

Research Planning Committee Meeting
Wednesday, February 24, 2016
2:15 p.m.
Doisy Research Center, 9th Floor Conference Room
Minutes

Members Present:

Enrico Di Cera, M.D., Chair
John Edwards, M.D., Ph.D.
Daniel Hoft, M.D., Ph.D.
Robert Fleming, M.D., for Joyce Koenig, M.D.
David Wang, M.D., J.D., for Reigh-Yi Lin, Ph.D.
Michael Rauchman, M.D.
John Tavis, Ph.D.
Joel Eissenberg, Ph.D., *ex officio*
Paul Hauptman, M.D., *ex officio*
Denise Johnson, *ex officio*
Raymond Tait, Ph.D., *ex officio*
William Wold, Ph.D., *ex officio*

Members Not Present:

Thomas Burris, Ph.D.
Dale Dorsett, Ph.D.
Jackie Kornbluth, Ph.D.
John Long, D.V.M., *ex officio*

Guests:

Justin Lacy
Mickey Luna, J.D.

Enrico Di Cera, M.D., chair, called the meeting of the Research Planning Committee (RPC) of the Saint Louis University School of Medicine to order at 2:15 p.m. on Wednesday, February 24, 2016, in the Doisy Research Center, 9th Floor Conference Room.

1.0 MINUTES

The Minutes of the January 27, 2016, meeting were approved as submitted.

2.0 NEW BUSINESS

2.1 Update on HR Issues: Mickey Luna, J.D., vice president for human resources, and Justin Lacy, human resource consultant, were present to provide updates on issues that were discussed at the February 24, 2016, RPC meeting.

Criminal Background Checks: SLU has partnered with AAIM for all background checks. Turnaround time was reduced from 10 – 14 days to 72 hours. New hires no longer have to come onto campus to complete the check.

Summer Students: The onboarding process will start earlier, so students can complete their paperwork well in advance. The issue with out-of-town students should no longer be a problem due to the new criminal background check process.

Visiting Scientists: Scientists coming from other universities can now provide HR with evidence of a CBC and health screening taken within the past year.

Posting New Positions/Refilling Existing Positions: Since the February RPC meeting, the University has established the Staff Strategic Hiring Position Review Process. All new and refilling staff positions are subject to this review.

ePAF: Payroll will review labor distribution ePAFs daily up until payroll runs. While the ePAF due date does not change, labor distribution ePAFs will be accepted after the ePAF due date and before payroll runs.

2.1 Patient Data Base Center: Dr. Tait described several initiatives relevant to "big data," especially enhancing the capacity of biomedical investigators to study data associated with the electronic medical record.

1) He noted that Research Administration is studying mechanisms and business plans that would support the creation of a data analytic platform, including cloud-based servers, software applications, and data analysts, that would serve research and business needs across the University. This is likely to require substantial University funding, and Research Administration presently is engaged in a needs assessment across the University. Members of the RPC were encouraged to engage actively when they are approached for a needs assessment and also to voice ideas about innovative ways that such capacities might be leveraged.

2) Relative to the Epic database, Dr. Tait indicated that SSM is examining and actively planning to integrate their healthcare medical records into a single instance of Epic (the system currently has multiple instances). Once the systems are integrated, Cogito (software customized to interface with Epic) is likely to be implemented, a development beneficial to research across the SSM system. That integration, however, may not be completed until early 2018.

3) In the meantime, he indicated that IT support staff with the Pediatrics Department at Washington University is willing to provide training to IT personnel at SLU on the application of I2B2 to the Epic database. I2B2 is open-source software, so that it comes at no cost, except the skilled IT supports needed for its implementation and operation. The Research Technology Group will do some pilot work with investigators in Community and Family Medicine that is aimed at supporting EMR-based research. If successful, I2B2 might allow SOM investigators to mine medical record data for a range of applications.

4) In order to be able to mine those data, prospective and many longitudinal studies require subject consent in order to obtain IRB approval. Discussions are occurring with SLUCare and SSM, regarding the implementation of "front door" consent. A range of options is under consideration, all in the context of some expectation that DHHS may require "broad consent," an approach that would involve having patients "opt in" to studies, rather than an "opt out" methodology. These conversations continue.

3.0 RESEARCH ADMINISTRATION

3.1 Paul Hauptman, assistant dean, Clinical and Translational Research, announced that there were 51 applicants for the student summer project. The School of Medicine can fund 29 students.

There being no further business, the meeting was adjourned at 3:35 p.m.

Respectfully submitted,
Denise Johnson
Director, Planning and Operations