

Partnering for a Healthier Alberta

*Summary Report from
Strategic Clinical Networks™ and Innovative Medicines Canada
Engagement Session
Held January 24th, 2017*

February 22, 2017



EVENT PARTNERS

Alberta Innovates

Alberta Innovates will deliver 21st century solutions to the most compelling challenges we are facing as Albertans. Building on our province's strengths in environment, energy, health, food, fibre and emerging technology sectors, we are working with our partners to diversify Alberta's economy, improve our environmental performance and enhance our well-being.

Through Alberta Innovates you can access technical expertise, the opportunity to establish new partnerships, and secure funding that will catalyze innovation. We support a broad range of research and innovation activity — from discovery to application.

Alberta Health Services/Strategic Clinical Networks™

The Strategic Clinical Networks™ (SCN™) are Alberta Health Services (AHS) developed networks of people who are passionate and knowledgeable about specific areas of health, that are challenged to find new and innovative ways of delivering care that will provide better quality, better outcomes and better value for every Albertan.

Innovative Medicines Canada

Innovative Medicines Canada represents Canada's innovative pharmaceutical industry. The organization supports members' discovery, development, and delivery of innovative medicines and vaccines. Membership consists of more than 50 companies, from established organizations to fledgling startups, all of whom are revolutionizing healthcare through the discovery and development of new medicines and vaccines.

Institute of Health Economics

The Institute of Health Economics (IHE) is a not-for-profit organization that has a mission to contribute to more effective health services and assist decision makers in health policy and practice with the results from economic evaluations, costing and cost-effectiveness analyses, and with syntheses of findings from research in health technology assessment.

PREFACE

On behalf of Alberta Innovates and our partners we are pleased to provide this proceedings document from the first SCN™/Innovative Medicines Canada engagement event that took place January 24, 2017 in Edmonton. This event brought together Alberta Strategic Clinical Networks™ (SCNs™) and the Canadian innovative pharmaceutical industry (Innovative Medicines Canada) in the spirit of collaboration and cooperation in support of the work of the SCNs™.

This meeting provided a forum for the SCNs™ and the innovative pharmaceutical industry to begin to establish relationships and a foundation for partnership, share the structure, mandate and goals of each organization, identify areas of mutual priority, as well as identify a process to manage future engagement going forward.

The presentations and discussion represent a good beginning to an iterative process that is intended to produce some very tangible innovative approaches to address some of the most pressing challenges identified by the SCNs™.

Any comments on this document or in general, including information about partnership and participation opportunities, are welcome and can be sent to partnershipoffice@albertainnovates.ca.

Sincerely,

Reg Joseph, Vice President, Health
Alberta Innovates

Blair O'Neill, Associate Chief Medical Officer
Strategic Clinical Networks™,
Alberta Health Services

Anne Babineau, Director, Prairies
Innovative Medicines Canada

EXECUTIVE SUMMARY

Introduction

Alberta Health Services (AHS) has established a number of Strategic Clinical Networks™ (SCNs™) in the province around specific health care topics (e.g., Cardiovascular Health & Stroke) and within areas where care is delivered (e.g., Surgery). The SCNs™ are the *engines of innovation* in the health system and have a mandate to find new and innovative ways of delivering care to provide better quality, better outcomes, and better value for every Albertan.

This document provides a reflection of the discussion at a first meeting of the SCNs™ and the Canadian innovative pharmaceutical industry (Innovative Medicines Canada and members) that took place January 24, 2017 in Edmonton. Alberta Innovates hosted this event, in partnership with Alberta Health Services/SCNs™, Innovative Medicines Canada, and the Institute of Health Economics (IHE).

Meeting Overview

The meeting had the objectives to:

1. Establish relationships;
2. Share the structure, mandate and goals/objectives of each organization;
3. Develop a high-level understanding of areas of priority, common interest and collaboration opportunity;
4. Develop a foundation and vision for partnership/collaboration;
5. Begin to identify a process to manage the engagement going forward and next steps.

The format for the event was a presentation from Alberta Health Services and from Innovative Medicines Canada, followed by two separate one hour open exchange roundtable discussions between SCNs™ and Innovative Medicine Canada member companies.

Open Exchange

Following the open exchange discussions there was opportunity for group reflection. A number of conclusions emerged from the facilitated reflection exercise.

Conclusion 1: There is Support and Willingness for Partnership

The group reported that both the SCNs™ and Innovative Medicines Canada and member companies expressed support for and a willingness to partner. It was acknowledged that this meeting was a good first step and that many more discussions will be required, however in general there was support for continuation of the

process of engagement between the SCNs™ and the innovative pharmaceutical industry. Partnership between industry and the health system was viewed to be more feasible in Alberta than in some other provinces as a result of the SCN™ model, as this structure creates a single point of entry for industry, the SCNs™ uniquely have a mandate for innovation and experimentation, and the SCNs™ have the ability to connect industry to others in the delivery system on a province-wide basis (which is challenging in other provinces with a more regional structure).

Conclusion 2: There is Alignment on Common Interests and Goals

Participants reported that there is a basis for partnership as both groups are aligned at the appropriate starting point: interest in initiatives that support system sustainability and care improvement. They therefore share a common goal. It was noted that industry works in other provinces and countries, with a variety of stakeholders, and can make an important contribution in Alberta by sharing interventions that have demonstrated an ability to support sustainability and improve clinical outcomes elsewhere, and partnering to adapt them to the Alberta context.

In order to understand what a win-win partnership looks like, to inform on the goals we should set out to achieve, and to define criteria for success, there was a recommendation to identify exemplars of successful initiatives of both the SCNs™ and industry to guide the development of a framework for partnership. The recommendation regarding exemplars favored a bias towards initiatives that have system-level impacts and where scale and spread have been achieved.

Conclusion 3: There is a Need to Build the Foundation For Partnership

The group shared that trust and conflict of interest management is key to establish the foundation for partnership. It was acknowledged that both groups have interests that should be defined and declared in order to effectively develop a management strategy and create the conditions for partnership that has a firm foundation of trust. It was recommended that a set of guiding principles be developed regarding how partnership will be managed, including negotiables and non-negotiables, with an understanding that additional principles and considerations may be required on a project basis dependent upon scope, project and partner specifics, etc.

Conclusion 4: There is a Need for an Intermediary/Broker

The group reported that support from an intermediary or neutral broker is required in the early stages of partnership development as the rules of engagement are not yet defined, and interactions between the parties may raise ethical challenges. Third party involvement was requested to create the recommended guiding principles to govern interactions and ensure consistency in approach across SCNs™. This neutral broker was also identified as the role that should follow a transparent process to develop a partnership framework that ensures that objectives, expectations, and

outcomes are clearly established at the outset, and that each partner understands the expectations of the other, and what the criteria are for project success.

Immediate Next Steps

Drawing from the conclusions from the discussion and reflection noted above, two immediate next steps were identified:

1. **Develop a Partnership Framework** in order to define what a win-win partnership looks like, to inform on the goals and outcomes we should set out to achieve, and to define criteria for success, referring to exemplars of system-level initiatives considered successful by the SCNs™ and industry for guidance.
2. **Develop Guiding Principles** for industry / SCN™ interaction and conduct in order to establish a foundation for partnership and to proactively manage issues related to trust and conflict of interest. Inform this work with engagement frameworks from other provinces, the Canadian Consensus Framework for Ethical Collaboration, the Innovative Medicines Canada Code of Ethical Practice, as well as AHS industry engagement polices.

Concluding Comments

This meeting provided a constructive forum for the SCNs™ and Innovative Medicines Canada to exchange as a first step to partnership and collaboration to help find solutions to issues and challenges within the Alberta health system. There was an expressed willingness to partner, and both the SCNs™ and the innovative pharmaceutical industry shared the view that partnership will benefit the health system and patients, as well as the partnering organizations.

Trust was clearly emphasized as key to successful partnership, and the group identified opportunity and a path forward to ensure a solid foundation of trust from the outset.

The reflection at the meeting indicated that the engagement exercise was a good first step and that there is a basis for subsequent work in order to create guiding principles and a framework for partnership to support future engagement. Work will shortly begin on the next steps identified in this document, and subsequent communication and engagement will follow.

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EVENT OVERVIEW

Context

Alberta Health Services (AHS) has established a number of Strategic Clinical Networks™ (SCNs™) in the province around specific health care topics (e.g., Cardiovascular Health & Stroke) and within areas where care is delivered (e.g., Surgery). The SCNs™ are the *engines of innovation* in the health system and have a mandate to find new and innovative ways of delivering care to provide better quality, better outcomes, and better value for every Albertan.

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Alberta Innovates hosted this event, in partnership with Alberta Health Services/SCNs™, Innovative Medicines Canada, and the Institute of Health Economics (IHE). Please see Appendix 1 for a list of registered participants.

Objectives

The meeting had the objectives to:

1. Establish relationships;
2. Share the structure, mandate and goals/objectives of each organization;
3. Develop a high-level understanding of areas of priority, common interest and collaboration opportunity;
4. Develop a foundation and vision for partnership/collaboration;
5. Begin to identify a process to manage the engagement going forward and next steps.

Format

The format for the event was a presentation from Alberta Health Services and from Innovative Medicines Canada, followed by two separate one hour open exchange roundtable discussions between SCNs™ and Innovative Medicine Canada member companies. Please see Appendix 2 for speaker biographies. These discussions were framed in terms of four (4) key questions for the group to discuss:

1. What are the SCN™ priorities/focus areas that represent potential partnership opportunity?
2. What are industry priorities, and what expertise and resources can industry contribute to the work of the SCNs™?
3. What does a successful partnership between a pharmaceutical company and an SCN™ look like?
4. What is the desired engagement process/phases?

Agenda

11:30 – 12:00	Networking Lunch	Presenter/Facilitator
12:00 – 12:10	Opening Remarks - AI	Reg Joseph, Alberta Innovates
12:10 – 12:20	Opening Remarks – Innovative Medicines Canada	Gilles Gagnon – Ceapro Inc.
12:20 – 12:30	Engagement Objectives & Structure	Dan Palfrey, IHE Bindi Ferguson, AI
12:30 – 1:00	SCN™ Presentation	Dr. Blair O’Neill, AHS
1:00 – 1:30	Industry presentation	Anne Babineau, Innovative Medicines Canada
1:30 – 1:45	Break	
1:45 – 2:45	Open Exchange Roundtable Discussion 1	
2:45 – 3:00	Break	
3:00 – 4:00	Open Exchange Roundtable Discussion 2	
4:00 – 4:45	Group Discussion	Dan Palfrey, IHE
4:45 - 5:00	Closing Remarks & Wrap Up	

SUMMARY OF OPENING REMARKS

12:00 – 12:30: Opening Remarks/Objectives & Structure

Reg Joseph, Vice President, Health, Alberta Innovates

This first SCN™/Innovative Medicines Canada exchange event has been something that has been discussed for some time, and Alberta Innovates is pleased to welcome the group convened here today, and to work in partnership with other organizations to plan and implement this important initiative. Alberta Innovates would like to thank Alberta Health Services, Innovative Medicines Canada, and the Institute of Health Economics (IHE) for all their contributions to this event.

Alberta has a long history of partnership with industry. The intent with this event is to take partnership to the next level. The health system in Alberta, and across the provinces, is facing significant system-wide challenges, and we are pleased to see that the research-based pharmaceutical industry is at the table to have a dialogue with the health system in order to examine opportunities for how they can be of support in areas of mutual interest to help address some key issues.

It is understood that many companies have ongoing projects in Alberta and those should continue their course. However, what we want to achieve today is to begin the discussion for how we collectively solve the system-level challenges that we are facing. The SCNs™ are at the forefront of these challenges, and are trying to drive new care pathways and change within the system, with a patient-centered approach to identifying the most efficient and effective means to drive the change that is required. The dialogue today is an important first step to share the opportunity that partnership with Innovative Medicines Canada and its member companies can offer the work of the SCNs™.

Gilles Gagnon, President & CEO, Ceapro Inc.

The power of partnership is significant. Innovative Medicines Canada considers Alberta, with the SCN™ model, a very innovative province and feels there is opportunity for strong partnerships that create better outcomes for patients. The research-based pharmaceutical industry delivers important innovations to health systems and to patients, and is keen to work with the SCNs™ where it makes sense, and where industry can add value aligned with SCN™ priorities.

Innovative Medicines Canada understands that sustainability of the health system is a top priority, and is optimistic that industry can engage with the SCNs™ and health system leaders in order to find innovative solutions that address the challenges ahead. Industry is committed to creating a different future that will improve the quality of health care for all Canadians.

In collaborating with the SCNs™, Innovative Medicines Canada understands that trust is the foundation for building strong partnerships. Association members adhere to a Code of Ethical Practices that guides interactions with health professionals, government and patients, which will be followed by member companies in their relationships with SCNs™ going forward.

The life sciences sector thrives on partnerships. Industry will continue to work in partnership to address the challenges of tomorrow, and to ensure a sustainable and world-class health system; together we will chart a new path that will bring opportunities to Alberta.

Dan Palfrey, Director, Industry Engagement, Institute of Health Economics

A survey of both SCN™ and Innovative Medicines Canada members was conducted in advance of this exchange event in order to help define engagement objectives and expected outcomes, as well as to provide guidance for the open exchange regarding key topics to address in the discussion. In total, 16 Innovative Medicines Canada, and 18 SCN™ responses were received.

Innovative Medicines Canada members reported the following enablers to partnership and collaboration with the SCNs™:

- A facilitator/honest broker to bring groups together and structure the dialogue
- Alignment on common interests/goals
- Clear clinical challenges defined by SCNs™
- Expressed willingness to partner
- Clear mandate and objectives

In terms of barriers they reported:

- Mistrust/negative perception of the pharmaceutical industry
- Unwillingness to partner
- Lack of alignment on expectations/outcomes
- Lack of AHS capacity to implement innovative projects
- Challenges for companies to obtain support for projects internally

The SCN™ members reported very similar responses, and highlighted that the facilitator/honest broker role should establish clear rules of engagement, as well as a means to manage any real or perceived conflicts of interest, or any potential for perceptions of inappropriateness with industry partnership.

In terms of desired outcomes from the first exchange between the SCNs™ and Innovative Medicines Canada, both groups were aligned and expressed interest in achieving a(n):

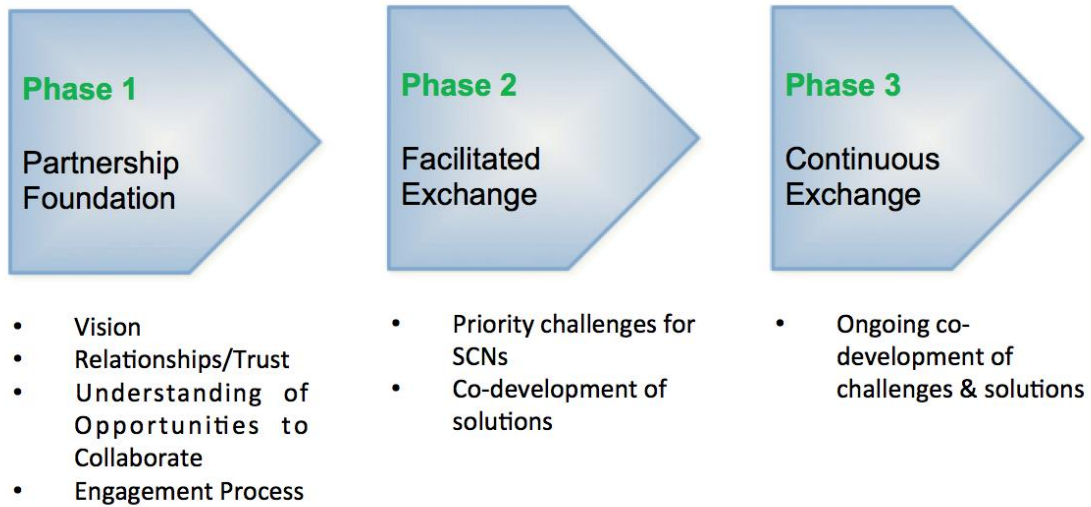
- Long-term plan/vision for partnership reflecting mutual goals
- Improved relationships and willingness to partner
- Articulated role for industry to support SCNs™ with their needs
- Declared interests/conflict of interest mitigation strategy
- Clear definition of SCN™ needs

In order to support the SCNs™ with unmet need identification, the IHE has launched an online crowdsourcing or open innovation tool called the IHE SCN™ Open Innovation Platform. This Platform at maturity will engage several thousand members of SCNs™ and related networks, in order to enable robust, community-generated and community-validated statements of need and priority opportunities for quality improvement. The output from this exercise will represent opportunities for project teams to form and to engage solution partners, such as Innovative Medicines Canada and member companies, in order to help solve priority challenges as identified by the health delivery system. The unmet needs and priorities developed for this meeting represent a great start in documenting where partnership opportunities exist. The Platform will strengthen this type of material going forward, with a continuous community-driven process to identify opportunities for care improvement, and then to facilitate robust discussion, debate and prioritization of this material by the broad health care community.

Bindi Ferguson, Senior Manager Industry & Technology Initiatives (Health), Alberta Innovates

We are at the beginning of a longer-term process to engage the SCNs™ and the research-based pharmaceutical industry. This will likely take the form of a three phase process that will first establish the foundation for partnership, followed by a facilitated process to identify specific partnership opportunities, followed by a continuous process of exchange once trust and working processes have been established. Please refer to Figure 1 for a representation of the anticipated engagement phases.

Figure 1 – Anticipated Phases of Engagement



The engagement objectives today are to support the development of a foundation for trust and partnership, and are to:

- Establish relationships
- Share the structure, mandate and goals/objectives of each organization
- Develop a high-level understanding of areas of priority, common interest and collaboration opportunity
- Develop a foundation and vision for partnership/collaboration
- Begin to identify a process to manage the engagement going forward and next steps

SUMMARY OF PRESENTATIONS

12:30 – 1:00: SCN™ Presentation

Dr. Blair O'Neill, Associate Chief Medical Officer, Strategic Clinical Networks™, Alberta Health Services

Presentation Abstract

There is a need for innovation within the health system and to do things differently and better. More operational funding is neither realistic nor the solution. The current situation with funding outpacing population growth is not sustainable, particularly as the population ages and there is continued growth in service requirements to meet the demand.

The Naylor report from 2015 speaks to the value of innovation in support of sustainability and highlights that in a zero sum game system there is no available source of long-term working capital for innovation, and jurisdictions therefore may be challenged to free up funds from those focused on realization of immediate results. The report called for the establishment of a fund to support innovation by 'coalitions of the willing' for experimentation, evaluation, and scaling up in a more systematic and efficient manner. This very much aligned with the SCNs™ in Alberta, which represent the 'willing' in this province that will support innovation, together with other partners.

Two examples of industry partnerships and how industry can help the system experiment before adopting a new practice come from the province of Nova Scotia. The first is ICONS (Improving Cardiovascular Outcomes in Nova Scotia), a program that ran between 1997-2002 and was a partnership between the Department of Health, the Queen Elizabeth II Health Sciences Center, and Merck Canada. It was a five-year study that tracked the heart health of thousands of Nova Scotians, with a focus on the utilization of evidence-based therapies. The Steering Committee had broad representation, and was a 'grass roots' or 'ground up' approach much like an SCN™. The interventions were able to demonstrate an increased utilization of evidence-based therapies. Canada has a long history of successful pilots in health care that often do not advance to broad adoption, however ICONS is an exception. Following a transition period post ICONS that was supported by a multi-industry partnership, the project evolved in Cardiovascular Health Nova Scotia, a provincial program. This program would not have started without a partnership with industry, and there is a lasting legacy of the partnership in the province.

A second Nova Scotia example of industry partnership is ANCHOR (An Interdisciplinary, Community-Based Research Project). This cardiovascular risk reduction project involved a partnership between a number of public and not-for-profit organizations and Pfizer Canada and ran between 2004-2008. It had a focus on community-based prevention and disease management, and demonstrated a

significant reduction in risk factors for cardiovascular disease, with no change in drug utilization.

Summary key learnings and observations from the Nova Scotia partnerships with industry are presented in Figure 2.

Figure 2 – Key Learnings From Industry Partnerships



Summary: The NS Experience with P3s

- Industry Partnerships can be created to help the health system experiment, take risks and change for the better
- Industry partners are more than capital providers – leverage expertise in education and change management
- All key stakeholders must be engaged - health policy, health system leadership, industry, relevant providers
- Metrics are key
- Maintain Line of Sight to a Path to sustainability
- All high value projects will be generalizable to most health care systems

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Turning to Alberta, the SCN™ model continues to evolve and expand. The SCNs™ have grown from 6 initially to 14 currently. They are best describes as engines:

- Engines to transform the health system into a highly performing integrated and sustainable patient-centered ecosystem
- Engines of innovation
- Engines of Health Technology Assessment/Reassessment
- Engines to cultivate research of relevance that will improve the health and wellness of Albertans
- Engines of quality, its measurement and its improvement
- Engines to scale and spread best practices provincially

Figure 3 presents the key functions of the SCNs™.

Figure 3 – Key Functions of the SCNs™



13 Key SCN Functions

1. To improve **value for money** in AHS - with evidence
2. To support and **lead population and public health initiatives**- either as individual SCNs or as cross-cutting initiatives of all
3. To develop evidence & best practice based **care models and pathways** for dissemination and implementation within the health system
4. Develop and publish **performance measures** across quality dimensions
5. **Assess and reassess technologies** and **enable evidence development**
6. **Prioritize outcomes and interventions** for improvement by zone and across the continuum of care
7. With zones and communities- undertake a **medium and long-term view of needs and service development** to drive quality and sustainability

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13 SCN functions (continued)

8. **Engage** clinical experts, users, patients and members of the public to design service models and implementation strategies to achieve goals
9. With zones implement, evaluate and **optimize innovative service delivery models**
10. Proactively **develop and use research, generate new knowledge** and **apply the knowledge translation** skills to solve vexing clinical problems
11. Proactively **identify innovations** and, where applicable, **initiate commercialization processes**
12. Determine **best use and allocation of** available **resources**
13. **Develop outcome improvement agreements with zones** including the commitment of resources on key new interventions, as well as associated change management

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The four key themes of SCN™ initiatives are outcomes improvement, wellness/prevention, appropriateness/sustainability/quality, and skilled provider teams. Examples of key projects led by SCNs™ in Alberta include development and implementation of vascular risk reduction in primary care, the Alberta Stroke Action

Plan to better support rural care, and the Diabetes Inpatient Management Initiative. Other important initiatives have not realized their full potential, and some SCNs™ were challenged early on with limited funding and other resources. Industry partnerships could have filled the gaps and led to earlier and more successful initiatives.

Going forward, the 3 major priorities across the SCNs™ to transform the system to a sustainable, high performing health system are:

1. Clinical pathway standardization and outcomes improvement
2. Clinical appropriateness with a focus on standards and targets
3. Health and social system integration and addressing determinants of health with a shift in care to the community

Transformation in a zero-sum game will occur through iterative, disruptive and emerging innovation and research, and a key enabler are win-win partnerships that improve the value and outcomes for patients and the health system. The innovative pharmaceutical industry is an important partner and the discussions today, that are a first step in the journey, will help define the opportunities.

1:00 – 1:30: Industry Presentation

Anne Babineau, Director Prairies, Innovative Medicines Canada

Presentation Abstract

Innovative Medicines Canada is an industry association of 50 research-based pharmaceutical companies in Canada, ranging from global organizations to Canadian start-ups. The industry accounts for 42,000 jobs nationally, and 2,700 in Alberta. Members contribute \$3B annually to Canada's GDP, and in Alberta contribute \$363M. Member companies annually invest \$1.3B in pharmaceutical R&D and related activities.

Innovative Medicines Canada priorities are:

1. Policies and partnerships that enable the discovery and development of innovative medicines and vaccines that improve the lives of all Canadians.
2. Ensuring that Canadians have access to the treatments they need and in safeguarding the healthcare system for future generations.
3. Supporting members' commitment to being valued partners in the Canadian healthcare system.

Innovative Medicines Canada has a Code of Ethical Practices that all members are required to adhere to. This Code maintains strict standards on what is acceptable in interactions with stakeholders, and any violations are publicly reported. Figure 4 presents the guiding principles of the Code.

Figure 4 – Code of Ethical Practices – Guiding Principles



Code of Ethical Practices – Guiding Principles

- First priority is the **health and well-being** of all Canadians
- Highly **professional and ethical** relationships
- Rules of law prevail
- All member employees trained on the Code and follow it – letter and spirit
- Ensure **trustworthy and credible** relationships
- Clinical trials and research is intended to develop knowledge – **transparency in results**
- **Fair and balanced information and education** on member products and services
- No improper or unlawful payments to any stakeholder

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Partnerships are a priority for Innovative Medicines Canada and member companies, in order to share and utilize knowledge, expertise and resources, demonstrate value to Canadians and their health systems, create opportunities for research and health system improvements, and to deliver better outcomes. Partnership approaches are as varied as the need and opportunity, and may include individual or groups of member companies, or Innovative Medicines Canada directly, supported by the association’s member-funded Health Research Foundation.

Innovative Medicines Canada and its members have a number of partnerships across the provinces, with a range of organizations including government, academia, and life science and patient organizations, that illustrate some potential for partnership in Alberta with the SCNs™:

1. A PEI partnership between government, the PEI Lung Association, providers, and 3 members companies to improve quality of care, access, efficiency and patient self-management among COPD patients. The project demonstrated significant cost and care improvement and was expanded across the province.
2. A Quebec partnership involving government and providers to deploy optimal care pathways for interdisciplinary practice in family medicine to improve care for patients with multiple chronic conditions. The project would have resulted in an estimated \$500M in savings if expanded across the province.
3. An Ontario education partnership involving 14 pharmaceutical companies, St. Joseph’s Health Care, Dr. Stewart Harris (National Diabetes Management

Strategy) and the Canadian Diabetes Association targeting primary care registered nurses, nurse practitioners and other allied healthcare professionals to address key concepts of diabetes management.

4. A Manitoba partnership between Innovative Medicines Canada, Manitoba Centre for Health Policy, and Manitoba Health to better understand the prescribing practices of physicians with newly diagnosed diabetes patients, with a goal to showcase data capabilities, generate real world evidence, and develop knowledge to support better decision-making.
5. A Saskatchewan partnership involving government, academia and industry to determine if optimal levels of medication adherence can be achieved through a formal collaboration between community-based physicians and community pharmacies.
6. A B.C. partnership between Innovative Medicines Canada, five members, the BC Ministry of Health, UBC's Personalized Medicine Initiative, and Genome BC to demonstrate how personalized health care, using genomic markers, can reduce costs and improve health outcomes for patients by reducing adverse events, reducing mortality and improving quality of life.

In Alberta, there are also some unique partnerships, exemplified by two initiatives. Astellas, The University Hospital Foundation, and Alberta Economic Development and Trade have partnered to establish a \$1.2 million Alberta Transplant Innovation Fund (ATIF). Through the collaboration of researchers, clinicians, industry leaders, government and philanthropy, ATIF will fund research aimed at improving the care available to transplant patients. Additionally, Merck, Alberta Health Services, and Alberta Innovates have launched a program called "Innovation to Improve Access and Care Quality for Aboriginal Women in Alberta" to address maternal health needs in indigenous communities. With a \$1M grant from the Merck for Mothers program, and a \$300,000 grant from Alberta Innovates, AHS will partner with Merck to develop the collaborative initiative.

Industry is looking forward to engagement with the SCNs™ in Alberta in order to identify opportunities and collaborations that will help to achieve better outcomes for patients. There is likely opportunity to share learnings from other jurisdictions that will support the work of the SCNs™. Trust is the foundation of a positive working relationship, and the discussions today represent a good start.

OPEN EXCHANGE REFLECTION

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Immediate Next Steps

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2. **Develop Guiding Principles** for industry / SCN™ interaction and conduct in order to establish a foundation for partnership and to proactively manage issues related to trust and conflict of interest. Inform this work with engagement frameworks from other provinces, the Canadian Consensus Framework for Ethical Collaboration, the Innovative Medicines Canada Code of Ethical Practice, as well as AHS industry engagement polices.

CONCLUDING COMMENTS

This meeting provided a constructive forum for the SCNs™ and Innovative Medicines Canada to exchange as a first step to partnership and collaboration to help find solutions to issues and challenges within the Alberta health system. There was an expressed willingness to partner, and both the SCNs™ and the innovative pharmaceutical industry shared the view that partnership will benefit the health system and patients, as well as the partnering organizations. One SCN™ participant noted *“There was a clear message from industry that they are interested in health care in general, and a win for them is to help us with this, and a win for us is to get solutions for some issues going forward, using industry for financial support, special expertise, and dissemination.”*

Trust was clearly emphasized as key to successful partnership, and the group identified opportunity and a path forward to ensure a solid foundation of trust from the outset. One SCN™ participant noted *“Industry realizes the current system is not sustainable. This helps with the trust issue as we have common goal.”*

The reflection at the meeting indicated that the engagement exercise was a good first step and that there is a basis for subsequent work in order to create the guiding principles and framework for partnership to support future engagement. Work will shortly begin on the next steps identified in this document, and subsequent communication and engagement will follow.

APPENDIX 1: LIST OF REGISTERED PARTICIPANTS

Name	Organization or SCN™
Allison Bichel	Addiction and Mental Health, and Maternal Newborn Child & Youth SCNs
Amyr Sayani	GSK Canada
Anne Babineau	Innovative Medicines Canada
Barbara O'Neill	Cancer and Critical Care SCNs
Bindi Ferguson	Alberta Innovates
Blair O'Neill	Strategic Clinical Networks™
Candice Rockwell	Alberta Innovates
Carla Weyland	Alberta Innovates
Cathy Chan	Diabetes, Obesity and Nutrition SCN
Chris Carvalho	TEC Edmonton
Chris Normandeau	Cancer SCN
Cindy Schurman	AbbVie Biopharmaceutical
Colleen Norris	Cardiovascular Health and Stroke SCN
Craig Stevenson	Pfizer Canada
Dale Lien	Respiratory Health SCN
Dan Ekstrand	GSK Canada
Dan Palfrey	Institute of Health Economics
Daniel Muruve	Kidney Health SCN
Danny Labbe	Boehringer Ingelheim Canada Ltd
David Hart	Bone and Joint Health SCN
David Johnson	Maternal, Newborn, Child and Youth SCN
Deborah James	University of Alberta
Dennis Cleaver	Seniors Health SCN
Donna Bergsten	Astellas Pharma Canada
Esther Tailfeathers	Population, Public and Indigenous Health SCN
Farid Foroud	Government of Alberta, Ministry of Economic Development and Trade
Gilles Gagnon	Ceapro Inc.
Graham Petz	Strategic Clinical Networks™
Hameed Khan	Alberta Innovates
Hubert Eng	Government of Alberta, Ministry of Economic Development and Trade
Isabel Salcedo	Alberta Innovates
James Silvius	Seniors Health SCN
James Stone	Cardiovascular Health and Stroke SCN
Jason Ding	TEC Edmonton
Jill Kravinchuk	Astellas Pharma Canada, Inc.
John Howell	Astellas Pharma Canada, Inc.
John Sproule	Institute of Health Economics/Alberta Health
John Warrington	Novo Nordisk
John Wilson	Innovate Calgary
Justin Riemer	Alberta Health - External & Stakeholder Relations
Kathy Dmytruk	Diabetes, Obesity and Nutrition SCN
Kay Rittenbach	Addiction and Mental Health SCN
Keith Gilchrist	Janssen Pharmaceutical Companies of Johnson & Johnson
Kimberly Shulha	Novartis Pharmaceuticals Canada
Kirby Scott	Alberta Innovates

Lana Solberg	Boehringer Ingelheim Canada Ltd.
Lee Kruszewski	Government of Alberta
Linda Revell	Northern Alberta Institute of Technology (NAIT)
Lorne Koscielnuk	Servier Canada
Louise Morrin	Digestive Health and Kidney Health SCNs
Lydia Lanman	Eli Lilly Canada
Marianne Stewart	Alberta Health Services' Primary Health Care Integration
Marni Bercov	Addiction and Mental Health SCN
Mel Wong	BioAlberta
Michael Kelley	Roche Canada
Michael McLean	Novartis Pharmaceuticals
Michele Evans	Alberta Health
Mikie Mork	Strategic Clinical Networks™
Nairne Scott-Douglas	Kidney Health SCN
Nicholas Mitchell	Addiction and Mental Health SCN
Nicola McFarlane	BioAlberta
Petra O'Connell	Diabetes, Obesity and Nutrition SCN
Randall Yatscoff	TEC Edmonton
Reg Joseph	Alberta Innovates
Robert Lee	Sanofi
Robert Wiebe	Pfizer Canada Inc.
Rod Elford	Strategic Clinical Networks™
Sander van Zanten	Digestive Health SCN
Scott Fielding	Seniors Health SCN
Scott Reinson	Roche Canada
Selvi Sinnadurai	Critical Care SCN
Shelley Valaire	Cardiovascular Health and Stroke SCN
Sophia Shin	AstraZeneca Canada Inc.
Tami Crawley	Bristol-Myers Squibb Canada
Ulrich Wolfhaardt	Alberta Innovates
Val Austin-Wiebe	Population Public & Indigenous Health SCN

APPENDIX 2: SPEAKER BIOGRAPHIES

Mr. Reg Joseph

*Vice President, Initiatives and Innovations
Alberta Innovates*

Reg has 15 years' experience in the biotechnology and high technology sectors and has worked with large publically traded firms, start-ups, and the investment banking industry. His prior experience includes serving as an equity research analyst with Boston-based Leerink Swann & Co., where he covered the life science tools sector. He also spent four years at US-based Invitrogen Corp (now Thermo Fisher) in a variety of roles including licensing, product development, acquisitions and integration. Reg has also served in a variety of C-level and board positions with local medical technology-based start-ups.

Reg currently serves on the Board of BioTalent Canada and is a mentor for the AllerGen NCE commercialization program. He also sits on BioAlberta's policy committee and serves on the board of the Seniors Association of Greater Edmonton (SAGE).

Mr. Gilles Gagnon

*President and CEO
Ceapro Inc.*

Mr. Gilles Gagnon is the President and Chief Executive Officer of Ceapro Inc. He has also been President of Prodev Pharma Inc. since May 2007. Prior to that, he was Chief Executive Officer of AEterna Zentaris. During the past thirty years, Mr. Gagnon has worked at several management levels within the field of health, especially in the hospital environment and pharmaceutical industry where he participated in launching several new pharmaceutical products. Before coming to AEterna in 1999, Mr. Gagnon was Vice President, External Affairs, for Novartis Pharma Canada Inc. Mr. Gagnon holds a Master's degree in Pharmacology (M.Sc.), a Master's degree in Business Administration (MBA) from Sherbrooke University, and a certificate in general management from the London Business School, UK.

Dr. Blair O'Neill

*Associate Chief Medical Officer, Strategic Clinical Networks™
Alberta Health Services*

Dr. Blair O'Neill is the former Senior Medical Director for the Cardiovascular Health and Stroke Strategic Clinical Network for Alberta Health Services. He recently assumed the position as the Associate Chief Medical Officer Strategic Clinical Networks™ for Alberta Health Services. He served as President of the Canadian Cardiovascular Society from 2010 – 2012 and is currently its Immediate Past President (2012 – 2014).

Ms. Anne Babineau
Director, Prairies
Innovative Medicines Canada

Anne is the Director, Prairies with Innovative Medicines Canada and works with key partners and stakeholders to advocate for an improved environment for the research-based pharmaceutical industry so that research and development activities in Canada can continue to develop new medicines and vaccines for patient benefit.

Anne has worked in an advocacy role with United Way of Calgary and Area (as their Senior Director of Marketing Communications) previous to this position. And she spent nine years working on the Executive Team at Chinook Health in Lethbridge as their Director of Communications.

Anne graduated from University in Halifax with degrees from University of King's College, Dalhousie University and Mount Saint Vincent University.

Dan Palfrey
Director, Industry Engagement
Institute of Health Economics

Dan Palfrey is the Director of Industry Engagement with the Institute of Health Economics. In previous roles Dan has held progressive leadership positions with a multinational pharmaceutical organization in Market Research, Sales, Marketing, Product Management and Government Relations, and most recently was a Vice President with one of Canada's leading Electronic Medical Record companies. Dan has Master of Public Health and Bachelor of Science degrees from the University of Alberta.

Bindi Ferguson
Senior Manager – Industry & Technology Initiatives (Health)
Alberta Innovates

Bindi has over 9 years of experience in research partnerships and health innovation commercialization. Her prior experience includes patenting and commercial licensing of intellectual property, and negotiating spin-off companies developed out the University of Alberta with TEC Edmonton. Prior to that she had worked at the University of Alberta's Research Services Office negotiating complex multi-party research partnership agreements. She has a science background in Immunology (MSc) and Pharmacology (BSc).