

ADVISORY COUNCIL MEETING MINUTES

Thursday, June 23rd, 2022

8:00am-10:00am

Attendees:	Gavin Stuart, Chair Tania Bubela Lisa Elser Wendy Hurlburt Mandeep Manhas Srinivas Murthy Melanie Reid	Rob McMaster, Past Chair Martin Dawes Kendall Ho Kate Keetch Stephania Manusha Rob Olson
Ex-Officio:	Alison Orth Danielle Lavallee	Jean Smart Terri Fleming
Regrets:	Julia Bickford, Paul Winwood	
Recording Secretary:	Rishi Sahni	
Guests:	Stirling Bryan	

1. Call to order / Welcome

G. Stuart welcomed all members to the meeting of the Clinical Trials BC Advisory Council (AC) and offered a territorial acknowledgement.

2. Approval of Agenda / Additions

Agenda was approved as presented.

3. Vision for Clinical Trials in BC

G. Stuart introduced and welcomed S. Bryan to start the discussion.

S. Bryan thanked the AC members for their contributions to creating a successful vision document. Two meetings have been held with The Ministry of Health (MoH), who engaged Michael Smith Health Research BC (Health Research BC) to create and prepare the vision, on April 6th and May 27th. Another meeting was had with the Ministry of Jobs, Economic Recovery and Innovation (JERI.)

A. Orth shared slides with the AC members highlighting what the next steps are in the vision process and provided additional updates.

The MoH asked Health Research BC to make minor framing changes to the vision document to be submitted to them by June 24, 2022. An agreement was also made with the MoH that the “elements” portion of the vision would be reviewed and that Health Research BC would determine what work is going on currently to improve the current state in BC. This was agreed to be presented to the MoH at some point in the first half of July.

Work will also be done throughout the summer to validate the working vision with the clinical trials community as well as with Indigenous communities. The resulting vision will be shared with the clinical trials community in September.

JERI provided no substantive recommendations to change the vision. Their primary areas of interest are the economic impacts of trials in BC. A.Orth will be meeting with C. Lacombe in early July to follow up with JERI.

A group dialogue occurred on the vision document itself. The council members urged the “why” of the vision to be expanded upon and highlighted more. Using more examples of why trials are needed was also discussed, along with reaffirming that trials are meant to improve patient outcomes and experiences.

Connecting the vision with the Stronger BC Economic Recovery plan was discussed and something to explore. Atlantic Canada’s recent uniting around clinical trials as an economic opportunity along with patient outcomes improvement was discussed. Exploring and expanding the economic opportunities in the vision and trials itself is something that would appeal to JERI and something that can persuade government to act.

The council suggested that Clinical Trials BC should be the ones taking responsibility for infrastructure and support across BC for clinical trials development and taking a leadership role and serving the population.

Identifying BC’s comparative advantages and what trials we can and want to do here was discussed by the council. Making sure that the vision reflects what B.C. does well, like real world trials, local innovation or quick data access, should be the niche attraction of the province rather than being too broad and all-encompassing of all trials.

The council discussed the importance of understanding that research is care and having those sentiments echoed throughout the province as the current state separates the two into mutually exclusive ideas. Because of this, there isn’t enough resources to support trials at the health authority level. There’s a need for the MoH to ensure that research is care and provide the adequate funding needed to ensure the province has thriving, equitable trials. Having the resources but also the acknowledgment from the government of how challenging trials can be is needed. The government has a significant role in the advancement of trials in B.C.

The council discussed the idea of having a centralized governance system where there is a group or organization, potentially Clinical Trials BC, leading the collaboration and coordination of trials across the province between health authorities and maximizing resources.

4. CIHR Clinical Trials Fund

G. Stuart moved the discussion along to the Canadian Institute of Health Research (CIHR) Clinical Trials Fund, where the federal government has allocated \$250 million over three years into the CIHR to increase clinical research capacity. A.Orth gave a brief overview of what the core reasons for the funder are: Improve Health outcomes; generate scientific evidence that contributes to the development of new proven interventions, treatments and cures.

A. Orth reviewed over the three streams of funding: Pan-Canadian Clinical Trials Consortium; Clinical Trials Training Platforms; Clinical Trials projects and discussed how Clinical Trials BC is involved with each stream and how they are supporting an inclusive and collaborative consortium, taking a leading role on the Clinical Trials Training Platforms along with Clinical Trials Ontario and other partners across the province and country, and lastly, supporting the Clinical Trials projects.

D. Lavallee spoke of the role of Health Research BC, post-consolidation, and how the funding and collaboration work between the different departments within the organization to support these CIHR funding opportunities.

R. McMaster spoke about the ongoing biomanufacturing work and proposals federally and the role that clinical trials play in the continuum of biomanufacturing work, and addressing the phase 1 gaps in BC.

5. CTBC Annual Awards Ceremony

J. Smart gave an overview and recap of the annual awards ceremony and the awards recipient review process and outlined what next year's review process will look like.

6. Quality Leadership Program

J. Smart described the Quality Leadership Program to the council, a new program put out by Clinical Trials BC this year to identify and combat gaps in quality and leadership that have been identified by previous studies. Jean described the goals to jump-start quality education within clinical trial communities and to pilot a new approach to quality education by supporting learners and personnel to meet regulatory requirements. Jean gave a recap of the course, the registrants and the next steps that were taken by those registered.

7. Clinical Trials Management System (CTMS) & REACH BC Update

A. Orth gave a brief update on CTMS metrics on the number of sites, the number of active trials the number of total trials. A developmental evaluation of CTMS is in progress to show what's needed to support CTMS and how to ensure its success. The evaluation should be completed by July and will be shared with the council in October.

A. Orth gave an update on REACH BC, highlighting the number of researchers, volunteers and active projects. REACH BC is also undergoing a developmental evaluation which will be shared with the council in October.

8. Adjournment

The meeting was adjourned by the G. Stuart at 9:59 AM.

Next Scheduled Meeting: October 25, 2022