Canada’s Strategy for Patient-Oriented Research

SPOR Update – University Delegates
Nancy Mason MacLellan, Manager, Major Initiatives
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Canada’s Strategy for Patient-Oriented Research (SPOR)

• SPOR is a collaboration of researchers, patients, provinces and territories, health care professionals and others – all working in partnership to integrate research into patient care, ultimately improving the health of Canadians.

• Canadian Institutes of Health Research plays a prominent role in the launch, implementation and oversight of SPOR, but represents only one in a multitude of partners.
SPOR PRINCIPLES

• Patients need to be involved in all aspects of the research to ensure questions and results are relevant and integrated into practice

• Decision-makers and clinicians need to be involved throughout the entire research process to ensure integration into policy and practice

• Funding under SPOR is based on a 1:1 matching formula with non-federal government partners to ensure relevance and applicability

• Effective patient-oriented research requires a multi-disciplinary approach

• SPOR is focused on first-in-human (and beyond) research designed to be transformative in nature and improve patient outcomes and/or the effectiveness and efficiency of the health care system

• SPOR is outcome driven and incorporates performance measurement and evaluation as integral components of the initiative
PATIENT-ORIENTED RESEARCH

“a continuum of research that engages patients as partners, focuses on patient-identified priorities and improves patient outcomes. This research, conducted by multidisciplinary teams in partnership with relevant stakeholders, aims to apply the knowledge generated to improve healthcare systems and practices”

→ SPOR Patient Engagement Framework, 2014
CORE ELEMENTS OF SPOR

Support for People and Patient-Oriented Research and Trials (SUPPORT) Units

SPOR Networks

Capacity Development

Clinical Trials

Patient Engagement

Enabling Functions
SUPPORT UNIT business plans are in the development phase (Yukon and Nunavut)

SUPPORT Units have been funded and are in various stages of implementation (BC, AB, SK, MB, ON, QC, Maritimes, NL, NWT)

Partners co-funding the approved SUPPORT Units

Investment by CIHR and partners in the approved SUPPORT Units

$430M
NETWORKS

Networks implemented: Youth & Adolescent Mental Health; Primary and Integrated Health Care; Chronic Diseases (5)

130+ Partners co-funding the Networks

$240M Investment by CIHR and partners

Refer to the Appendix for additional information regarding the funded Networks
CAPACITY DEVELOPMENT


- Ensuring capacity for meaningful patient engagement
- Mobilizing existing expertise
- Supporting careers
- Collaborating
- Building capacity to apply research to real world problems
CAPACITY DEVELOPMENT

• *Foundations in Patient-Oriented Research* curriculum was jointly produced and piloted by CIHR, SUPPORT Units and Networks
  – Several SUPPORT Units are continuing the work
  – Next iteration of the curriculum expected to be released spring/summer 2018

• CIHR and partners investing $5.3M in 31 Patient-Oriented Collaboration Grants

• SUPPORT Units and Networks are contributing to capacity development in various ways
CLINICAL TRIALS

Includes two components:

• Canadian Clinical Trials Coordinating Centre (CCTCC)
• Innovative Clinical Trials (iCT) Initiative

CCTCC

• Funded to strengthen the environment for clinical trials in Canada,
• Clinical Trials Asset Map
• Model Clinical Trials Agreement
## Innovative Clinical Trials Initiatives

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Description</th>
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<tbody>
<tr>
<td>Innovative Clinical Trials (iCT) Initiative</td>
<td>Contribute to <strong>increasing Canadian competitiveness</strong> in iCT research and provide a stimulus for trialists to adopt <strong>new methodologies</strong>.</td>
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<td>Rewarding Success Initiative (pilot)</td>
<td>Aims to (1) incentivize multidisciplinary research teams and their partners to <strong>design</strong>, <strong>adopt</strong>, and <strong>evaluate interventions</strong>; and (2) support <strong>innovative process transformations</strong> that improves health outcomes and value for Canada’s healthcare investment.</td>
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Refer to the Appendix for additional information regarding the teams and projects funded through the iCT Initiative.
CLINICAL TRIALS

Rewarding Success Initiative

• The Rewarding Success Initiative is being piloted in four provinces: British Columbia, Alberta, Manitoba, and Newfoundland & Labrador.

• Phases 1 and 2 of the initiative are complete, the funding opportunity for Phase 3 is in development and will be launched in June 2018.

• 12 Business Case development grants @ $100K each offered through Phase 2.

Refer to the Appendix for additional information regarding the timeline for the Rewarding Success Initiative
PATIENT ENGAGEMENT

Occurs when patients meaningfully and actively collaborate in the governance, priority setting, and conduct of research, as well as in summarizing, distributing, sharing, and applying its resulting knowledge

- SPOR Patient Engagement Framework
  - Published on the CIHR website; foundation for patient engagement of SPOR-funded entities and partners, including CIHR.

- CIHR has been working with SUPPORT Unit Patient Engagement leads to develop a set of considerations for the compensation of patients that are engaged in research.
  - Expected release of the document spring/summer 2018.
SPOR PATIENT ENGAGEMENT FRAMEWORK

Vision
Patients are active partners in health research that will lead to improved health outcomes and an enhanced health care system.

Guiding Principles
Inclusiveness
Support
Mutual Respect
Co-Building

Core Areas for Action
Governance & Decision-Making
Capacity Building
Tools and Resources
ENABLING FUNCTIONS

SPOR Evidence Alliance

• Led by Dr. Andrea Tricco @ St. Michael’s Hospital
• Program launched: https://sporevidencealliance.ca/
• CIHR investment of $5 M matched 1:1 through over 40 partners

SPOR National Data Platform

• Expected funding period: 2018/19 – 2025/26
• Total planned investment: $78M
  • CIHR: $39M
  • Partners: $39M
Contact Us!

Nancy Mason MacLellan, Manager
Nancy.MasonMacLellan@cihr-irsc.gc.ca

General Inquiries: SPOR-SRAP@cihr-irsc.gc.ca

Website: www.cihr-irsc.gc.ca/e/41204.html
APPENDIX
Additional Slides
Funded through a $25M (1:1) partnership between CIHR and the Graham Boeckh Foundation.
PRIMARY AND INTEGRATED HEALTH CARE INNOVATIONS NETWORK

Tripartite Leadership of PIHCI Networks / Leadership Council:
- Researcher
- Policy/Decision Maker
- Clinician
- Patients (on Leadership Council)
PIHCI Network to Foster Cross Jurisdictional Research – Quick Strike Projects

- 13 projects funded
- Spanning 2-5 jurisdictions
- 10 provinces and 1 territory involved in at least 1 project
- CIHR investment = $1.45M
- Partner investment = $1.49M

- Let's Discuss Health: implementation and assessment in primary care of a web strategy to motivate patients to self-manage their health and support collaboration with health care providers
- Evaluating the implementation and impact of an online tool used within primary care to improve the income security of patients with complex health and social needs in Ontario and Manitoba
- Improving care and outcomes of patients with CKD managed in primary care
- Improving Outcomes for Youth with Type 1 Diabetes in Transition to Adult Care Through Strengthening Integration with Primary Care: An Exploratory, Cross-Provincial Study
- Validation of Administrative and Primary Care Electronic Medical Record derived Frailty algorithms
- Improving care and outcomes of patients with CKD managed in primary care
- A Comparative Analysis of Centralized Waiting Lists for Unattached and Complex Patients Implemented in Six Canadian Provinces
- HOTSPOTTING: Identifying superusers of health care services with mental health and addiction problems
- Characterizing high system use across the primary-tertiary care continuum: parallel analyses of select Canadian health datasets
- Creation of a Comprehensive Health Profile of Children in New Brunswick and Prince Edward Island and Development of Intra-Provincial Population-Based Birth Cohorts
- Children with complex health conditions: Let's learn who they are and their needs to better serve them!
- HOTSPOTTING: Identifying superusers of health care services with mental health and addiction problems
- Improving End-of-life Care in the Community
- Playing Telephone: Exploring the potential for interdisciplinary shared decision making for medication therapy in shared electronic health records
PIHCI Network to Foster Cross Jurisdictional Research – Comparative Policy Analyses

- 3 projects funded
- Spanning 2-8 jurisdictions
- 8 provinces involved in at least 1 project
- CIHR Investment = $365K
- Partner Investment = $413K

Policies and program innovations that connect primary health care, social services, public health and community supports in Canada: A comparative policy analysis

Integrating paramedics into primary care to optimize patient time in the community at end of life

What are the impacts of being formally enrolled with a GP on continuity and integration of care? Evidence from a comparison of Quebec and British Columbia
PIHCI Network to Foster Cross Jurisdictional Research – Knowledge Syntheses

- 8 projects funded
- Spanning 2-4 jurisdictions
- 9 provinces involved in at least 1 project
- CIHR Investment = $185K
- Partner Investment = $268K

Case management in primary care to improve outcomes among frequent users of health care services with chronic conditions: a realist synthesis of what works, for whom and in what circumstances

Integrating end of life care to help people stay in the community: The essentials for success

Dimensions of Quality for Mobile Applications in Chronic Disease Management

Interventions and Policies Influencing Primary Healthcare Professionals Managing Chronic Diseases: An Evidence Synthesis

Evaluating the comparative effectiveness of comprehensive geriatric assessment for improving patient and healthcare system outcomes: A systematic review and network meta-analysis

Building Cross-Generational Wellness and Resilience in Multi-Generational Indigenous Households: A Scoping Review

Evaluation of primary health care integration strategies for adults with chronic health conditions: A systematic review

Identifying and Understanding the Health and Social Care Needs of Older Adults with Multiple Chronic Conditions and their Caregivers: A Scoping Review
Chronic Disease Networks

Can-SOLVE CKD
Lead: Adeera Levin @ UBC

Chronic Pain
Lead: Norm Buckley @ McMaster

IMAGINE
Lead: Paul Moayyedi @ McMaster

CHILD-BRIGHT
Lead: Annette Majnemer @ McGill

Diabetes Action Canada
Lead: Gary Lewis @ UToronto

CIHR investment = $62.5M
Partner investment = $128.9M
SPOR CHRONIC DISEASE NETWORKS

Can-SOLVE CKD
Lead: Adeera Levin @ UBC

Chronic Pain
Lead: Norm Buckley @ McMaster

IMAGINE
Lead: Paul Moayyedi @ McMaster

CHILD-BRIGHT
Lead: Annette Majnemer @ McGill

Diabetes Action Canada
Lead: Gary Lewis @ UTOntario
Innovative Clinical Trials – Catalyst Grants

Shabbir Alibhai @ UHN
Preferenc-based trials of behavioural interventions

Elizabeth Potter @ U Ottawa
Registry-based randomized comparative effectiveness trials

Katherine Mcgilton @ UHN
Person-Centred Models of Rehabilitative Care for Older Ontarians

Sylvie Lambert @ McGill
Pilot Sequential Multiple Assignment Randomized Trial (SMART) design (X2)

Julian Somers @ Simon Fraser
Improving Experiences & outcomes for patients with Schizophrenia: Randomized Registry Trial

Dana Anaby @ MAB-MACKAY Rehab Centre (Mtl)
Effectiveness of participation-focused interventions: Interrupted Time Series design

Sarah McDonald @ McMaster
EMR Best-Practice Alert: Pragmatic, Pilot, Cluster RCT

Justin Presseau @ OHRI
Registration for Deceased Organ Donation in Family Physician Offices

Glen Hazelwood @ U Calgary
Patient-centred pragmatic registry-randomized trial of treatment tampering
Innovative Clinical Trials – Mentorship Chairs

Simon Bacon @ Concordia
Chair in Innovative, Patient-Oriented, Behavioural CTs

Bertrand Lebouché @ RI of the McGill University Health Centre
Mentoring new patient-oriented researchers in innovative HIV care

Linda Carlson @ U Calgary
Mentorship Program in Innovative Integrative Oncology CTs: Moving from Best Evidence to Best Practice

Jonathon Maguire @ St. Mike’s
EMR Best-Practice Alert: Pragmatic, Pilot, Cluster RCT

Tony Reiman @ Saint John Hospital
Mentorship Chair in Innovative Cancer CTs
Innovative Clinical Trials – Multi-Year Grants

Navindra Persaud @ St Mike’s
CLEAN Meds RCT

Scott Garrison @ U Alberta
The BedMed Initiative – Making better use of existing therapeutics

Brian Cuthbertson @ Sunnybrook
Study of preventative antibiotics on patient outcome and antibiotic resistance

Terry Klassen @ U Manitoba
Innovation in Pediatric CTs

Amit Garg @ Princess Margaret
Integrated Molecular Characterization and Functional Drug Sensitivity Testing for Patients with Advanced Pancreatic and Ovarian Cancers

Jack Tu @ ICES
Using Big Data to conduct innovative cardiovascular CTs
Rewarding Success – Timeline and Phases

Idea Brief – Phase 1
• Opportunity to outline an idea using the Rewarding Success model
  – Innovative ideas that enhance value-based care
  – Novel ways to scale and spread successfully implemented innovations that improve value for money
• Multi-sectoral teams with co-leadership
• Relevance review by Ministry of Health and other innovation experts
• Top selected ideas from each region invited to Ideathon

Summer 2017

February 2018
Ideathon – Phase 2
• 1 national Ideathon
• Hosted by CIHR in partnership with the SPOR SUPPORT Units
• Invited teams pitch ideas to the Idea Panel
• Idea Panel consists of Ministry of Health from all regions
• Idea Panel awards best ideas with Business Case Development Grants

March 2018

Business Case Development Grants – Phase 2
(12 grants @ 100K for 1 year)
• Expand business case
• Develop agreements
• Refine targets and establish outcomes and metrics
• Determine timing and value of pay back
• Independent evaluation/audit
• Feasibility studies and proof of concept

May 2018
Workshop on adaptive, complex intervention trials and financial and legal frameworks

March 2018

April 2019
iCT Rewarding Success Team Grants – Phase 3
($24M total for 5 grants over 4 years)
• Implementation and evaluation of the intervention in a healthcare delivery setting
• Redirection of a proportion of the savings to the Service Delivery Alliance
• 1:1 match with partners