

## Kick-Off Meeting Minutes May 25, 2007

### In Attendance:

Craig Rubens  
Andrew Scharenberg  
Ann Melvin  
Brenda Majercin  
Donna Russell

Jerry Zimmerman  
Kevin Urdahl  
Michael Cunningham (call-in)  
Scott Weissman  
Tamara Pozos  
Tina Guina

### Introduction:

Heather Lindemann described the reasons for developing a strategic vision and priorities, including providing a common focus and how it can help to improve recognition and funding possibilities.

The hospital's mission will be the mission for each center. In this phase, we will develop a vision and priorities for the center. The outcome will be used by Craig, as center director and the center advisory committee over next 5 years. These steps are necessary in order to move into action plans where more tangible outcomes will be realized.

Because of this it is important to focus our discussions. The following items are outside of the scope of our committee and will be addressed in a different forum.

- a. Center membership determinations. Listed things that are out of scope, being addressed in other places.
- b. Center governance and operational set-up. Cores will follow after this process.
- c. Space planning or moves. We can say what we would like to have, but not actual.
- d. Funding determinations. We can identify needs or programs however determining the set-up or requirements should be done later.

The six centers that are physically housed on the research campus are doing this planning now. These plans will provide a framework for the center that will aid in attracting faculty and donors and will guide major areas of focus moving forward.

### Process:

This is the first of three (3) meetings that will be followed by electronic discussion. The group decided that a blog with discussion thread would be beneficial for this process, so we will work to get this established. Until then, and as necessary, Delila Katzka will receive comments, compile and send them out on a frequent basis, so you don't have to keep up with all of the e-mails.

After the center's vision and priorities are complete, a public forum will be held at the Wright Auditorium in August. You will have the opportunity to present as a group to faculty, staff and researchers. Everyone will have an opportunity to come and provide feedback.

**Vision discussion and brainstorm:**

Craig encouraged the team to think freely and use this as an opportunity for idea generation. A discussion ensued around who the target audience might be and it was decided that it was important to keep the language appropriate for the public at large at this point. Once we get to the program level it would be more appropriate to address the scientific community. The team reviewed a handout of ideas meant only as a jumping off point. They then brainstormed ideas and crafted a draft vision statement:

**DRAFT VISION:**

Through scientific discovery, we will understand, treat and prevent devastating pediatric infections and prematurity. Our research teams will develop effective solutions to end disease so that all kids can grow up healthy. We will focus on pregnant women, premature and newborn babies, immune compromised patients and populations at risk.

What follows are words and phrases from the brainstorming session:

**General public words and phrases:**

Understand & treat

Scientific discovery

Children throughout the world

Prematurity

Prevention – disease

Education

Huge infant mortality

Populations at risk

Immigrant health

Disparities in health care

World scope

Access to care

Critical mass of investigators

Bench to bedside

Applied research/science

Child microbe interaction (germ)

Maternal

Fetal

Cross disciplinary (care, diagnosis, treatment)

Mult-institutional

Develop partnerships

Pathways linking basic discovery with clinical application

Closing the loop

**Scientific words and phrases:**

Infections

Premature birth

Severity

Biologic discovery

Technology development (define, cluster with goals)

Drug discovery/vaccines

Collaboration (fostering)

Integrative investigations

**Unique - Populations at risk**

Pregnant women

Premature infants and newborns

Immuno compromised

Complications of childhood (common) infections

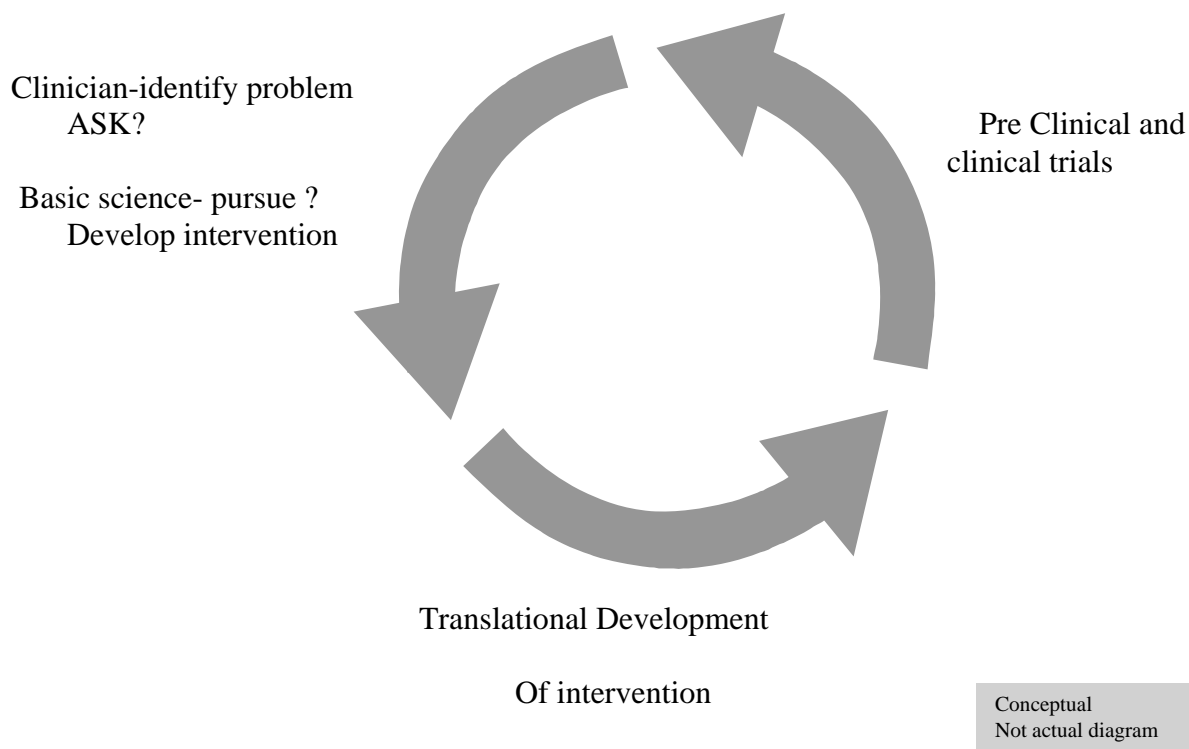
Immigrants, geography, socioeconomic

Due to health care disparity

**Other notes:**

Our research team will link basic discovery with clinical solutions to improve global health.  
Scientists provide effective new ideas.  
We will work together to

Ann Melvin showed her diagram that shows the cycle of bench to bedside research which stimulated discussion for the potential center philosophy. This is a partial representation of her diagram:



**Action:** Set up blog with discussion thread (**Lindemann/Katzka/Russell**)

Submitted by:

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