

ADVISORY COUNCIL MEETING MINUTES

Tuesday, October 25th, 2022

2:00am-4:30pm

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

1. Call to order / Welcome

A. Orth welcomed all members to the meeting of the Clinical Trials BC Advisory Council (AC), sent apologies on behalf of the Chair, Gavin Stuart for being unable to attend and offered a territorial acknowledgement.

2. Approval of Agenda / Additions

J. Bickford proposed adding the CIHR Consultation for a clinical trials strategy across the country as a new business topic.

M. Reid motioned to approve the agenda. L. Elser seconded.

M. Reid motioned to approve the June 23rd, 2022, meeting minutes. W. Hurlburt seconded.

3. Michael Smith Health Research BC's Three-Year Strategy

A. Orth introduced and welcomed D. Lavallee to start the discussion.

D. Lavallee shared slides highlighting the considerations that went into Michael Smith Health Research BC's (Health Research BC) new three-year strategy which includes three strategic directions, four strategic enablers and how to best operationalize this new strategy. A slide was shared showcasing the work currently being done within each department of Health Research BC that aligns with the strategy and the work that needs to be built upon to optimize the strategic goals.

S. Bryan shared that this process put together the existing strategic plans between the former Michael Smith Foundation for Health Research and the BC Academic Health Science Network. The current Board of Directors of Health Research BC endorsed and finalized this strategy.

A group dialogue occurred on the strategy. The idea of a logic model was introduced to help parse between the need for in-depth questions and keeping the document high-level. Creating a “score-card” evaluation to measure the success of the strategy implementation was also proposed.

The council discussed the need to add ‘attracting diverse and marginalized communities to clinical trials’ as part of the strategy. Currently, the strategy is not at that phase, however further consultations will guide what else is needed for the strategy to be successful. There are conversations ongoing with Indigenous groups about the strategy and how best to move forward. Emphasizing decentralized clinical trials to attract Indigenous and remote communities was discussed and is something that is in the active next steps for advancing the strategy.

Including truth and reconciliation to the strategy document and acknowledging the harms that were done in the past was brought for discussion. There are numerous activities regarding truth and reconciliation across the province and partnering with Indigenous groups will be helpful moving forward.

M. Dawes proposed that once further along in the strategy, a partnership should be considered with the BC Chapter of the College of Family Physicians. Further conversations must take place with the appropriate parties before deciding which programs to fund.

4. Provincial Clinical Trials Vision Update

The conversation moved towards the provincial clinical trials vision work. A. Orth shared slides regarding the recent feedback on the provincial vision work which included why should BC companies do their clinical trials in BC, a clearer statement regarding what Indigenous engagement will be on the vision and how we ensure that clinician scientists have protected time to do research.

The council discussed the recent feedback and engaged with the “why should BC companies do trials in BC,” feedback. Getting greater clarity on the obstacles as well as becoming more population-based in our trials was discussed.

The harmonization among the health authorities in BC and what that process could look like was proposed as a future topic point for the council.

A. Orth shared a slide regarding the current and emerging activities in BC in relation to the vision elements. R. Olson brought up the conflict between ensuring compliance with regulations, ethical guidelines and quality standards and enabling clinical trials to be part of the clinical care continuum due to the heavy regulations on clinical trials currently. The conversation about the role of clinical trials BC and the AC in assisting these changes should be discussed in future conversations.

5. REACH BC Evaluation

A. Orth introduced S. Cheah to share the recent evaluation report of REACH BC. S. Cheah shared slides regarding the recent evaluation conducted by Ference & Co. to examine the need, design & delivery, effectiveness and impact of REACH BC.

The evaluation showed there is a need for REACH BC and REACH had increased enrollment in health research studies, the website design is positive, but there needs to be an increase in diversity of

REACH BC volunteers. S. Cheah shared the recommendations and next steps post-evaluation and the current work in progress.

S. Cheah asked the AC how to strengthen partnerships across the province. S. Manusha brought up the Respiratory group at VGH. M. Reid proposed the Diamond Centre, the renal clinic at St. Paul's. and senior and wellness centres. M. Dawes proposed reaching out to the BC Pharmacist association and working with the College of Family Physicians for coordination. The council discussed engaging undergraduate medical students as an avenue to increase interest in health research at a younger age.

6. CTMS Evaluation

A. Orth introduced M. Saunders to discuss the recent clinical trials management software (CTMS) evaluation conducted by Ference & Co. M. Saunders shared slides on the evaluation which discussed the relevance & need, implementation & early impacts, recommendations and next steps for the CTMS.

The evaluation showed the early impacts are difficult to fully measure at this time. The responses varied in terms of the benefits so far. PHSA has their own CTMS and there has been collaboration in assisting us with our CTMS and find opportunities to work together. M. Saunders went over the recommendations and suggested strategies as well as the projected timeline for the CTMS.

W. Hurlburt highlighted the resources, expertise and the time it takes to implement these systems as something that should be focused on critically. J. Bickford brought up adopting an equity-based approach as certain areas will require more support than others.

M. Saunders asked the council if they had any advice to increase the uptick for buy-in. The council agreed that buy-in from the top and the individual leaders is needed, as well as having the necessary resources to implement it. The topic of mandating CTMS was proposed, but that must be done at an individual organization level.

7. ASK Us Series – Topics/Speakers

A. Orth shared some slides on the ASK Us Series by giving the background information on how ASK Us invites a speaker for each episode to present on a hot topic for clinical trials in the community.

ACTION ITEM – Please send over any recommendations for ASK Us topics or speakers to this link [ASK US Series topic/speaker suggestion \(CTBC Advisory Council meeting Oct 25\) Survey \(surveymonkey.com\)](https://surveymonkey.com/survey/organization/ask-us-series-topic-speaker-suggestion-ctbc-advisory-council-meeting-oct-25)

8. Annual Clinical Trials BC Awards 2023

A. Orth invited J. Smart to speak about the Annual Clinical Trials BC Awards 2023. J. Smart described the awards: the Clinical Trials BC Leadership Award; the Clinical Trials BC Support and Service award.

The call for nominations opened in September. The deadline for nominations is January 5, 2023 end of the day. A nomination committee is being forged.

ACTION ITEM – Please submit your nominations prior to January 5, 2023 end of day.

ACTION ITEM – If you're interested in being part of the nominations committee, please email Alison Orth – aorth@healthresearchbc.ca

9. New Business

A. Orth gave a background on the CIHR open consultation CIHR wants to create a dialogue and strategy for the long term plans for clinical trials in Canada. Clinical Trials BC will be putting forth a response and encouraged others to do the same.

10. Adjournment

The meeting was adjourned by the A. Orth at 4:23 PM.

Next Scheduled Meeting: February 21, 2023