1. **Call to order / Roll Call / New Members**
   1.1 The Chair welcomed all members to the Clinical Trials BC Advisory Council (AC) meeting and advised the meeting would be recorded for minute-taking purposes. The recording will be deleted after the minutes are transcribed.
   1.2 The Chair welcomed the AC Council's newest members-Harvey Howse (MoH) and Anne Babineau (IMC).

2. **Approval of Agenda / Additions**
   2.1 The agenda was approved as presented.

3. **Council Membership Renewal**
   3.1 Renewal membership letters with new terms are to be sent out in Fall 2021. Members were asked to provide suggestions for new members for this Council by reaching out to Gavin or Alison. The goal will be to stagger terms now that the Council is established.

4. **BC AHSN/MSFHR Consolidation Update**
   4.1 Alison provided a brief update on the consolidation process. The key points are that the process for consolidation is on track for the public announcement in Fall 2021. The Transition Task Force, a subset of the two boards, is working with staff and leadership to make sure that this process is proceeding smoothly. The intent is to sign a consolidation agreement on Sept 30th, 2021, which would see the organizations operating under a single board of directors and a new name. Post-October, when the consolidation has taken place, an in-depth consultation will inform a new strategic plan building on the current work of both organizations. The first board of the consolidated organization will include a minimum of 9 members with a range of skills, backgrounds, and experiences. Members will come from both current boards of the organizations, but a minimum of two new members will be recruited. Council members were
asked to contact Jane Cooke-Lauder if they had suggestions for new board members. Her contact information can be found on the BC AHSN website or forward suggestions to Stirling Bryan. More information can be found on the BC AHSN website in a public announcement on June 1st, 2021.

5. **Regulatory and Quality Updates**
   5.1 Jean shared the Save the Date for the International Clinical Trials Day- Week of May 16-20th, 2022. Clinical Trials BC will be hosting various events throughout the week.
   5.2 Jean informed the group of the International Harmonization update and the approved integration of updated regulatory guidances.
   5.3 The Health Canada Clinical Trials Modernization Consultation Response regulatory consultation was an ambitious framework for all health care products – a new regulatory regimen. She informed the Council that this is an opportunity for all institutions to respond. Clinical Trials BC is planning a response that will be shared with this Council following submission.

6. **Provincial Clinical Trial Organizations in Canada - Overview**
   6.1 Alison shared an overview from the McDougal Scientific Report created in 2020 showing BC in fourth place in terms of the number of Clinical Trials active in Canada. This report is available to view on the Clinical Trials BC website. A closer look was taken at other provincial organization objectives, governance, and funding models. A discussion was held on the different provincial mandates and oversights.

7. **National Initiatives, Partnerships and Opportunities – Discussion**
   7.1 Questions were brought forward for discussion: What is CTBC missing regarding possible funding opportunities, partners, representation, and voices?
   Discussions centred around the difficulty of data sharing and barriers. The role of this committee was also brought forward for discussion. The idea of a Canada-wide approach to clinical trials and Clinical Trial BC’s involvement in a national strategy was considered.

8. **Engagement with Industry**
   8.1 Rob asked how to involve industry best to get direct feedback, and the idea of developing a formal Industry Advisory committee was brought forward. The importance of better engagement with industry was agreed as key. Suggestions for possible ways to engage included through IMC and their membership for a first general discussion and then working groups to address key priorities, hold annual updates with the industry and engage through IMC in between. Anne offered to help initiate and bring members to the table and then go from there. It was thought best to think about why to engage industry, what the objectives and what is trying to be achieved in doing so. Gavin thanked everyone for the excellent discussion, and Alison said this gave her something to work with.

9. **CTMS Program Update**
   9.1 Marc provided a presentation, reviewed the activities’ summary 1.5 years post-launch, and noted the current list of participating organizations. He spoke to the usage metrics as well as the Implementation Evaluation survey responses and outcomes. He showed a preview of the CTMS newsletter. The current funding status discussion was held on ensuring long-term success. Included with this was cost and equity of the program, institutional overheads, creating a special purpose fund that rolls over deferred funds, standard budget items, and capturing positive stories/quotes
for the program evaluation. The Council advised that impact analysis and evaluation activities will be vital to securing long-term sustainability.

10. **REACH BC Update**

10.1 Stef reviewed the new governance structure and provided a summary of activities one-year post-launch. She provided an update on the joint project Patient-Oriented Research Database with BC SUPPORT Unit. She talked about new opportunities to explore—how REACH BC and CTMS collaborate/coordinate and expand REACH BC users/activity.

REACH BC asked for suggestions to increase awareness of REACH BC and ways to engage stakeholders. Some suggestions brought forward:

- Share REACH BC link (www.reachbc.ca) on Health authority newsletters, social media channels
- Island Health Cerner patient portal, patients use it to access lab results, a great place to share REACH BC under the Research section
- Create a rural campaign in Interior, North
- Present to the RCCbc
- Share information with Pandemic Response Teams
- Include messaging "research is care, care is research."
- Consider patients that have negative views of research. Include sensitive messaging that research is essential; patient-oriented research is what we are striving for
- Connect with GPs/family practitioners – this is the number one place patients want to hear about research
- Connect with patient advocacy groups – groups that advocate for patients access to trials, sharing results
- Demonstrate how REACH BC can help research from a system perspective – e.g., connecting people to research in more clinical areas – e.g., came in for COVID research but then signed up for another health research area
- Ask municipal governments to share the link on their webpages
- BC Health Gateway (a link to BCCDC Consent Registry which flows to REACH BC is in progress)
- Look at communications beyond healthcare – consider the education system
- For engaging indigenous populations - connect with Harley Pruden from the SRAC Communications subcommittee, Friendship Centres
- Mental health organizations – this will be a crucial research area coming post-COVID
- Connect with charities/societies – some that may fund research

11. **Business from the floor**

N/A

12. **Adjournment**

The meeting was adjourned at 4:29 pm PST.

**Upcoming meeting dates: Oct 26th, 2021**