Council of Faculty and Academic Societies

Committee Reporting Template

Committee:	CFAS Basic Science Committee
Report Date:	11/2/2018
Major Objectives:	One major mission of the working group is to propose/design basic science-relevant content for the upcoming CFAS Spring Meeting in Chicago (April 19-21, 2018). There are two basic categories for these sessions. The *first* goal is to educate the broader membership (clinicians, clinical chairs, society members, etc) regarding the importance of basic science and role of basic scientists in biomedical research centers. This is accomplished by integrating basic science issues into thematic plenary sessions designed to attract clinicians, society members and basic scientists (i.e., cross-education). The *second* goal is to design and promote sessions on issues relevant to basic scientists. This can be accomplished by suggesting/sponsoring breakout groups/symposia directly focused on basic science issues.
Potential Work Products or Milestones for Completion of Objectives, e.g.: • Tools for faculty • Programming, meeting sessions /webinars • Thought papers, commentaries	**1.** Animal Research Regulatory Overburden: A basic science topic titled "*Bench and Translational Discovery Science - Reforming Animal Research Regulations*" has already been submitted for consideration. This is considered relevant since a significant FASEB/AAMC/COGR/NABR report (*Reforming Animal Research Regulations: Workshop Recommendations to Reduce Regulatory Burden*) was recently released proposing ways to reduce animal regulatory burden. **2.** PhD Education: Alternate career training strategies for PhDs and post-docs, maintaining best-in-world basic science expertise, impact of masters programs, translational research option, teaching opportunities, PI view of alternate career training, publishing and career development, best practices, and unintended consequences. **3.** Basic Science Teaching in Medical Curriculum: The role of basic science in curriculum, basic scientists' role in instruction,

	on-line lectures, compression of core concepts, teaching to medical student exams. **4.** Basic Science Faculty Burnout: Forty percent of time is spent on administration/regulatory burden, low funding rate, lack of consistent science funding, not a viable career option, publish or perish, salary caps, institutional role/visibility, tenure meaning, clinical department PhD risks. **5.** Basic/Clinical Interaction: Basic/Clinical philanthropy teams, fueling collaboration, role of department chairs, retreats, grant impact, co-recruiting, MDs in basic departments. **6.** Faculty Stress - The Basic Sciences: A segment of the meeting focused on how stress in academic life is likely to be different from that encountered by physicians. Major stresses include maintaining funding, job security, and dealing with regulatory burden. **7.** Departments versus Centers: The advent of research centers is having an impact on the role of science departments and how this will impact the academic enterprise and role of departments in the future is a topic of concern.
Specific actions requiring Administrative Board or AAMC leadership consideration:	
Committee Comments:	**1.** Animal Regulatory Burden: The first thing discussed was concern over the extensive paperwork and time to IACUC certification of experimental protocols. This is thought to be a major problem relating to university desire to protect itself (over the top internal regulation). The suggestion was to develop a standardized form that applies to all IACUC procedures at all institutions. There was also the concern that the financial pressures on the universities may have reduced staff at IACUC facilities. **2.** Master Degree Programs: The concern is whether these program benefit the student, the university bottom line, or both? It was agreed that justification for such programs should be based on student outcome measures (i.e. does the MS degree enhance the students potential for future advancement?). It was suggested that a “professional account” be developed to make it possible to document student progress (i.e. LinkedIn). **3.** PhD Education Issues: PhD student concerns include time-to-degree and outcomes in terms of career advancement. The

	trend is towards non-academic careers and to develop alternate career training programs. However, this has not been well received by faculty, as they perceive that this will slow student progress and reduce laboratory productivity. Are PhD student individuals we advocate for or are they employees who are there to get work done? **4.** Clinical/Basic Faculty Interaction: The third topic was the interaction between clinical and basic science faculty. In particular does the ever increasing emphasis on RVU's stifle PhD/MD interaction? Additionally, where is the protected time for clinicians to do research (independently or in collaboration). If they are not provided protected time and coverage of the salary cap gap? Is there a best practices model where this problem has been effectively addressed?