Strategy on Patient-Oriented Research





President's Advisory Board

Mandate: Provided the President of CIHR with high-level strategic advice on patient-oriented research (Paul Hebert, MD seconded to CIHR)

NAME	AFFILIATION
Sally Brown, RN, MHS	CEO, Heart and Stroke Foundation of Canada
Krista Connell, BPT, MHSA	CEO, Nova Scotia Health Research Foundation
Catriona McMahon, MD	VP , Medical Affairs, Astra Zeneca
Roger Palmer, Ph.D.	Dean, School of Public Health, University of Alberta
Brian Postl, MD	President and CEO, Winnipeg Regional Health Authority
Dorothy Pringle, RN, Ph.D.	Former Dean of Nursing, University of Toronto; Executive Lead, Ontario Ministry of Health and Long Term Care Ini tiative, Health Outcomes for Better Information and Care (HOBIC)
Sarah Prichard, MD	VP, Global Medical Affairs, Baxter International
Jean Rouleau, MD	Dean, Faculty of Medicine, Université de Montréal
Arthur Slutsky, MD	VP, Research, St Michael's H ospital, Toronto
Aubrey Tingle, MD	Past President and CEO, Michael Smith Foundation for Health Research
Susan Zimmerman, LLB, LLM	Executive Director, Interagency Secretariat on Research Ethics, Tri -Council Initiative





Strategy on Patient-Oriented Research

Goal:

Improve health outcomes through clinical research

Aims:

Enhance clinical applications and economic impact of health innovations

Provide health professionals and decision-makers with information on how to deliver high-quality care and services in a cost-effective manner

Implies a continuum from:

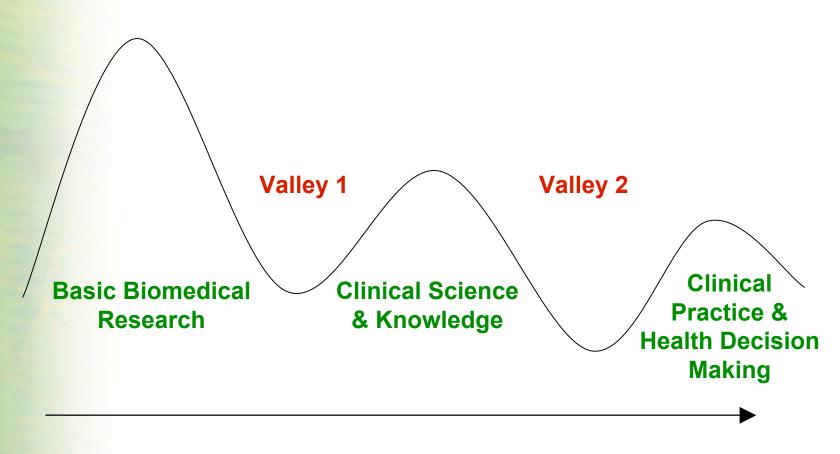
"first in patients" studies to

how new and old drugs, devices and procedures are integrated into health systems

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Bridging valleys CIHR IRSC between research and outcomes

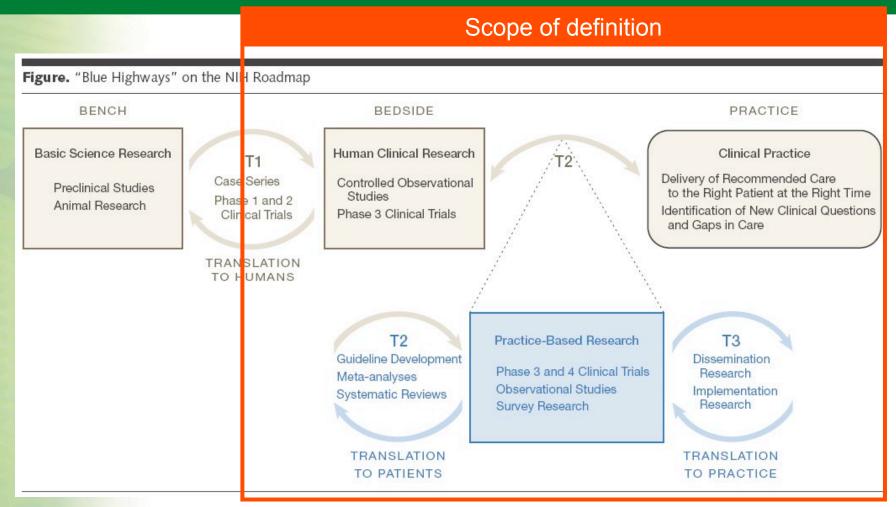


Translational Continuum



CIHR IRSC

Definition of Patient-Oriented Research



Westfall, J. M. et al. JAMA 2007;297:403-406



Four major components of the CIHR IRSC Strategy on Patient-Oriented Research

- 1. Improve the research environment and infrastructure
- 2. Mechanisms to better train and mentor health professionals and non-clinicians
- 3. Strengthen organizational, regulatory and financial support for multi-site studies
- 4. Support best practices in health care





Seven "Signature Initiatives" Under Development

Enhance Patient-Oriented Care and Improve Clinical Results through Scientific and Technological Innovations

Support a High-Quality, Accessible and Sustainable Health-Care System

Reduce Health Inequities of Aboriginal Peoples and other Vulnerable Populations

Prepare For and Respond To Existing and Emerging Threats to Health

Promote Health and Reduce the Burden of Chronic Disease and Mental Illness

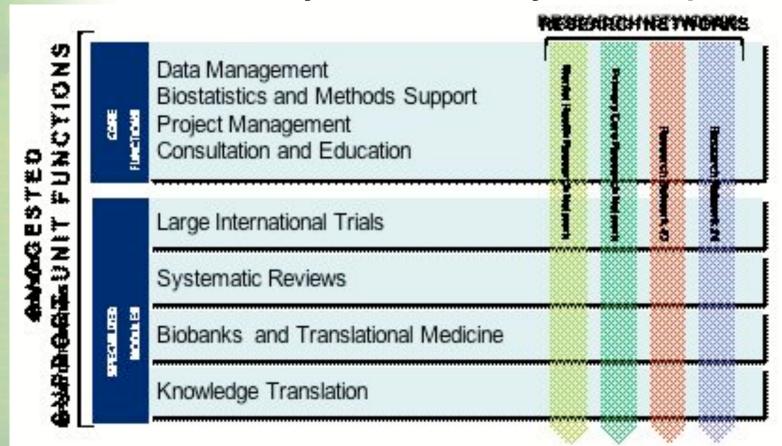
- <u>Clinical Trials</u>
 <u>Networks/Support Units</u>
- Personalized Medicine
- Community Based Primary Health Care
- Pathways to Health
 Equity for Aboriginal
 Peoples
- Alzheimer's
- Epigenetics
- Inflammation in Chronic Disease





Build <u>Support Units</u> for clinical research networks

When combined, SUPPORT units provide the infrastructure and skills for highly specialized Research Networks to identify and tackle key clinical questions:

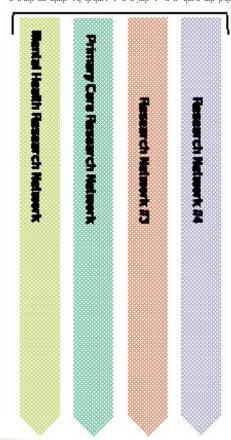




Establish national infrastructure: multi-disciplinary research networks

Research Networks bring investigators together to build a critical mass of technical and scientific expertise on a national scale to provide leadership and enhance impact.

RESEARCH NETWORKS



- Act as one coordinated group to effectively direct resources in specialty areas (e.g. mental health, primary care).
- Ask central questions to direct pan-Canadian studies most relevant to Canadians.
- ➤ Generate evidence or source from previous work and disseminate best practices to the health-care community.
- Mentor and support the training of emerging talent.





Develop Human Capacity for Patient-Oriented Research

- Train more health professionals in healthoriented research
- Mentor, develop and support careers of researchers
- Train more non-clinicians with advanced degrees in core research methodologies
- Re-engineer career training and salary awards to build capacity in patient-oriented research for individuals aligned with patient-oriented research networks and support units





Strengthen Organizational, Regulatory, and Financial Support for Clinical Trials

- Streamline ethics review for multicentre trials
- Adopt a national template for contracts and inter-institutional agreements
- Ensure that GCP standards meant for industry do not stifle investigatorinitiated research efforts
- Develop national standards of operation for all clinical research activities



Strategy on Patient-Oriented Research

CIHR has worked to develop an overarching patient oriented research strategy

- High level external advisory board
- Extensive stakeholder consultations

Overarching goal: Improving health outcomes through research

Two specific aims:

- 1. Enhance clinical applications and economic impact of health innovations
- Provide decision makers with information on how to deliver cost effective high quality care





Creating Momentum through Collaborative Efforts and Partnerships

Launch of SPOR

Federal Government
Departments and Agencies

Provincial Governments

Ministries of Health and Innovation

Provincial Health Research
Organizations & Health
Charities

Professional Health
Organizations
ACAHO, AFMC, RCPSC, CNA

Industry

Academic Institutions

Teaching Hospitals





Nationwide Consultations

In person:

- 19 university-based meetings
- 3 virtual consultation meetings with nurses
- 1 meeting with 18 health professionals organizations
- 1 meeting with health charities (7 individual charities, plus the Health Charities Coalition of Canada, on behalf of its 27 member charities)
 - ~ 400 individual attendees in total

Web-based survey:

Nearly 300 respondents



CIHR IRSC President's Advisory Board

- Fall 2010: Board reviewed synthesized feedback, and approved the Strategy document in-principle
- Document currently being revised in accord with the Board's recommendations
- Final document: estimated completion by end of Spring, 2011





Implementation Steps:

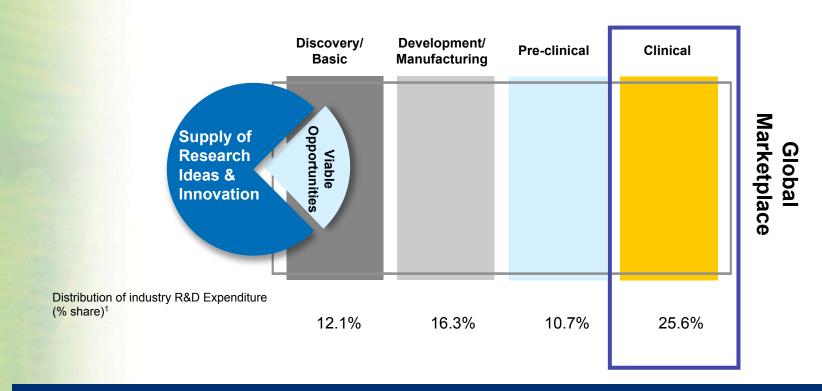
- Executive Director hired January 1, 2011
 Jocelyn Cook, PhD, MBA
- Networks Workshop: January, 2011
- Support Units Workshop: March, 2011
- National Steering Committee ("blue ribbon" panel)
 - Recruitment of members: Spring, 2011
 - Expect first meeting SOON!

TY, Questions, Comments, Feedback, . . .

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Clinical research is a cornerstone of commercialization in the life sciences sector



As a proxy for the whole industry, pharmaceutical clinical research is a high value global opportunity, accounting for \$526.5 million of R&D expenditure in Canada².

Source: 1. US R&D spending by PhRMA member companies. Discovery/basic includes biological screening and pharmacological screening; pre-clinical includes toxicology and safety testing and bioavailability; manufacturing includes synthesis and extraction and process development for manufacturing and quality control. Source:PhRMA Annual Survey, 2002. 2. Table 19: This represents all the clinical trial expenditures for companies with patented-medicines in Phases I-III trials. Source: PMPRB, Current R&D Expenditures by Type of Research, 2009.

