slowly than whites.
- Blacks’ nerve endings are less sensitive than whites.
- Black people’s blood coagulates more quickly than whites.
- Whites have larger brains than blacks.
- Blacks’ skin is thicker than whites.
- Whites have a more efficient respiratory system than blacks.
- Black couples are significantly more fertile than white couples.
- Blacks have stronger immune systems than whites.

Ms. Lautenberger then presented a slide that said:

As you look at each slide, note the feelings, judgments, and reactions that emerge. Four slides were presented which showed people who were later described by the audience with terms like: 1) Biker dude or gang member, 2) grouchy curmudgeon or professor, 3) Beauty queen, but probably shallow, 4) teacher or professional with nice smile. In actuality, 1) was of John Fetterman, Mayor of Braddock, PA who has a Master's degree in Public Policy from Harvard, 2) Harold Shipman MD, General Practitioner and Britain's most prolific serial killer, 3) Oxana Federova, PhD, Miss Universe 2002, Russian police captain and fashion model, with a PhD in civil law, 4) Mae Jemison, MD, Physician, Professor, and U.S. Astronaut.

What patterns did you notice?

Gender, Skin tone, Setting, Body type, Body posture, Clothing, Facial expression, Ethnicity, Age

A slide was then presented that asked: Which biases are ours? And the following examples were listed: Height, Sexual Orientation, Appearance, Weight, Accent, Skin Tone, Hand Dominance, Race, Gender, Name, Religion, Disability, Communication Style, Age. Another slide was presented where to some in the audience it looked like a map and to others it looked like a cow. Organizational Perceptions, We cannot unsee our original perceptions.

What function does bias serve? From an evolutionary perspective:

- Ensures our survival (rapid decision of friend versus foe and fight-flight response)
- Part of automatic survival tendency (short cut to interact with our world)
- Natural tendency to feel comfortable with people who are like us

It takes 20% more glucose to change an original perception.

Ms. Lautenberger then briefly discussed our automatic responses and our Fast Emotional Brain (limbic system) and our Slow Thinking Brain (Metacognition and our prefrontal cortex).

Next, she presented an example of the "Stroop Effect". The effect (named after the famous American psychologist, John Stroop) occurs when there is a mismatch between the name of a color (e.g., "blue", "green", or "red") and the color it is printed on (i.e., the word "red" printed in blue ink instead of red ink). When the audience was asked to name the color of the word, it took longer and was more prone to errors when the color of the ink did not match the name of the color. The test demonstrates cognitive interference where a delay in the reaction time of a task occurs due to a mismatch in stimuli.

Then showed a video (whodunit mystery) vignette and a radiology slide based on the book "The Invisible Gorilla" by Christopher Chabris and Daniel Simons. Most of the

audience missed the gorilla in the video and the radiology slide thus demonstrating our illusions of attention, perception, memory, and reasoning, faulty intuitions etc.

She next showed the FEDEX Express commercial where the CEO basically repeats the same idea that one of his subordinates had already mention, but he suggest the idea with great confidence. The video demonstrates the “Illusion of Competence”. The confidence does not equal competence.

She next showed a slide with the title “Seeing Our Social Lens” and explained that how we see “me” versus you can be strongly influenced by:

- Culture (where you grew up)
- Group (your gender, race, sexual orientation)
- Individual (e.g., you were one of five siblings)
- Institutional Identity (religion, university, military)

Next, a picture (entitled: What we see) of a roller coaster was shown with descriptions on one side: Fun, Exciting, Scary and on the other side: Nauseating, Exhilarating, Dangerous. The next slide (entitled What is Really There), Welded steel, Bright paint, Nuts and Bolts, Curved design

Then a picture of a black man (again entitled: What we see) was shown with descriptions on one side: Well Groomed, Intelligent, Expressive, Stoic and on the other side: “One of “those people”, Socially Inept, Rebellious, Unfriendly. The next slide (entitled: What is Really There), Hair, Earrings, Glasses, Neutral, Expression.

We see the world through our own lenses rather than the way it really is. Other Factors to consider:

Disability	Competence/Warmth	Location
Accent	“Good Feeling”	Introversion
Extroversion	Weight	Name
Gender Identity	Gender Expression	Unique Mannerisms
Performance vs Potential	Distracting Visual Content	

Howard Ross. (2014). Everyday Bias: Identifying and Navigating Unconscious Judgments in Our Daily Lives.

Process to Mitigate Biases

- Recognize and accept that you have bias
- Develop the capacity to use a flashlight on yourself
- Practice “Constructive Uncertainty”
- Explore awkwardness, and discomfort
- Engage with people you consider “others” and expose yourself to positive role models in that group.

- Get feedback

Additional Practices to avoid biases in decision-making:

- Implement Unconscious Bias training for search committees and ensure that women and individuals from diverse backgrounds serve.
- Implement processes to reduce bias (scoring rubrics with structured interviews)
- Be aware of the immediate reaction you have to names, institutions, activities, etc.
- Be aware of gendered descriptions in reference letters.
- Collect, track, and disseminate data on applicants and hiring
- Ensure that more women and minorities make it to the “finalist” applicant pools.
- Consult AAMC publications on the subject.

New Chair Presentation

Escape from Mitotic and Academic Arrest: Tales of a Yeast Cell Biologist Turned Pharmacology Department Chair

Nancy Walworth, PhD

Rutgers – Robert Wood Johnson Medical School



Nancy Walworth, PhD

Dr. Walworth began her presentation by indicating that prior to becoming chair of the Department of Pharmacology at Rutgers, she had gained significant experience by serving as acting chair and then interim chair for several years. She then provided a brief overview of her academic training. She first obtained a BS from MIT where she conducted undergraduate research on Vitamin D and human skin cell differentiation. She later received a PhD in cell biology from Yale University where she studied secretory vesicles in yeast. Next, Dr. Walworth conducted post-doctoral research focused on cell cycle control and DNA damage at Cold Spring Harbor Laboratory in NY. Subsequently, she received additional postdoctoral training focused on DNA damage at Netherlands Cancer Institute in Amsterdam before joining Robert Wood Johnson Medical School in 1994 as an assistant professor. Dr. Walworth then moved up the ranks and was promoted to associate professor with tenure in 2001 and to professor of pharmacology in 2005.

Dr. Walworth then provided some examples of experiences that helped prepare her to become chair:

- M2 Pharmacology Course Coordinator
- Campus Committee on Research Integrity
- Faculty Council
- Graduate Program Coordinator
- Chair of the Appointments and Promotions Committee on several occasions

Next, Dr. Walworth provided an overview of her scientific interests and research. As eukaryotic organisms, yeast are powerful organisms for studying various components of the cell cycle. In 2001 (based primarily on studies where yeast was the model organism), Paul Nurse, Leland Hartwell, and Tim Hunt won the Nobel Prize in Physiology or Medicine for their discoveries of key regulators of the cell cycle. Fission yeast is an especially valuable model system for identifying and characterizing components of the DNA damage checkpoint. The processes are conserved in yeast → clams → mice → humans. Inhibition of the protein kinase Chk1 increases the sensitivity of cells to DNA damaging agents leading to cell death. As demonstrated in one of Dr. Walworth's early publications (Wan, Capasso, and Walworth, *Yeast*, 1999), Chk1 is phosphorylated in response to DNA damaging agents. Additional genetic and biochemical studies have revealed molecular events that control Chk1 function and the targets of Chk1 that regulate cell cycle progression. Msc1, a protein found to compensate for loss of Chk1 function is a fission yeast homologue of the KDM5 family of proteins. The Msc1 protein appears to be important for histone modifications of chromatin for genomic stability and for survival after DNA damage. Msc1 is an integral component of the fission yeast Swr1 complex which is required for histone variant H2A.Z incorporation into chromatin, and it exhibits E3 ubiquitin ligase activity. In studies published in 2015 (George and Walworth, *Genetics*, 2015) Dr. Walworth demonstrated that defects in Dis1, a microtubule-associated protein that influences microtubule dynamics, lead to mitotic arrest as a result of an active spindle assembly checkpoint (SAC) and consequent failure to grow at low temperature. Moreover, mutation of Msc1 (i.e., loss of function of Msc1), overcame the cold sensitive mitotic arrest of Dis1.

In summary, the KDM5 family proteins (including Msc1 homologs) are found in various protein complexes with other proteins that mediate chromatin modification. As such, they may serve regulatory roles and modulate local chromatin structure to affect a variety of nuclear functions: transcription, chromosome compaction, or chromosome segregation. Accordingly, KDM5-related proteins are considered as important therapeutic targets in cancer drug discovery.

Dr. Walworth then returned to her pathway to becoming a department chair. In addition to her research programs, Dr. Walworth has mentored eight Ph.D students, 4 MS students, and dozens of undergraduate students, many of whom have gone on to graduate or medical school. As noted earlier in her talk, in 2010, Dr. Walworth became the M2 Pharmacology Course Coordinator and participated in the planning and implementation of a systems based curriculum. During a brief sabbatical (July-Dec 2010) she worked with four other yeast biologists at Bangor University, North Wales. In 2011, she became co-director of the Graduate Programs in Molecular Biosciences, an umbrella program that recruits, admits and provides a comprehensive curriculum to first-year graduate students for five PhD degree-granting programs in the biomedical sciences. In the summer of 2012, NJ Governor Chris Christie signed into a law a bill that merged UMDNJ and Rutgers. Afterwards, a Laboratory Research Task Force was

created and Dr. Walworth served as chair. In the basic science realm, five departments were reorganized into three departments: Biochemistry & Molecular Biology, Neuroscience and Cell Biology, and Pharmacology (all chaired by women). The administrative support for these three basic science departments was centralized into one unit. Following these major changes, a number of challenges, debates and systems changes emerged:

- Creating a sense of unity and purpose
- Uncertainties related to leadership (Medical School Dean had resigned and a new Interim Chair, a Trauma Surgeon was appointed).
- Hurricane Sandy in 2012 had emphasized the shortcomings of the state's infrastructure.
- Health System Mergers
- New Appointments and Promotions Guidelines Introduced
- Questions and debates related to primary versus regional campuses and what would happen on each campus, what kind of departments, etc.

Dr. Walworth moved on to providing an overview of the RWJMS Department of Pharmacology and its research focus areas including:

Drug Discovery	Cancer Biology	Signaling
Gene expression	Metabolism	Host-pathogen interactions
Immunology	Translational Pharmacology	

She then briefly overviewed some of the Challenges and Risks:

- Considerable Education Commitments: M1 and M2 Medical as well as Graduate Teaching
- Large number of Tenured Full Professors compared to Associate and Assistant Professors
- Inconsistent bridge and seed funds available
- Some of the research facilities are uninspiring for new recruits
- Unoccupied Lab space is discouraging
- The graduate programs span multiple research units, which sometimes creates turf battles
- The centralized financial and administrative support system can create challenges for grants management.

Finally, Dr. Walworth summarized the positive developments new opportunities moving forward:

- Joint recruiting with centers and institutes
- Faculty are committed to the department's success
- The ability of faculty to regain lost funding has been impressive.

- Recruitment of scientists into clinical departments provides new opportunities for collaboration.
- The expansion of clinical and basic science departments provides the need faculty for the expansion of graduate programs to train researchers.

Kent Vrana – Electing the Next AMSPC President

A motion was made for the nominating committee to be composed of the AMSPC Executive Committee. The motion was unanimously passed.

Mary-Ann Bjornsti, Ph.D Announcement:

FASEB Excellence in Science Awards-Nominations are open until March 20th 11:59 PM. The Excellence in Science program has been expanded to include two new awards recognizing achievements by early- and mid-career women scientists. The three award categories are now:

- Excellence in Science Award – Lifetime Achievement (\$10,000 unrestricted grant)
- Excellence in Science Award – Mid-Career Investigator (\$5,000 unrestricted grant)
- Excellence in Science Award – Early-Career Investigator (\$5,000 unrestricted grant)



Mary-Ann Bjornsti, Ph.D.

Dr. Bjornsti mentioned that while there were many nominations last year, not many were from ASPET.

Need nominations of well-rounded individuals who are excellent educators, researchers and mentors. Contacts: Mary-Ann Bjornsti, Ph.D or Yvette R. Seger, PhD.

Washington Update: 2020 Advocacy & Policy Outlook from FASEB

Jennifer Zeitzer

Director of Government Relations, FASEB

Ms. Zeitzer began her presentation by providing several examples of why we should be optimistic:

- Funding increases approved for multiple agencies “21st Century Cures Act” had strong bipartisan support.
- Previous increase in the caps meant more funding for the NIH.
- As of 2018, more NIH Research Project Grants (R01s) were funded with an overall better success rate.
- Results of FASEB advocacy is increased:
 - NIH funding ~\$41.7 Billion (Increased by ~\$2.6 billion)
 - NSF ~\$8.28 Billion (increased by ~\$203 million)



Jennifer Zeitzer

- Other agencies also saw increases (DOE, FDA).

Next, Ms. Zeitzer provided background on the Budget Control Act. Passed in 2011 and placed limits of federal discretionary spending each year through 2021. It has been modified five times to increase the available discretionary spending. The American Taxpayer Relief Act of 2012 addressed some of the budget cuts mandated in the Budget Control Act and it has since been revised multiple times, the most recent one signed by President Trump in 2019. While the new bill set higher caps on defense spending, it did not specify funding allocations to each of the 12 appropriations subcommittees. Federal discretionary spending under current law beginning in 2018 allowed bigger caps, but they have leveled off for 2020-2021.

For the 2021 budget outlook- the caps on discretionary spending increases is 0.4 % (\$5 billion) and there are many competing priorities:

- VA Health Care
- Wall on the Border
- Infrastructure-roads, bridges, etc.

Thus, congress will face difficult choices for how it will allocate the funds.

The president's administration FY2021 R&D Budget priorities highlight a number of cost cutting agendas. While defense spending would increase, cuts to NIH would be made, several agencies under HH&S would be merged/consolidated, and other research agencies would experience cuts. The measures are unlikely to be taken seriously by congress, however Budget timeline- Feb-President's budget sent to congress → from Feb thru May subcommittees evaluate, Full committee evaluates-House and Senate Votes → Congress passes a continuing resolution (CR) to last thru mid to late Nov. What happens next? Capitol Hill will grind to a halt in October then a lame duck congress will be in place until the beginning of 2021.

Jennifer's Predictions:

After impeachment trials ends, Capitol Hill will be distracted by the upcoming election. Congress will make some progress on the FY2021 budget, but NIH and other agencies will be operating on a CR after September.

A government shutdown is possibly, but unlikely in an election year.

Champions for NIH-Roy Blunt (R-OH) and Tom Cole (R-OK)-both get along with Democrats

What is FASEB doing?

Capitol Hill Day, March 12, 2020. 60 scientists from 32 states will fly to Washington, D.C., to visit congressional representatives and ask for their support of research funding and bipartisan endorsement of federal research agencies. AMSPC Dream Team (Mary-Ann Bjornsti and Kent Vrana will participate).

Provides tips and help with:

Letters-to-the-editor (LTE) and opinion pieces (op-eds)

E-Action Alerts

Webinar Series

White House Office of Science and Technology Policy (OSTP)

New Director, Kelvin Droegemeier, conformed by Senate Jan 2019

- Former, Vice President for Research at the University of Oklahoma
- Serves as President Trumps science advisor
- Leads and coordinates all science and technology-related initiatives across the federal government

OSTP Activities:

The Joint Committee on Research Environments (JCORE) was launched in May of 2019 to address the most pressing challenges facing America's research and scientific community. The committee is currently seeking stakeholder input.

In November of 2019, The JCORE Subcommittee on Rigor and Integrity in Research submitted a notice of request for information (RFI) on the American research environment. The subcommittee requests input on actions that Federal agencies can take, working in partnership with private industry, academic institutions, and non-profit/philanthropic organizations, to maximize the quality and effectiveness of the American research environment.

January 17, 2020, OSTP, submitted a notice of request for information (RFI) for data repositories. Specifically, OSTP is seeking public comments on a draft set of desirable characteristics of data repositories used to locate, manage, share, and use data resulting from federally funded research.

NIH Efforts to Address Sexual Harassment

In September 2018, NIH launched an anti-sexual harassment website and published an updated Sexual Harassment policy. A new policy manual chapter was added to provide straightforward guidance for NIH staff including clear definitions, procedures, and responsibilities for all affected parties. NIH is in the process of collecting survey data and new working groups have been formed. Thus far, 75 recommendations are being considered.

NSF Efforts related to Sexual Harassment

In October 2018, NSF published new terms and conditions for grant awards. The new conditions are very straightforward and clear. NSF noted that it has the authority to take unilateral action in sexual harassment cases. A new Diversity and Inclusion web portal has been launched.

Societies Consortium on Sexual Harassment in STEMM

New society launched in December 2018 by three sponsoring societies, the American Association for the Advancement of Science (AAAS), Association of American Medical Colleges (AAMC), and American Geophysical Union (AGU). Now has 123 members including FASEB. The Consortium will make research- and evidence-based resources for addressing issues of sexual harassment to other professional organizations. These resources will include model policies and procedures to use to combat issues of harassment, including policies for meeting and awards and honors. The 2020 work plan includes creating additional model policies/tools/guidelines on investigating incidents, addressing conduct concerns and establishing a consistent continuum of consequences.

Use of Animals in Biomedical Research

Animal rights groups are becoming more influential and powerful and they are getting more money. One effort to instill confidence by the public (and legislators) in the value of animals in research is to insure research reproducibility and rigor. The NIH Advisory Committee to the Director (ACD) has created a working group, the “ACD Working Group on Enhancing Reproducibility and Rigor in Animal Research”. One-third of the external members of this committee are affiliated with FASEB. As an example one external member who began as a graduate student (now a post doc) is Lais Berro, PhD who is member of ASPET.

The charges to the committee include:

- Identifying gaps and opportunities to improve the rigor, reproducibility, translational validity, and transparency of studies involving animal models.
- Create a common vocabulary.
- Evaluate how animal models of human disease are currently developed, validated, and accepted into routine use, and how this process could be improved.
- Assess the current state of science for validating alternative models to animal research
- Consider how rigor in animal research is incorporated into training (e.g., statistical training; experimental design, analysis).

The Next Generation Researchers Initiative (Updates)

This initiative was launched in 2017 to address challenges faced by researchers trying to embark upon and sustain independent research careers and to take steps to promote the growth, stability and diversity of the biomedical research workforce.

- Funding mechanisms to support new investigators have been expanded.
- New versions of NOTs have been released.

Other Science Policy Issues

- Science and Security-Foreign Influence

- NIH will continue to focus on educating PIs and research institutions about disclosure requirements.
- Global Collaborations-FASEB and 59 professional societies have sent letters to federal agencies to seek input from stakeholders as they revisit policies regarding foreign collaborations
- Focus on Lab Safety
 - NIGMS is increasing funding (FOAs) that highlight safety requirements
 - Providing grant supplements for related curricula and safety materials
 - There are standing FOAs (R25 mechanism) for developing safety training

FASEB-Expanding Opportunities for Younger Researchers

- The society is working on expanding opportunities for excellence in science awards
- Looking at more opportunities for leadership
- Focusing on diversity, equity and inclusion-New committee formed in 2019

Finally, Ms. Zeitzer asked the audience to consider the following questions:

- How can FASEB help AMSPC?
- What information is most valuable?
- Are there resources that FASEB can provide?
- What can FASEB do to maintain/improve communication?
- Is there interest in a chairs of the chairs (i.e., of the associations like AMSPC) meeting?

Monday, January 27

Kent Vrana- 2019 (Inaugural) ASPET Fellows Announced:

Susan G. Amara, PhD	James E. Barrett, PhD
David B. Bylund	Christine K. Carrico, PhD
William A. Catterall, PhD	Sue Piper Duckles, PhD
S. J. Enna, PhD	Annette E. Fleckenstein, PhD
Michael M. Gottesman, MD	Frederick P. Guengerich, PhD
James R. Halpert, PhD	Paul F. Hollenberg, PhD
Paul A. Insel, MD	Brian Kobilka, MD
John S. Lazo, PhD	Robert J. Lefkowitz, MD
Kenneth E. Moore, PhD	Richard Neubig, MD, PhD
Charles O. Rutledge, PhD	Elaine Sanders-Bush, PhD
Palmer Taylor, PhD	Lynn Wecker, PhD

* Departments of Pharmacology were very well represented.

The Long and Winding Road: Tales from the Rearview Mirror

Panel of Senior and Emeritus Chairs

Chairs were asked to describe their:

- Greatest achievements
- Greatest disappointments
- Research programs and how they evolved over time
- Provide advice for new chairs

Lorraine Gudas, PhD, Weill Cornell

Greatest achievement- Growing the Department and Graduate Program.

- Graduate program had 2 students when she began, now ~80 students.
- The department has 3 training grants and attracts 15-16 new students each year.



Lorraine Gudas

Greatest Disappointment-Dean's treatment of basic science departments.

Advice for New Chairs:

- Let your faculty pursue what they are passionate about.
- Manage both up and down.
- Spend time face to face with faculty (coffee as opposed to e-mails).
- Support faculty members who are struggling.
- Be proactive to find out what they need.
- Do not nickel and dime faculty with insignificant issues.
- Delegate administrative tasks when possible.
- Keep a sense of humor and do not lose temper with faculty.
- Keep your own research program strong.
- Manage time to address other professional tasks and obligations.
- When hiring new faculty, listen to what your faculty are saying and seek consensus.
- Dr. Gudas learned a lot from other chairs and asked a lot of questions early.
- Found the AMSPC meeting very helpful.

George Corcoran, PhD, Wayne State

Began by commenting that it is fun to reflect on his experiences as chair.

There were two graduate students and one post-doc in his department when he became chair. Now there are 40 graduate students and multiple post docs.

As far as recruiting new faculty members, he has three litmus test questions for the applicants:

1. Are you interested in training graduate students?
2. Are you interesting in teaching graduate students in the classroom?
3. Will you collaborate with our existing faculty?



George Corcoran, PhD

From the perspective of the faculty, they expect the chair to bring the tablet down from the mountain. So how do you achieve the 1+1=3 outcome?

- Gossip is a no-no for starters.
- When problems between faculty members occur, he brings both to his office at the same time to work things out.

Greatest Disappointments

- Lack of success with training grants and center grants.
- The ability to hire people with a common interest has not happened organically.

When Dr. Corcoran became chair at Wayne State, the department was fractured and antagonistic. He later worked with the faculty to develop a strategic plan that basically asked the question: What are our values? Over the years, the department has had a huge increase in extramural funds and has expanded from 11 faculty when Dr. Corcoran was hired to 22 currently. The department is now in the top 15% of pharmacy school faculty with NIH grants.

Working with faculty:

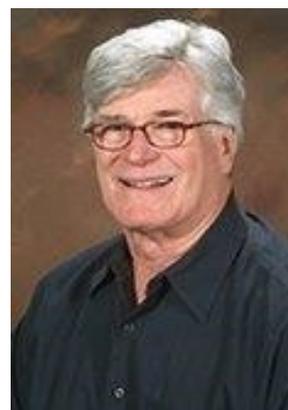
- Pre-tenured- Dr. Corcoran meets with them every month for an hour. Asks them to bring to the table their papers, grants, grants submitted, planned grants, etc. He works with them to identify study section members to invite to Wayne State who might have important advice and so they are familiar with the environment.
- Tenured faculty- Dr. Corcoran also meets with them, but less frequently.
- He is committed to the success of every faculty member (even if they talk behind his back) and he enjoys the success of others. The interim chair he replaced was an example who was originally antagonistic, now is supportive.

Dr. Corcoran said that his research program has waned over the years moving from PI status to CO-PI to CO-I to intellectual contributor. However, he feels that his sacrifice

has contributed to the success of others and he has spent a lot of time with faculty brain storming, reviewing their aims and approach, and advising junior faculty when there are too many people in the space, etc. Finally, he spends a lot of extra time when recruiting new faculty and (for example) takes every candidate back to the airport.

Willie Caldwell, PhD, Medical College of GA, Augusta University

In 1987, Dr. Caldwell came to the Medical College of GA to become the pharmacology chair after spending 15 years in Memphis at the University of Tennessee Health Sciences campus. Looking in the rearview mirror, he needed mentorship and few people have a knack for this without help. He considered Jack McGiff, M.D. Chair of Pharmacology at the University of Tennessee and Leon Goldberg, M.D. Director of its clinical pharmacology program in 1970 as mentors.



R. William Caldwell, PhD

In 1988, Dr. Caldwell attended his first AMSPC meeting, which has been extremely helpful from a mentoring standpoint over the years.

Dr. Caldwell dealt with eight different deans during his tenure as chair. Most were good with a couple of notable exceptions including one who was basically a jerk. This Dean was easily influenced by others, but his tenure was short-lived fortunately. Dr. Caldwell said that his biggest frustration while he was chair was with dealing with administration.

As far as advice for new chairs, he said to be straightforward and earnest with people and when you open up, they tend to open up. Dr. Caldwell served as chair for over 27 years and he considered it as an excellent growing experience, but is glad that he is no longer in this role and was ready to move on when the time came.

Dr. Caldwell finished by giving an interesting overview of the multiple university name changes he had to deal with while serving as chair. The institution had been named the “Medical College of Georgia” since 1828. Then in 2010 the name was changed to “Georgia Health Sciences University, then later to “Georgia Regents University”, then finally to “Augusta University”.

Robert Theobald, PhD, A.T. Still University of Health Sciences

Dr. Theobald said that his greatest accomplishment has been populating his department with good people. All of this faculty members conduct research, and they have been leaders in creating small group experiences. They also created a 4th year medical elective that has been very popular and it has brought basic science back to the medical education process.

His greatest regrets relate to having little success getting other departments to collaborate effectively.

He noted that his personal research has been an escape at times and that it can help him serve as a role model, but in his opinion, it is not the most important aspect of being a chair. He believes that his most important role has been to facilitate the success of others.

His advice to new chairs is to stay involved with the faculty, pick your battles, and do not compromise your principles.



Robert Theobald, PhD

David Taylor, PhD, East Carolina

Took the position as chair of Pharmacology and Toxicology at ECU on January 1, 2001. ECU Medicine has an interesting history; it began as a one-year feeder program for the University of North Carolina-Chapel Hill medical school. When Dr. Taylor began his position at ECU there were six tenured full professors, two junior faculty, and one female faculty member who did all of the teaching, but was only ½ time and paid only \$20K. There have been many challenges along the way, Dr. Taylor managed to get the female faculty member to full time, but it took 12 years. He had to push many things in order to modify the department. For example, the department did not have any type of incentive program for faculty with extremal funding and it took seven years to get incentives for faculty.



David A. Taylor, PhD

He has an open door policy, but does not recommend this for all.

Other challenges. The first Dean left about a month after Dr. Taylor arrived. There was a name change to Pharmacology and Toxicology, but it took 3 years and they had to change the departmental codes, which complicated things. The university went to a shared governance approach (at least theoretically). Dr. Taylor had an excellent

mentor, Bill Fleming who had been chair at West Virginia, but Bill never told him that his primary role as chair would that of a babysitter of adults.

Dr. Taylor has been fortunate in that he has had some leverage since there is only one pharmacology unit in the institution for teaching medical, dental, nursing and allied health (Physician Assistant) students. Early on, he told these divisions, we can teach you, but you have to pay us. While the institution has experienced many budget cuts this leverage has come in handy and it has even helped his research program.

Dr. Taylor's advice is to find priorities and stay committed. The faculty members at ECU had been very unproductive before he arrived, publishing only two papers in nine years. He faced significant legal challenges in dealing with this problem and it took five years of grievances, lawsuits, and civil suits to effectively get solve the problem.

Other bits of advice:

- Talk to other chairs to get ideas.
- Ask how they are able to keep their research programs alive.
- To keep a stable laboratory you have to stay focused and learn about time management.
- Say no to extra commitments (e.g., committees) that are not essential.
- Get help with administrative tasks and hire a faculty level person to assist with this if possible.
- Some universities have a formal mentoring program for new chairs, some offer coaches, and private councilors, etc. Take advantage of this if it is available.
- When communicating with faculty, get the correct prose from HR.
- As the chair, go to the faculty member's office for personal meetings.
- Creative incentives for faculty when possible and build a personal discretionary account for them.
- For building an effective office staff, also use motivational approaches.
- You need an onboarding, mentoring checklist.
- For balancing individual faculty passion with the Dean's or department goals, have retreat with a limited list of common themes.
- Have monthly faculty meetings and manage both from top down and bottom up.
- Never attempt to force faculty members into research areas they are not passionate about. However, in some cases you can be more supportive of one direction versus the other.

The Future of Pharmacology Departments

Kent Vrana, Penn State University.

This is a topic that is discussed most every year, but we should stay solution focused. There are many new medical schools being created, but few have pharmacology

departments. For example, of the 41 new allopathic and osteopathic medical schools, only 9 have pharmacology departments. There seems to be an explosion of Medical Education Departments, Offices, Institutes, etc. The Deans go to national meetings and often come home with bad ideas, but how do we push back?

We need to keep our research programs high profile and need to be able to translate basic science to clinical relevance (pharmacology discoveries to applications). Drug Discovery programs are good examples.



Kent Vrana

Look at how Deans value departments and we can we increase this value, examples include:

- We can help clinical departments get grants.
- Continue to train MD/PhD students
- Form companies (Emory Example).

Other Points:

- Since most new medical schools are not focused on research, the ones that are have to convince the Deans not to merge departments since this will reduce rankings.
- However, pursuing science for its intrinsic value is difficult when the Deans primarily value money.
- We cannot afford to abrogate our teaching responsibilities and have to continue to participate (and increase our involvement) in small group activities and case-based learning.
- If we lose our teaching roles, we will become centers, institutes, etc. and essentially lose our identity.
- While no one-size fits all, we need to continue to aim high with our research programs so the Dean can use our accomplishments for publicity (e.g., newsletters). Publishing a paper in Nature or getting a large grant is good for the Deans PR.
- We should consider getting more undergraduates involved and tap into their tuition dollars.
- Pursue training grants and convince administrations that education is not all about teaching per se, but it also includes training.
- Departments are often judged by medical student's scores on exams, but we are not always the teachers of the relevant subject matter.
- Deans look for what they can measure, but this can change.
- You can sometimes add value outside of your department by having Master Educators/Full time Educator Faculty housed in your department. Kent provided

an example of a Master Educator in his department (Kelly Karpa) who went on to becoming an Assistant Dean for Interdisciplinary Education.

- Consider creating Undergraduate Pharmacology Majors. As an example, there is an undergraduate major at McGill University that has ~400 students enrolled. However, majors may only survive until the next budget cut and you might need to consider an undergraduate course as opposed to a major. May need to get a good sense of the pulse of the university on these types of topics.

Other relevant topics:

- The national boards now have integrated questions, thus medical schools need integrated curricula and this is also a requirement for LCME accreditation.
- But, how do we make the case to our Deans (who are business focused) that we need 20 people (as an example) to teach the pharmacology components.
- For Deans, teaching value and patient care is hard to quantify.
- In contrast, Research dollars as indicated in the medical school department rankings published each year by the Blue Ridge Institute for Medical Research is easy to understand.
- Mary-Ann Bjornsti then commented on the RCM (Responsibility Center Management) Model at UAB, which is a limited funds flow model.
 - The number of faculty, % efforts, etc. directly linked to indirect costs and tuition dollars generated.
 - The model has increased faculty activities as educators and is an incentive for faculty to increase participation in medical, graduate and undergraduate education.

The importance of rankings was briefly discussed:

- High departmental rankings tend to improve relations with biotech and pharmaceutical companies.
- Helps individual faculty members network with these and other research institutions.

The importance of aligning recruitment objectives with the long-term goals of NIH was also briefly discussed.

For the Resources component of the AMSPC Website the “Knowledge Objectives in Medical Pharmacology, 2012 Edition”, edited by Richard Eisenberg, Ph.D. and Carl Faingold, Ph.D. was discussed.

- It has not been updated in over 7 years.
- Are we going to update it or sunset it?
- Do we need a compressive list of drugs?
- Kelly Karpa (Kent’s colleague at Penn State) has created a “100 Topic Cards” approach. Should we create something like this?

- We could look at the IUPHAR/BPS Guide to Pharmacology website.
- Consult the Division for Pharmacology Education (DPE) at ASPET?
- Tap our Medical Educator Faculty?
- What else is out there?

Next Years Meeting Topics:

- How do we increase attendance?
- Invite Pharmacy School Chairs? (may involve changing our name).
- We did this 5-6 years ago. Canadian chairs opposed it, were overruled, then later few Canadian chairs attended the meeting. Should we be more active in reaching out to the Canadian chairs again.
- Invite course directors, T32 directors?
- Announce the meeting earlier?
- Do a better job at reaching out to new chairs?
- Have a combined meeting with Physiology or Biochemistry chairs?
- Each year 90 Pharmacology departments are contacted, but we need to convey the idea that this is a mandatory meeting for leaders in pharmacology like the ASPET/EB meeting.
- Send minutes to all of the chairs as an attachment?

Potential Topics for Next Year Discussion:

- Cluster Hires
- Neurodegenerative Disease
- Biologics
- Neuromuscular junction, Muscular Dystrophy
- Predatory Journals
- Bioinformatics, Big Data, AI
- The Vertex Cystic Fibrosis Drug Development Story (A potential game changer)

Difficult Behaviors and Challenging Situations

Michel Frohman, PhD; Stony Brook

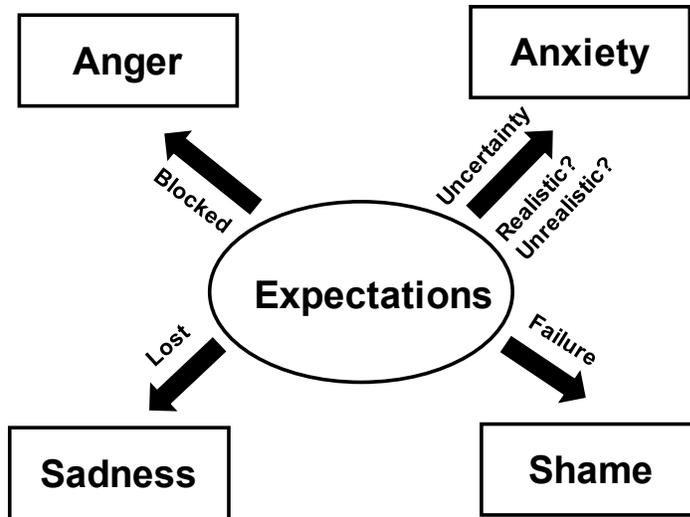
Mary-Ann Bjornsti, PhD; UAB, Birmingham

Dr. Frohman

This is not an opportunity to wine, but we should discuss missteps and good steps when managing expectations versus confrontations. Too many people miss the silver lining because they are expecting gold. We need to serve the role as a cheerleader. Everyone is an individual and we all encounter unknown unknowns.



Michael Frohman



The rub is not so much about salary (many times), but about promotion. Dr. Frohman tells the faculty member that the standards are not necessarily his, but dictated by the P&T committee. He tries to bring a level of reality to the conversations, but considers himself a faculty advocate.



Dr. Bjornsti

- How do we help faculty navigate these various challenges?
- Do we value the multi-PI approach, collaborators, or just the PI?

- How do we support the freedom of the faculty member to choose?
- We all have to be aware of the unintended consequences of communications, especially e-mails. Forwarded e-mails create trails that can lead to accusations that you are trying to trash someone's reputation.
- Audio and video recording and lawyer involvement is now a common occurrence.
- We have to make every effort to deflate confrontational situations.
- An e-mail gold rule is that you be prepared to see it on the front page of the NY Times.



Mary-Ann Bjornsti, Ph.D.

Audience Discussion points:

- At UT Southwestern, the published P&T guidelines are very specific and it is the chair's responsibility to help the faculty members recognize what level they are at. It is recommended that no written letters of support be used in the process, only phone calls.
- At SUNY the process is dominated by clinical departments and seems too watered down.
- At the University of Colorado, there are specific written standards with checkboxes. But, the standards are written for clinical departments. Promotion to associate professor only requires a K-Award or R21 and this doesn't work well for basic science faculty. For basic science faculty there is an expectation that 60% of salary be covered on grants.
- At UAB there is an internal P&T committee evaluation every 3 years that is shared with the Dean. The process is meant to help the faculty members be more accomplished when they go up for P&T.
- At Wayne State (Pharmacy) there is a P&T-related chairs review every year that the faculty member and chair signs. This is to ensure that there are no surprises at the time of P&T.
- At Boston University, there is no tenure. There is promotions process and on average takes eight years for a faculty member to be promoted.

Dr. Bjornsti continued with her comments.

- If chairs advocate strongly for faculty members who have been denied P&T, the decisions are often reversed.
- It is important for the chairs to look for signs of implicit bias and share finding with the administration.
- Team science is important and the "I as a PI" versus "us" should not be supported.
- We should advocate for individuals who are not necessarily PIs if their roles on projects are critical.
- The chair's letter is the most important part of the P&T process.

- The letters from clinical chairs for basic science faculty are not always adequate.
- It is challenging to assist faculty with heavy teaching loads with developing a career path.
- We should document everything we do (memo associated with every meeting, not just from the annual performance evaluation).
- As noted previously, it is not uncommon for disgruntled faculty members to secretly record meetings. When you anticipate a confrontational meeting, consider having another person attend the meeting.

Treasurer's Report

David Busija, PhD, Treasurer

Income from membership dues this year: \$15,550

Total Expenses: \$10,054

Reserve Account: \$42,120.21 (held by ASPET).

We should be creative with the reserve.

There were questions from the audience as to why the meeting registration is not covered in the dues. This will be considered for next year.

David would like to set a threshold for moving funds into the reserve (would like it to be \$15K).



David Busija, PhD

The idea of increasing the meeting registration costs to increase the reserves was discussed. This is a debatable issue since some meeting sites may already be quite expensive.

The question of whether the AMSPC travel awards are published well enough. Currently ASPET handles it. We should consider publishing the awardees on our website and sending them a personal letter.

The question of how many current members we was raised. Answer ~80.

A question was raised as to how the Bahamas site was chosen for the meeting. The original venue (St. Thomas) was destroyed by the hurricane and we lost our deposit. We needed to quickly find an alternate site that wasn't super expensive.

Election of Nominating Committee

Kent Vrana, President

Kent suggested that the AMSPC Officers and Councilors serves as the nominating committee. A motion was made and passed.

Preview of 2021 AMSPC Meeting

Kent Vrana, President

Puerto Vallarta, January 23-28, 2021

- Cost effective (1/2 the costs of Hawaii)
- Multiple direct flights available from US
- Not on the State Department's concern list
- There will be excursions (e.g., Rhythms of the Night – SAVIA, a sunset cruise and dinner show).

Discussions of the 2022 Meeting

Kent Vrana, President

Sheila Jewart has proposed three options:

1. Quito Ecuador, followed by a tour of the Galapagos
 - Would be expensive.
 - Could potentially have the meeting on boat that tours the Galapagos (~\$3,000 per guest).
2. Belize
 - You have to book the site for a week minimum.
 - Bungalows on the beach
3. East coast of Mexico
 - Chichen Itza
 - Cancún
 - Other places on the Yucatán Peninsula