



**Wilmot Cancer Institute
Director, Early Phase Clinical Research,
Linde Klein Endowed Professor**

Leadership Profile

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WittKieffer

The Opportunity

University of Rochester Medical Center (URMC) and the NCI Designated Wilmot Cancer Institute (Wilmot) seeks a visionary, inspirational leader with significant experience advancing early phase clinical trials to serve in the inaugural role of Director, Early Phase Clinical Research (Director) at the US' newly minted [73rd NCI Designated Cancer Center](#). This position and this elite milestone offer the unique opportunity to expand a critical component of Wilmot – the program to develop and enhance early phase clinical trials and support developmental therapeutics – during a significant phase of its growth at one of the foremost academic institutions in the nation. This exciting leadership position will be named and supported by the Linde Klein Professorship endowment.

Wilmot provides best-in-class cancer treatment and care to approximately 3 million people in New York State and conducts pivotal research with the goal of preventing and conquering cancer through innovations in science, patient care, education, and community outreach. Wilmot features an 87-bed flagship cancer center, 13 outpatient locations, and one of the state's largest blood and marrow transplant programs. Wilmot is home to the region's first cancer survivorship clinic and one of the nation's first geriatric oncology clinics. Wilmot's 198 oncology physicians and 514 oncology nurses see more than 7,000 new cancer patients each year. In 2024, Wilmot researchers had \$30.9 million in cancer funding, \$25.8 million in peer reviewed funding and over \$14 million in NCI funding.

URMC and UR Medicine (the clinical enterprise) form the centerpiece of the University's medical research, teaching, patient care, and community missions. URMC has an integrated administrative structure, budget, and strategic plan. As one of the nation's leading academic medical centers, URMC ranks among the top quarter of U.S. medical centers in federal research funding, has an overall revenue of approximately \$6 billion, and houses the flagship hospital, Strong Memorial Hospital – an 886-bed quaternary care facility. In addition, URMC includes the School of Medicine and Dentistry, School of Nursing, the Golisano Children's Hospital, Eastman Institute for Oral Health, Sovie Center for Advanced Practice Providers, UR Medical Faculty Group, and UR Medicine comprises seven additional community hospitals.

The Director will advance the Early Phase Clinical Research program for Wilmot, with a focus on creating a robust, clinical trial portfolio supporting Wilmot's patient population and furthering scientific and clinical discovery. This will be achieved through a collaborative spirit of partnership with internal teams, including clinicians and investigators, clinical trials office leadership and staff, as well as basic and translational scientists. This physician leader will partner with external sponsors, regulatory bodies, and collaborative research networks. They will serve as the strategic resource and subject-matter expert on early phase oncology clinical trials. This leader will drive the operational expansion of the program, including organizational design, infrastructure, recruitment of faculty and staff resources, as well as mentorship of junior investigators.

The successful Director will bring expertise in early phase oncology clinical trials, including strategic program assessment and process development to support efficient trial activation and expansion. This leader will have a strong understanding of industry-sponsored, investigator-initiated, and federally funded trials. They will have a track record of developing industry partnerships, cross-departmental collaboration, clinical infrastructure, and organizational processes for trial development. The Director will be a collaborative, transparent, confident yet humble, and visionary leader of teams.

This physician leader will be a strong clinician and investigator. Candidates must possess an M.D., M.D./Ph.D., or equivalent from an accredited school of medicine, be board certified in an oncology specialty, and possess academic accomplishments that merit appointment at the rank of Associate Professor or higher at University of Rochester and be eligible for licensure in the State of New York.

Organization Overview

Wilmot Cancer Institute

UR Medicine's Wilmot Cancer Institute (Wilmot) earned NCI Designation in 2025. It not only provides world-class cancer treatment and care but also conducts pivotal research with the goal of preventing and conquering cancer through innovation in science, patient care, education, and community outreach. Wilmot serves approximately three million people in western and central New York. Established in 1974, it has a long history of outstanding clinical care and research breakthroughs. Wilmot features an 87-bed flagship cancer center – a component of Strong Memorial Hospital, 13 outpatient locations, and one of the state's largest blood and marrow transplant programs. Wilmot is home to the region's first cancer survivorship clinic and one of the nation's first geriatric oncology clinics. Wilmot's 198 oncology physicians and 514 oncology nurses see more than 7,000 new cancer patients each year.

Wilmot by the Numbers



~200

Clinical Trials Available from Symptom Management to Drug Treatments



40

Million Dollars in Cancer Research Funding



13

Outpatient Locations in the Region



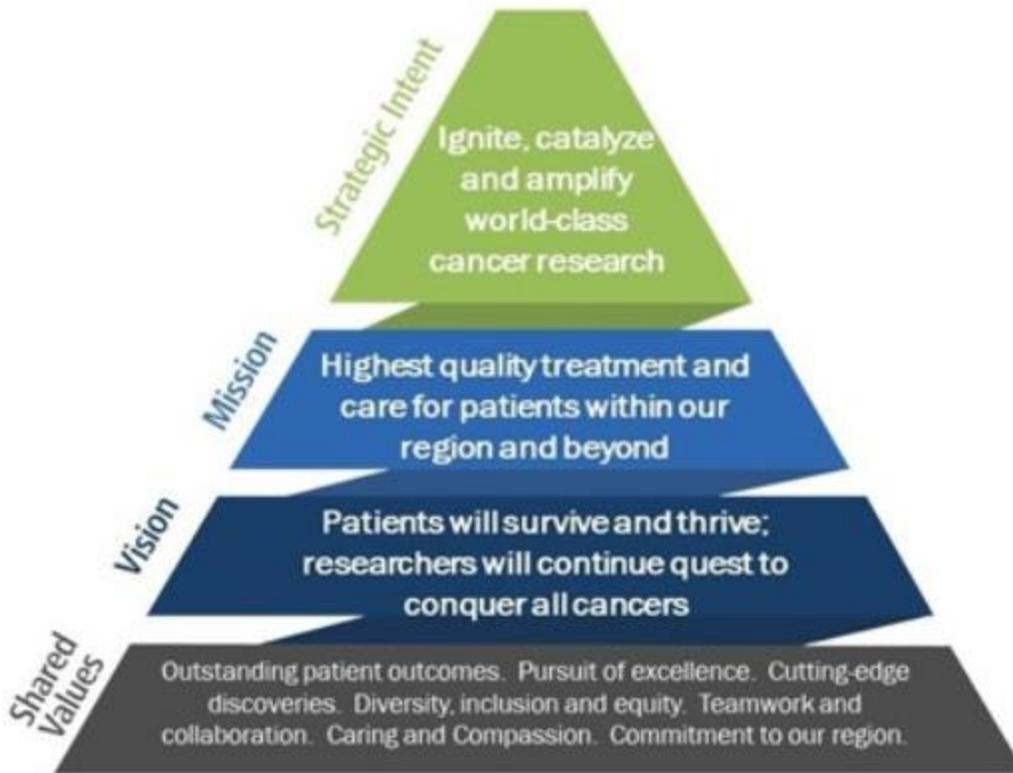
38,000

Patients Treated a Year

Wilmot's 27-county catchment area is composed of a distinct population of more than 3 million people and, if it were its own state, it would have the second-highest overall incidence of cancer in the United States. It includes the highest per-capita Deaf population in the nation, who are confronted with a cancer incidence significantly higher than national averages due to a burgeoning aging population, an alarming smoking rate, and an abundance of predominantly poor urban and rural communities. As the busiest cancer center in the state outside of New York City, Wilmot's clinical volume enables robust clinical trials in both common and rare/complex cancers.



Wilmot achieves breakthrough discoveries and translates them into novel cancer treatments by bringing together experts from multiple backgrounds, perspectives, and disciplines. As part of the University of Rochester, Wilmot researchers thrive through ongoing collaboration across 20 academic departments and 30 clinical specialties. From basic science to clinical trials, collaboration among research programs and cancer specialties is facilitated by co-localization on one campus — which is large enough to attract a critical mass of researchers from around the world, yet just the right size for interactions to take place on a close, personal level. Over the last 11 years, NIH funding at Wilmot has doubled. As the largest cancer care provider in the state of New York outside of New York City, the future presents greater opportunity for expansion at Wilmot Cancer Institute. Over the next five years, URMC will expand its commitment to the cancer enterprise by investing more than \$100 million and adding 100,000 square feet of research space. With NCI Designation, Wilmot joins an [elite class of centers](#) that have been through a rigorous evaluation process and selected to be at the forefront of research, community engagement, education and training, and life-saving care in the United States. The prestigious NCI designation comes with \$10 million in funding over five years to expand patient access to clinical trials and develop new research initiatives.



Wilmot Accreditations and Recognition

In addition to NCI designation, the Wilmot Cancer Institute holds accreditations that include:

- American College of Surgeons (ACS) Comprehensive Cancer Center Accreditation: Recognized for its high-quality cancer care across multiple specialties.
- Quality Oncology Practice Initiative (QOPI) Certification: Acknowledgment of meeting high standards in cancer care administration.
- American College of Radiology (ACR) Accreditation for Radiation Oncology: Accreditation for radiation oncology services across its locations.
- American College of Surgeons National Accreditation Program for Breast Centers: Accreditation for its Comprehensive Breast Care program.
- Foundation for the Accreditation of Cellular Therapy (FACT) Accreditation for Blood and Marrow Transplant Program: Recognized for its adult and pediatric blood and marrow transplant services.
- Magnet Designation by the American Nurses Credentialing Center: Recognition for high standards of nursing care as part of the University of Rochester Medical Center.

Wilmot was rated as “excellent” in discharging patients to home; “very high” in the volume of high-risk patients treated; and “high performing” in leukemia, lymphoma, and myeloma; colon cancer surgery; lung cancer surgery; and prostate cancer surgery. Wilmot was rated as “excellent” for the use of advanced technologies and for patient services.

Research

For half a century, Wilmot research has led to paradigm-shifting discoveries and changes in national oncology standards of care. From the science behind the human papillomavirus (HPV) vaccine, to pioneering cancer-control techniques, groundbreaking hematological-disease research, and novel approaches to pancreatic cancer, Wilmot scientists have been at the forefront of some of the most significant cancer-related breakthroughs.

Wilmot research has one ultimate goal: to improve patient outcomes by converting scientific discoveries into transformational clinical therapies. Wilmot's research strategic priorities in the upcoming years are to:

- Expand developmental therapeutics capabilities.
- Advance and accelerate innovative cellular and molecular research.
- Broaden transdisciplinary research and high-impact interventional treatment trials.

Evidence of Wilmot's leadership in cancer research includes the following:

- Wilmot Cancer Institute scientists aided in two of the top five cancer discoveries of the past 50 years, as cited by the American Society of Clinical Oncology (ASCO): Contributions to the HPV cervical cancer vaccine, and pioneering work toward anti-nausea therapies to help patients tolerate chemotherapy.
- Wilmot is at the epicenter of cancer control research, as one of two U.S. hubs for the [National Community Oncology Research Program \(NCORP\)](#).
- Wilmot is a trailblazer in aging and cancer research, helping write the evidence-based guidelines for managing older patients taking chemotherapy and starting one of the nation's first geriatric oncology clinics.

In 2024, Wilmot researchers had \$30.9 million in cancer funding, \$25.8 million in peer reviewed funding and over \$14 million in NCI funding.

Wilmot's investigators are organized into three multidisciplinary programs: Genetics/Epigenetics/Metabolism; Cancer Microenvironment; and Cancer Prevention/Control. With a framework of collaboration, scientists with diverse expertise study the mechanisms that fuel cancer as well as the side effects and toxicities of cancer and its treatment. A major theme across all research programs is aging and cancer, leveraging longstanding strength at the University of Rochester and in response to the aging population in Wilmot's catchment area. Woven through all Wilmot's research is the Rochester ideal – that great science is linked to great teaching, and community service and engagement.

Cancer Prevention and Control

Researchers in the [Cancer Prevention and Control Program](#) conduct population-based, transdisciplinary, practice-changing studies across the cancer control continuum from primary prevention through survivorship. Cross-cutting themes include behavior change; aging; diversity, health equity and inclusion; and guideline and policy development.

The program focuses on catchment area needs to improve:

- Disproportionately high incidence and mortality rates for specific cancers (e.g., tobacco-related, hematologic, pancreatic/hepatobiliary).
- Low screening rates, high smoking rates, low physical activity rates, and high obesity rates.
- The burden of cancer treatment-related toxicity and side effects.

- Cancer supportive care delivery.
- Inequity and exclusion among individuals who are older, rural residents, Black, Latino, Deaf, or identify as a sexual/gender minority.

The specific aims of the CPC program are to:

- Identify novel, effective interventions to reduce cancer risk in individuals with a high probability for a cancer diagnosis.
- Develop innovative, effective, supportive care therapies for patients, survivors, and caregivers to mitigate the toxicities and side effects caused by cancer and its treatments.
- Develop cutting-edge, effective, system-level supportive care interventions for oncology practices and health care systems to improve outcomes for patients.

Cancer Microenvironment

The [Cancer Microenvironment \(CM\) Research Program](#) leverages expertise in immunology, stem cell biology, radiobiology, and nanotechnology to investigate how the tumor microenvironment impacts the way cancer arises, progresses, and responds to therapy. Collaboration is essential and program members are particularly focused on translational research that impacts myeloid and lymphoid malignancies and pancreatic cancer.

The specific aims of the CM program are to:

- Disrupt and reprogram cancer-promoting microenvironments.
- Restore normal tissue homeostasis from cancer and cancer treatment-induced injury.

The goals of this high-impact basic science program complement the work done at Wilmot's Genetics, Epigenetics, and Metabolism (GEM) research program, and its Cancer Prevention and Control (CPC) program, and involve collaboration with the Community Outreach and Engagement (COE) office to meet the needs of Wilmot's 27-county catchment area.

Genetics, Epigenetics and Metabolism

The goal of the [Genetics, Epigenetics and Metabolism \(GEM\) Program](#) is to better understand the molecular and cell intrinsic processes that normally constrain cancer development, as well as cancer cell survival, evolution, and recurrence. The GEM program achieves this goal through fundamental research that addresses:

- The contribution of genetic and epigenetic disruption and altered gene regulatory mechanisms to cancer.
- The role of cellular and organismal aging in exposing new cellular vulnerabilities.
- The central role of metabolic dysregulation as a defining and exploitable feature of cancer cells.

The GEM program has three specific aims:

- To understand the mechanisms by which altered transcriptional and post-transcriptional gene regulation contribute to aberrant cancer-cell programming.
- To elucidate the role of plasticity and aging in cancer development and disease trajectory.
- To define and exploit vulnerabilities brought about by oxidative stress and metabolic reprogramming.

GEM strives to work toward clinical translation through the development of preclinical models, the identification of novel biomarkers, and by informing early-phase therapeutic strategies and new clinical trials in collaboration with Wilmot's Translational Research Groups. GEM has increasingly embraced principles of community-engaged research to guide its studies.

Clinical Trials

It is part of Wilmot Cancer Institute's mission to explore new treatments through methodically planned clinical trials and careful monitoring of data. Wilmot has dozens of researchers and clinical trial specialists on site with decades of experience in managing studies. In 2024, Wilmot had 225 clinical trials available to patients and 1,538 interventional accruals. As the health system has expanded, Wilmot has expanded regional clinical trial accrual not only to Rochester but also rural locations in Dansville and Webster, respectively.

- Wilmot has one of the largest clinical trial portfolios in supportive care research in the U.S., focusing on how to control cancer's side effects and treatment toxicities and how to better deliver quality care to patients.
- Wilmot has invested heavily in its clinical trials office in recent years, including a new software management platform and new leadership to provide experienced oversight. As a result, Wilmot has more than doubled its enrollment of patients for studies since 2016, and it remains committed to future investments that will help bring laboratory science more quickly to the clinics.
- Immunotherapy is one of the recent bright spots in cancer treatment – a reflection of progress thanks to clinical trials. In 2016, [Wilmot was among the first sites in the nation](#) to offer a clinical trial for CAR T-cell therapy. The following year, [Wilmot was also among the first in the nation to offer CAR T-cell therapy](#). Wilmot continues to provide this innovative treatment for lymphoma and participates in several national clinical trials investigating CAR T-cell therapy in different types of blood cancers.
- Wilmot is part of the [National Cancer Institute's Clinical Trials Network \(NCTN\)](#), [SWOG Cancer Research Network](#), [Children's Oncology Group](#), and [NCI Experimental Therapeutics Clinical Trials Network \(ETCTN\)](#).

Clinical Trials Office

Through its Clinical Trials Office (CTO), the Wilmot Cancer Institute provides centralized research support and serves as a data repository for all oncology-related clinical trials at the University of Rochester. The CTO supports investigators from divisions and departments across the University of Rochester Medical Center, including Hematology/Oncology, Radiation Oncology, Surgery, Urology, and Pediatrics. The mission of the Clinical Trials Office is to provide exceptional centralized infrastructure to support physicians at Wilmot who conduct clinical research. Every effort is made to ensure access and opportunity for all patients to participate in clinical trials, regardless of race, ethnicity, gender, sexual identity, and age. The clinical trials infrastructure scored "outstanding" in the review for the NCI designation.

Wilmot's CTO provides the following services:

- An effective and efficient infrastructure for cancer clinical trials, including protocol development, implementation, coordination, data management, and regulatory oversight.
- Centralized, trained, clinical support staff to assist Wilmot investigators with screening and enrolling patients for clinical research studies, including coordination and timely completion of patient-specific study requirements.
- A central clinical research information repository, facilitation of center-wide communications, tracking of accruals, and monitoring progress of all clinical trials from inception to termination and publication.

- High-quality data, reporting, and compliance with Good Clinical Practice standards.
- Promotion of a culture of learning through quality assessment and improvement processes, as well as education and training for CTO staff and Wilmot investigators.

See the Appendix II for the CTO organizational chart.

Clinical Service Line

Established in 2014, the Wilmot Service Line, under leadership of Wilmot medical director, Dr. Daniel Mulkerin, comprehensively integrates the management of cancer services across departments, subspecialties, and the UR enterprise. The service line is organized into 12 physician-led disease management groups, which focus on improving quality, patient flow, timely patient access; building relationships with internal and external referring providers; strengthening and standardizing tumor boards; and increasing clinical trial accrual on therapeutic studies. Significant accomplishments of the service line include establishment of a genetics and risk-reduction interdisciplinary program; creation of the Judy DiMarzo Cancer Survivorship Program; integration of pediatrics into Wilmot's structure; and establishment of a regional molecular tumor board.

Disease Management Groups

- Bone Marrow Transplant/Leukemia
- Breast
- Gastro-intestinal
- Genito-urinary
- Gynecologic Oncology
- Head and Neck
- Lung Cancer
- Lymphoma
- Melanoma/Sarcoma
- Myeloma
- Neuro-Oncology
- Pediatric Oncology
- Survivorship Program

Interdisciplinary Services

- Cardio-Oncology
- Genetics
- Geriatric Oncology
- Imaging
- Palliative Care
- Pathology
- Psycho-Oncology

Education

Wilmot's faculty is renowned for its expertise and commitment to training the next generation of clinicians and researchers. Wilmot has a coveted NCI-supported T32 grant to recruit and train faculty in clinical and translational cancer-control research, and the University holds four additional cancer-related NIH T32 grants. With a \$12 million endowment, the unique Wilmot Research Fellowship program has supported more than 100 early-career physician investigators over four decades.

Residency and Fellowship Programs

Hematology and Medical Oncology Fellowship Program

Admitting four fellows per year, the Hematology and Medical Oncology Fellowship program provides a unique training environment that gives robust exposure to highly complex cases, therapeutic clinical trials, high-level multidisciplinary tumor boards, and unparalleled access to clinical, basic, and translational research. Program leadership is committed to mentorship and career development for fellows who will have the opportunity to work alongside a multitude of highly experienced and world-renowned sub-specialists in solid tumor and hematologic malignancies.

Pediatric Hematology/Oncology Fellowship Program

Fellows in the Pediatric Hematology/Oncology Fellowship Program, which admits one fellow per year, have the opportunity to study a wide range of hematologic and oncologic diseases, including conditions relating to brain tumors, sickle cell, and bone marrow transplantation. Fellows earn increased responsibility in clinical settings as their knowledge base grows, culminating in the third year of training with a one-month "junior attending" rotation. By the end of their fellowship, they will be well-versed in managing and conducting research and teaching pediatric house staff and medical students. Fellows may also explore many masters-level programs available through the institution, including a Master of Science in Clinical Investigation, Master in Public Health, or Master in Health Professions Education.

Surgical Oncology Fellowship Program

Sponsored by the URMC Department of Surgery, and in partnership with Roswell Park Comprehensive Cancer Center, the Surgical Oncology Fellowship Program is a two-year program that includes 14 months of core rotations in eight surgical specialties, plus two months of subspecialty rotations in medical oncology, radiation oncology, pathology, and palliative care. Admitting four fellows per year, the program has a major commitment to minimally invasive surgery. Faculty on the Upper GI and Colorectal services are committed to advanced laparoscopic and robotic surgery in pancreatic, gastric, hepatic, colorectal, and thoracic surgery.

Gynecologic Oncology Fellowship Program

The Gynecologic Oncology Fellowship Program is a three-year program that involves one year of research and two clinical years (both inpatient and outpatient rotations) and admits one fellow per year. During this time, the fellow will seek training and instruction not only from faculty in Gynecologic Oncology, but also from members of the departments of Surgical Pathology, Radiation Oncology, Medical Oncology, Cancer Genetics, Radiology, Palliative Care, Internal Medicine, and Interventional Radiology. In addition to Phase 2/Phase 3 clinical trials and industry-supported trials, the division is supported by a Phase 1 clinical trials program. The Phase 1 program is unique to the Rochester area as most of the Phase 1 clinical trials are centered in large metropolitan areas.

Radiation Oncology Residency Program

Residents in the Radiation Oncology Residency Program spend approximately 42 of their 48 months of training rotating through the various clinical services. Rotations change every 2-3 months. Residents remain under the guidance of attending physicians for their entire four years of training. As they progress through higher levels of competence, residents are given increasing responsibility for management of their patients, including therapeutic decision making and creativity in developing optimal treatment strategies. Residents spend the majority of their rotation time at Strong Memorial Hospital. Residents gain broad exposure to the entire spectrum of oncology patients and their treatment.

Achieving future innovative laboratory discoveries in cancer research requires a continuous pipeline of science learners. Wilmot is committed to cultivating this pipeline by enhancing education and training programs and encouraging early learners to choose a career path as a scientist or oncologist.

Wilmot is dedicated to addressing gaps in the STEM training pipeline, such as the shortage of learners from diverse backgrounds and underrepresented communities. Its goal is to strengthen ongoing efforts to ensure that clinicians and staff reflect the communities they serve by promoting greater diversity. Wilmot plans to achieve this by creating diverse fellowship programs, securing additional education and training grant funding, collaborating with high schools to identify prospective students, and implementing career enhancement initiatives. Through bold, new curricula and learning modules in cancer for early learners, Wilmot's renowned educational programs will continually evolve to serve patient needs better.

See Appendix I for more information on URM, UR Medicine, and University of Rochester.

Position Summary

The Director will advance the Early Phase Clinical Research Program for NCI Designated Wilmot, with a focus on creating a robust, clinical trial portfolio supporting the region's patient population and furthering scientific and clinical discovery. This will be achieved through a collaborative spirit of partnership with internal teams, including clinicians and investigators, clinical trials office leadership and staff, as well as basic and translational scientists. This leader will partner with external sponsors, regulatory bodies, and collaborative research networks to expand discovery and impact. They will serve as the strategic resource and subject-matter expert on early phase oncology clinical trials to drive the operational expansion of the program through organizational design, infrastructure, and clinical trial expansion. The Director will recruit, develop, and retain talented clinical investigators, faculty, and staff to catalyze the Early Phase Clinical Research Program in a sustainable and focused manner. The Director will be a collaborative, transparent, visionary leader of teams as well as an excellent clinician and investigator. This physician leader will oversee the design, implementation, and management of the Phase I oncology research to ensure scientific rigor, patient safety, and regulatory compliance. This leadership position will be named and supported by the Linde Klein Professorship endowment.

Reporting Relationships

The Director will have a dual/collaborative reporting relationship with the Associate Director for Clinical Research and Associate Director for Translational Research, with a key partnership with the Executive Director of the Clinical Trials Office. They also will have a reporting relationship to the appropriate Department Chair / Division Chief, respectively.

See Appendix II for Wilmot leadership organizational chart.

Expectations for Leadership and Responsibilities

The following represent key opportunities and expectations for the new Director to address within the first 18-24 months of their tenure (not in order of importance):

- Establish themselves as a trusted colleague, clinician, investigator, and leader, and build productive relationships with teams across Wilmot, URMC, and UR Medicine, including leadership teams, faculty, staff, residents, and fellows in key Departments.
- Assess the current state of the Early Phase Clinical Research program to create a vision and an accompanying tactical plan to expand the clinical trial portfolio in a sustainable way and in alignment with and in support of the strategic goals of the Cancer Institute.
- In partnership with the Wilmot Cancer Institute Director and Department Chairs assess current needs to accelerate Wilmot's appeal to passionately recruit and retain faculty, investigators, and staff in clinical research to advance growth and expand the Cancer Institute's clinical trial portfolio to further the missions of the program.
- Build relationships across the clinical and basic science departments, funded investigators, clinical trials office, and Clinical Translational Science Institute to create synergy, excitement, and shared resources for the expansion of the Developmental Therapeutics program.
- Prioritize recruitment of diverse world-class investigators who will contribute to the Early Phase Clinical Research and disease-specific programs.
- Advance a leading, growing cancer clinical trials infrastructure, with a portfolio that includes expanding investigator-initiated, NIH-funded, industry-sponsored trials and collaborative group trials.

- Manage resources across the portfolio to amplify world-class cancer research and expand the number of trials across Wilmot Cancer Institute.
- Build a sustainable infrastructure to support ongoing clinical trials supportive of the institution, regional catchment area, UR Medicine affiliated hospitals, and the local patient population.
- Ensure regulatory requirements are met and serve as the main point of contact for interface with regulatory agencies surrounding the Early Phase Clinical Research Program.
- Lead an active clinical practice, supporting early phase clinical trial accruals and contributing to ongoing clinical and translational research.

Candidate Qualifications

Education/Certification

- Possesses an M.D., M.D./Ph.D., or equivalent degree from an accredited institution.
- Has successfully completed an accredited fellowship program and possesses ABIM Board Certification in an oncology specialty.
- Eligible for licensure in New York and authorized to work in the United States.
- Possesses academic credentials and accomplishments for appointment at the rank of Associate Professor or higher at University of Rochester School of Medicine and Dentistry.

Knowledge and Work Experience

- Experience within an academic setting, with the development and leadership of an early phase clinical trials program, and specific experience in opening investigator-initiated, industry-funded, and federally funded early phase clinical trials.
- Depth of understanding of the infrastructure, staffing, and processes that support clinical trial development and the appropriate measurement to improve clinical trial accrual and activation time trial initiation.
- Demonstrated experience as a leader who can inspire faculty as well as staff to work collaboratively and maximize the Early Phase Clinical Research Program's potential at the individual and team levels, and in a way that adds value to Wilmot and URMC, institutionally.
- Passion for mentoring and developing junior and senior investigators to perform at their highest potential across all missions.
- Strong relationships with industry partners and collaborative trial groups, and a history of extramural funding.
- Demonstrated skills working collaboratively across disciplines, including basic science departments, to enhance the research driven toward clinical trial development.
- Successful experience with and appreciation for leading the research, clinical, education, and community outreach missions of an institution.
- Strategic understanding of how to build an early phase clinical trial portfolio that is sustainable and aligned with an institution's capabilities in basic science, clinical and translational research, and fits the needs of a specific patient population.

Leadership Skills and Competencies

- A collaborative, transparent, and dynamic leader who motivates and empowers others while holding them accountable; a collaborator who has an approachable demeanor and inclusive style.
- A responsive listener, communicator, and consensus builder.
- Innovative and visionary about future developmental therapeutics.
- Able to ideate and implement strategies through tactical plans, clearly communicating the steps necessary, and motivating teams to execute.

- Skilled in implementing and leading efficient and effective processes and driving continuous process improvement.
- Actively promotes diversity within the ranks of faculty and staff.
- Exhibits personal and professional integrity, trustworthiness, professionalism, and kindness in all interactions.
- A program builder with an ability to work through a matrixed academic medical center and university setting.
- Possesses gravitas and executive presence; a leader who others respect and follow.

The Community

Rochester, New York

- Rochester is the seat of Monroe County, New York. Situated east of Buffalo, west of Syracuse, and northwest of New York City, it is at the center of a large metropolitan area that encompasses and extends beyond Monroe County to include the counties of Genesee, Livingston, Ontario, Orleans, and Wayne. This area, which is part of the Western New York region, has a population of approximately 1,700,000. The City of Rochester has a population of approximately 210,000, making it New York's fourth most populous city after New York City and Buffalo. Located on the southern shore of Lake Ontario, where the Great Lakes meet the vineyard-dotted Finger Lakes, Rochester provides easy access to a wealth of four-season outdoor recreation.



Rochester became America's first 19th-century "boomtown" and rose to prominence initially as the site of many flour mills located on the Genesee River, then a major manufacturing hub.

Today, it is an international center of higher education as well as medical and technological development. The region is known for many acclaimed universities and several of them (notably the University of Rochester and the Rochester Institute of Technology) are nationally renowned for their research programs. In addition, Rochester continues to be the site of many important inventions and innovations in consumer products. The Rochester



metropolitan area is the second-largest regional economy in New York State, after the New York City metropolitan area.

Its lively "knowledge economy" draws its strengths from established companies (e.g., Xerox, Bausch and Lomb, Eastman Kodak) and their many small business spin-offs, including growing telecommunications, biotechnology, and information technology enterprises. In recent years, the University of Rochester has become the largest employer in the Rochester area and the seventh-largest employer in New York State.

Rochester consistently receives high rankings nationally as a "most livable city" for overall quality of life and as among the very best places to raise a family. The region has outstanding, highly ranked public and private schools, with a relatively modest cost of living and a stable, affordable housing market. Home to the renowned Eastman School of Music, the Rochester Philharmonic Orchestra, and the Xerox Rochester International Jazz Festival (among the nation's most popular and respected), Rochester enjoys economic stability and a level of arts, culture, sports, and dining comparable to that of many larger cities.

For more information about living in Rochester, see www.visitrochester.com.

Procedure for Candidacy

All applications, nominations, and inquiries are invited. Applications should include, as separate documents, a CV/resume and a letter of interest.

Please direct all applications, nominations, and inquiries to the WittKieffer consultants assisting University of Rochester Medical Center with this recruitment (listed below), preferably via e-mail, to khaddock@wittkieffer.com.

Vineeth (Vinny) Gossain	Andrew Bean, Ph.D.	Katie Haddock	Alana Penley
Consultant	Of Counsel	Senior Associate	Senior Associate
630.575.6957	713.254.3540	480.453.6971	404.788.2561
vgossain@wittkieffer.com	abean@wittkieffer.com	khaddock@wittkieffer.com	apenley@wittkieffer.com

Compensation Range

The pay range for this position is \$375,000 – \$525,000. The referenced pay range represents the University's good faith and reasonable estimate of the base range of compensation for this position. Individual salaries will be determined within the job's salary range and established based on (but not limited to) market data, experience, and expertise of the individual, and with consideration to related position salaries. Alignment of clinical incentive-based compensation also may be applicable and will be discussed during the hiring process.

EOE, including disability/protected veterans

The University of Rochester is committed to fostering, cultivating, and preserving an inclusive and welcoming culture to advance the University's Mission to Learn, Discover, Heal, Create – and Make the World Ever Better. In support of our values and those of our society, the University is committed to not discriminating on the basis of age, color, disability, ethnicity, gender identity or expression, genetic information, marital status, military/veteran status, national origin, race, religion/creed, sex, sexual orientation, citizenship status, or any other characteristic protected by federal, state, or local law (Protected Classes). This commitment extends to non-discrimination in the administration of our policies, admissions, employment, access, and recruitment of candidates for all persons consistent with our values and based on applicable law.

The material presented in this leadership profile should be relied on for informational purposes only. This material has been copied, compiled, or quoted in part from University of Rochester Medical Center documents and personal interviews and is believed to be reliable. While every effort has been made to ensure the accuracy of this information, the original source documents and factual situations govern.

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Appendix I

University of Rochester Medical Center

One of the nation's leading academic medical centers, URM includes the University's biomedical research, teaching, and patient care, and community outreach missions. The University of Rochester's clinical enterprise, UR Medicine, consists of eight hospitals located throughout the Finger Lakes and Southern Tier regions. The clinical enterprise includes over 1,400 beds, approximately 70,000 discharges, and 53,000 ambulatory surgeries yearly, in addition to 56,000 observation cases. Together, URM and UR Medicine affiliates employ more than 24,000 full- and part-time staff.

URM and UR Medicine have an integrated administrative structure, budget, and strategic plan. URM ranks among the top quarter of U.S. medical centers in federal research funding, has an overall budget of approximately \$6 billion, and accounts for over 85 percent of UR Medicine revenues. URM's mission is to be a home for healing, learning, research, and innovation committed to improving health and quality of life for their patients, families, and community.

URM's major components the School of Nursing, Eastman Institute for Oral Health, Sovie Center for Advanced Practice Providers, Strong Memorial Hospital, Golisano Children's Hospital, University of Rochester Medical Faculty Group, and:

School of Medicine and Dentistry (SMD) – The SMD is organized into basic and clinical departments as well as interdisciplinary research centers. Faculty have received over \$200 million in external funding in basic and clinical research, with \$160 million in federal research funding. Over 1,800 full- and part-time faculty are employed by the SMD, with an additional 1,000 members of the voluntary clinical faculty. The SMD was in the initial cohort of 12 centers nationally in 2006 to receive funding from the NIH for a Clinical and Translational Science Award (CTSA). The grant was successfully renewed in 2011 and 2020. URM constructed a 197,000-square-foot building to house the Clinical and Translational Sciences Institute – one of the first facilities in the nation devoted to clinical and translational studies. The SMD is also home to the Center for Community Health & Prevention, which is focused on promoting health equity and improving health through research, education, services, and policy. The Center is a leader in the field, establishing local and national models for prevention, health behavior modification, and community engagement.

UR Clinical & Translational Science Institute – The UR Clinical and Translational Science Institute (CTSI), established in 2006, is a research engine that helps researchers connect, learn, and attain what they need to improve and speed the development of interventions to improve health outcomes for all people. UR CTSI is one of the original 12 institutions funded by the [Clinical and Translational Science Awards Program](#), which fosters institutional collaborations to improve the efficiency, quality, and impact of the translational research process. With a focus on the intersection of translational science and health equity, the UR CTSI aims to be a replicable, scalable, and sustainable model environment for research across the translational spectrum – from molecules to populations, responsive to community priorities, and conducted by transdisciplinary, patient, and community-engaged teams – to improve population health.

The University of Rochester

The University of Rochester (UR), led by President Sarah Mangelsdorf, Ph.D., is comprised of seven schools, including: the School of Medicine and Dentistry, School of Nursing, Simon Business School, Warner School of Education, Hajim School of Engineering and Applied Sciences, School of Arts and Sciences, and the Eastman School of Music, as well as other organizational units such as the Laboratory for Laser Energetics. With over 3,900 full- and part-time faculty members and instructional staff, the University offers more than 200 academic majors and is home to over 12,000 students.

Learning at UR is on a very personal scale; it is among the most collegial of the top research universities and it emphasizes collaborative interactions. The motto of the University, *Meliora* (“ever better”), captures the continuous progress that has defined UR since its founding in 1850. While the University is one of the smallest Carnegie “very high research activity” research universities, it has over \$438 million in annual funding, and several departments have ranked among the best in their fields.

For more information, please visit: www.rochester.edu/academics.

UR Medicine

Geneva General Hospital – Founded in 1898, Geneva General is a 117-bed general acute-care hospital providing both primary and a full range of secondary-level services. Geneva General operates a 14-bed intensive care unit and a telemetry unit (for heart monitoring), as well as pediatric beds. A full range of diagnostics are available, including spiral CT scanning, nuclear medicine, MRI, cardiovascular diagnostics, and complete gastroenterology services. Geneva General Hospital’s 13-station outpatient Dialysis Center and inpatient acute treatment center offers care to residents from a four-county area in the Finger Lakes.

Highland Hospital – This Magnet-designated, 261-bed hospital received its third designation in 2021 and is a regional leader in specialties such as bariatric surgery, total joint replacement, geriatric care, gynecologic oncology, prostate cancer treatment, women’s health services, and maternity. As an affiliate of URM, access is provided to leading-edge technology, research, and resources. The collaboration offers expanded care options to the community, fosters productive interchange between URM and community physicians, and provides medical students and residents the opportunity to learn and practice in a community hospital environment.



Thompson Health – Thompson Health includes the 113-bed FF Thompson Hospital and the 188-bed Ewing Continuing Care Center (24-hour skilled nursing care and adult day care), as well as independent senior apartments and enriched living residencies. With a focus on women’s health, geriatrics, and surgical care, it is home to the Sands Cancer Center, a collaborative with the Wilmot Cancer Institute. The Hospital is a state-designated stroke center and achieved its fourth Magnet designation for nursing excellence in 2020.

Noyes Health – Noyes Health is a comprehensive healthcare system, which includes the 67-bed Noyes Memorial Hospital in Dansville, the Saunders Surgical Center, the Mary Saunders Biermann Emergency Department, an after-hours clinic, and the Ann and Carl Myers Cancer Center – a partnership with Wilmot Cancer Institute.

Jones Memorial Hospital – Jones Memorial Hospital is a 49-bed acute care facility serving Allegany County, Western Steuben County, and Northern Potter County, Pennsylvania. Collaborative efforts with URM and Noyes Health include obstetrics, oncology, cardiac care, neurology, and otolaryngology.

St. James Mercy – St. James Mercy is a 15-bed facility that opened in 2020 and provides a full range of inpatient and outpatient services. The hospital works on an ongoing basis to build collaborative relationships with regional partners to ensure the continuity of vertical healthcare services in the Hornell community.

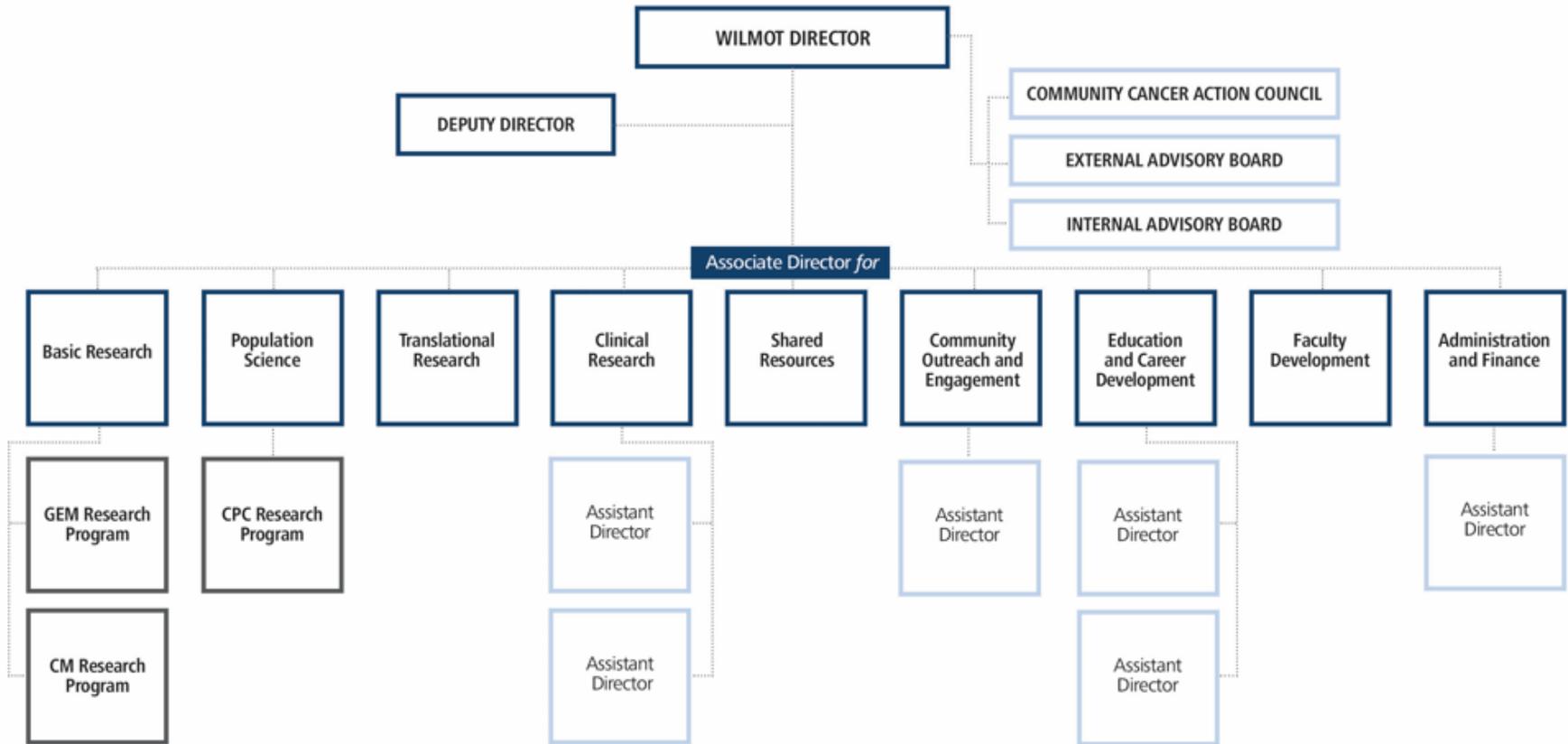
Soldiers and Sailors Memorial Hospital – Soldiers & Sailors Memorial Hospital was named to honor and memorialize residents who served in World War I and has been located on the northern edge of the village since

1924. Soldiers & Sailors Memorial Hospital operates a 25-bed general acute care hospital, including a medical-telemetry. Soldiers & Sailors also offers a Swing Bed Program.

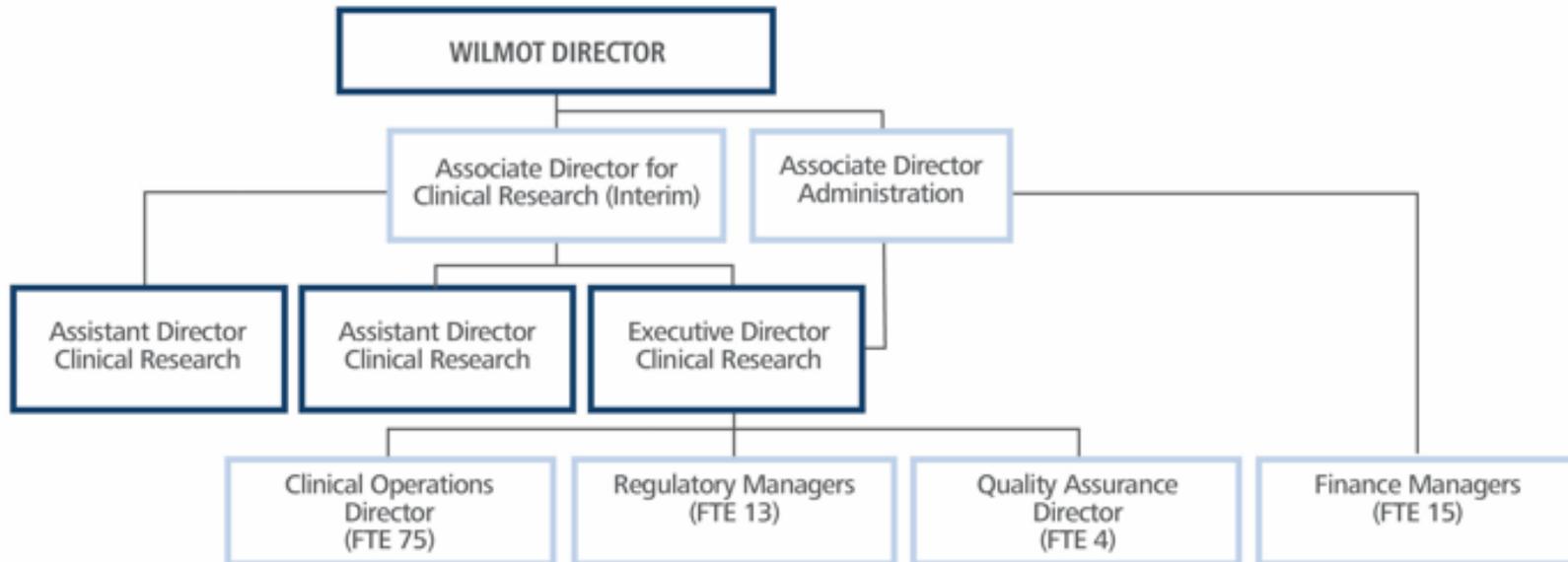
UR Medicine also manages **Elmira's Arnot Health**, a non-affiliated community hospital system, which includes Arnot Ogden Medical Center, Iran Davenport Memorial Hospital, St. Joseph's Hospital, and Taylor Center, a skilled nursing facility.

Appendix II

Wilmot Leadership Organizational Chart



Wilmot CTO Organizational Chart





WittKieffer is the premier executive search and advisory firm developing inclusive, impactful leadership teams for organizations that improve quality of life. For more than 50 years, we have operated exclusively at the intersection of not-for-profit and for-profit healthcare delivery, science, and education – the Quality of Life Ecosystem. Through our expert executive search services as well as our Professional Search, Interim Leadership, and Leadership Advisory solutions, we strengthen organizations that make the world better.

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