CADTH 2016-2017 Annual Business Plan

CADTH Evidence Driven.

CADTH

About CADTH

CADTH is an independent, not-for-profit organization responsible for providing Canada's health care decision-makers with objective evidence to help make informed decisions about the clinical effectiveness, cost-effectiveness, and optimal use of drugs, medical devices, diagnostics, and medical, surgical, or dental procedures and programs. CADTH accomplishes this by acting as a major producer of evidence, advice, recommendations, and tools that promote the optimal use of health technologies, taking into consideration the local context in which decisions are made. CADTH also plays a key role as a broker by fostering evidence generation and adoption across Canada.

CADTH is accountable to the federal, provincial, and territorial (F/P/T) Conference of Deputy Ministers of Health (CDM) through the CADTH Board of Directors. Core funding is provided through financial contributions from Canada's F/P/T governments (except Quebec).

Setting Direction

Early in 2015, CADTH adopted a new strategic plan, entitled *Informing Choices in a New Era of Health Care in Canada*, which encompasses the time period from 2015 to 2018. This three-year strategic plan builds on CADTH's reputation as a key resource for health care decision-makers in Canada. The plan sets out the following vision and mission statements, which guide the activities of the organization:

Vision

Health technology assessment informs every health technology decision.

Mission

To enhance the health of Canadians by promoting the optimal use of health technologies.

The strategic plan describes the refinements, enhancements, and new approaches CADTH will undertake to **deliver value** to health decision-makers, **expand the reach** of the organization, and **set the standard** for evidence generation and analysis. Designed to be responsive to the evolving health care environment, the strategic plan was informed by an environmental scan and a series of focus groups with customers to reflect the context in which health decisions are made, as well as the evolving needs of the constituency that CADTH serves.

Table 1: Projected Production Capacity for 2016-2017

Program	Product	Projected Production Capacity (2016-2017)
Formulary Reviews	CADTH Common Drug Review Drug Reimbursement Recommendations	40 to 45
	Jurisdictional Requests for Advice	2 to 4
	CADTH pan-Canadian Oncology Drug Review Drug Reimbursement Recommendations (includes 2 to 4 non-industry submissions)	20 to 25
Health Technology Management	Rapid Response Reports	250 to 300
	Blood Product Reviews	1 to 2
	Health Technology Assessment Reports	6 to 10
	Optimal Use Reports	4 to 8
	Environmental Scans	6 to 10
	Horizon Scans	10 to 15

Priority Initiatives for 2016-2017

Much progress has been made toward integrating evidence into the health care system. This business plan identifies priority initiatives for the 2016-2017 fiscal year — initiatives that position CADTH to build upon the accomplishments of the previous year and to press forward in achieving the three strategic goals and associated objectives articulated in *Informing Choices in a New Era of Health Care in Canada*. Recognizing that CADTH is ultimately accountable to the CDM, the priorities of the organization may shift throughout the year in response to the evolving needs and goals of the CDM.

Priority Initiative 1: Deliver a balanced portfolio of products and services.

To support its mission, CADTH delivers a defined suite of products and services in accordance with customer needs and priorities. The production targets for 2016-2017 are listed in Table 1. These targets are consistent with priorities identified by CADTH customers and represent a balance between customer expectations and available financial resources. A detailed description of CADTH products and services is provided at the end of this document. Given that priorities evolve over time, actual demand for the various products will influence actual output across the product lines.

Priority Initiative 2: Develop and implement the medical devices strategy with a particular focus on knowledge mobilization and implementation support.

Over the course of the previous year, a major area of focus for the organization has been on making enhancements to the project development process for medical devices, including renewed approaches to topic identification and prioritization. Next, CADTH will make enhancements to the knowledge mobilization and implementation phases of the project life cycle.

First, CADTH will revise the standard content of medical device optimal use reviews to incorporate to a greater extent the contextual factors that must be considered by decision-makers responsible for implementation.

Second, for every new medical device optimal use project, CADTH will develop a suite of tools to support customer implementation (including those described under Priority Initiative 5 in this plan).

In tandem with the development and implementation of the CADTH medical devices strategy, the CDM has asked CADTH to lead the development of a pan-Canadian Health Technology Management Strategy. This strategy will be developed in consultation with jurisdictional officials and other key stakeholders, including the medical devices industry, clinicians, health system administrators, health technology assessment (HTA) producers, and patients.

Priority Initiative 3: Evolve the pharmaceutical portfolio through opportunities for enhancement of drug review and optimal use processes that address CADTH and customer priorities.

Drug plans and cancer agencies are challenged to provide appropriate access to medications and to ensure that funded medications are used appropriately while balancing competing stakeholder pressures. CADTH has developed an action plan, working with drug plan and agency representatives related to drug reviews for rare diseases, subsequent entry biologics, and companion diagnostics. CADTH will continue to develop this plan to address customer needs. In addition, work is ongoing to align the optimal use processes, which includes therapeutic reviews, to ensure recommendations are brought forward to help support management of the public programs.

A related area of focus will be to explore the potential opportunity to transition the Drug Safety and Effectiveness Network (DSEN) to CADTH, as recommended in the report of the federal Advisory Panel on Healthcare Innovation. DSEN currently provides support for the development of some drug reports, such as therapeutic reviews.

To promote consistency across settings, CADTH will explore opportunities to become involved in informing hospital formulary decision-making processes, which will include assessing the resources required to support this additional work.

Although the alignment work for the CADTH pan-Canadian Oncology Drug Review (pCODR) and CADTH Common Drug Review (CDR) programs will be complete, further administrative alignment will continue to improve overall efficiencies.

Priority Initiative 4: Demonstrate increased transparency related to methods, performance, impact, and projects, in order to reinforce the reputation of the organization as a credible source of evidence.

In keeping with its commitment to transparency, this year CADTH will undertake the following new activities aimed at sharing information about the organization and its work with customers, partners, stakeholders, and other interested parties:

- Maintain a publicly accessible database that includes information on the HTA projects of Canadian HTA producers that are planned, in progress, and completed
- Publish the product development processes for major CADTH product types
- Publish a range of data on CADTH performance, and
- Complete and post the results of the independent evaluation of CADTH.

Priority Initiative 5: Grow the network of clinician champions both at the front lines of health care and through professional associations.

The meaningful engagement of clinicians — the users of health technology and the primary point of contact with the health system for patients — is critical to the successful incorporation of evidence into decision-making processes ranging from policy to practice. This year, CADTH will place particular emphasis on expanding its existing clinician engagement activities, with the aim of fostering greater understanding of quality research and tools to enable the use of evidence.

CADTH will respond to the clinician demand for reliable, accessible evidence, stemming in part from the increasingly active involvement of patients (and caregivers) in decisions about their care, through the creation of additional patient- and clinician-oriented tools, materials, presentations, and events.

CADTH will build on its long-standing stakeholder engagement practices, with a focus on clinician involvement. In 2016-2017, CADTH will complete and evaluate the pCODR pilot project on clinician engagement. CADTH will identify other opportunities to engage clinicians and embed their perspectives throughout the project development process. In addition, CADTH will seek input from front-line clinicians to better understand how they interpret and apply the concepts of cost-effectiveness and value.

CADTH will establish new and nurture existing relationships with professional associations in order to better understand and meet the evidence needs of clinician groups and to grow and leverage the network of clinicians who endorse and promote the use of both evidence and CADTH recommendations specifically.

Priority Initiative 6: Collaborate with Canadian partners to harmonize methods required for health technology management (HTM) and promote the generation of higher-quality evidence through Scientific Advice.

In January 2015, CADTH launched a new Scientific Advice program with the aim of providing advice about clinical trial design and other evidence requirements during the early phases of pharmaceutical development. CADTH has since conducted several Scientific Advice sessions and will continue to deliver this innovative program in 2016-2017. As experience with this approach is gained, CADTH will evaluate and make enhancements to the program, as required. The program is intended to contribute to the generation of higher-quality evidence required for HTA and ultimately lead to better informed decision-making at the policy and practice levels.

Consistent with its reputation as a respected producer of HTA, CADTH will continue to adopt and promote leading methods and participate in HTA methods groups at the national and international levels.

Financial Plan

Supplementary to core funding, provided by CADTH corporate members, revenue will be generated through industry application fees. CADTH will achieve a balanced budget through the continued efficient and effective use of internal and external resources. Annual operating costs continue to rise as a result of inflation, and efforts to achieve efficiencies and cost savings remain a priority for CADTH management.

Measuring Success

The priority initiatives described in this plan are intended to support and enhance the ongoing activities undertaken by CADTH in delivering its mandate. Each year, CADTH reports on its achievements against the objectives set out in the Annual Business Plan that was established for the previous fiscal year. This form of process evaluation serves as a mechanism for understanding if and how CADTH accomplished its stated goals for the year. Additionally, CADTH is in the process of adopting a set of indicators associated with the 2015-2018 Strategic Plan.

CADTH has also adopted a comprehensive Impact and Evaluation Framework that allows for the collection of both qualitative and quantitative data throughout the year. The output from the framework is intended, in part, to inform the planning process as it identifies successes, challenges, strengths, and weaknesses. This information serves as an indicator of the extent to which CADTH has been able to exert influence and effect change in support of its value proposition.

Programs and Services

In support of its mandate as an HTA organization, CADTH provides a standard set of core programs and services to participating F/P/T ministries of health and their constituents. This information is used to inform decisions about the optimal use of pharmaceuticals, medical devices, diagnostics, and procedures. The CADTH suite of HTA programs and services includes the following:

Drug Reimbursement Recommendations

The CADTH Common Drug Review

CDR is a pan-Canadian process for conducting objective, rigorous reviews of the clinical, cost-effectiveness, and patient evidence for drugs, and providing formulary listing recommendations to the publicly funded drug plans in Canada (except Quebec). The drug plans use this information to support their coverage decisions. CDR has been an operational program at CADTH since late 2003.

The CADTH pan-Canadian Oncology Drug Review

pCODR assesses cancer drugs and makes recommendations to the provinces and territories (except Quebec) to guide their drug-funding decisions. Established in 2010 by the provincial and territorial ministries of health, pCODR is designed to bring consistency and clarity to the assessment of new cancer drugs by looking at both clinical evidence and cost-effectiveness. pCODR is the permanent successor to the interim Joint Oncology Drug Review, which has provided evidence-based recommendations for cancer treatments since early 2007 and has demonstrated the value that a pan-Canadian collaborative platform can provide to cancer care decision-making. On April 1, 2014, pCODR became a program within CADTH.

Health Technology Management Programs & Services

Rapid Response Service

The Rapid Response Service provides Canadian health care decision-makers with evidence-based information tailored to their requirements. The reports respond directly to urgent jurisdictional needs for information that will inform policy and practice decisions.

Health Technology Assessment Service

The evidence produced within this program is disseminated through various products and services that can vary in scope and complexity. The assessments provide a full analysis of the clinical and economic aspects of a technology, and may include other factors that examine the broader impact of the technology on patient health and the health care system. HTA reports can involve assessments of new technologies or reassessments of existing technologies. The report will provide conclusions, but will not include recommendations from a CADTH expert committee.

Optimal Use Service

Optimal use projects involve systematic reviews of the clinical evidence, cost-effectiveness analyses, and development of recommendations and guidance. The reviews are carried out in collaboration with a committee or panel comprising subject matter experts, public representatives, and other stakeholders from across Canada. Optimal use projects are intended to encourage appropriate coverage, prescribing, and utilization of drugs and other health technologies.

Environmental Scanning

To better understand the national and international landscape, CADTH conducts environmental scans of health care practices, processes, and protocols inside and outside of Canada. Environmental Scans inform decision-makers about the use of health technologies in other jurisdictions, and help guide topic selection for some CADTH projects.

Horizon Scanning

Horizon scanning products alert decision-makers to new and emerging health technologies that are likely to have an impact on the delivery of health care in Canada. This early information supports effective planning for the introduction of new technologies within the health care system.

Knowledge Mobilization and Implementation Support

CADTH has adopted an integrated knowledge mobilization and implementation support approach that is applied throughout the product development life cycle and facilitates two-way communication between staff, decision-makers, patients, and partners. A number of tailored products and tools are developed to support decision-makers, and move the evidence into action. These products and tools provide CADTH customers with the information they need, when they need it, and in a way that they can use it successfully to inform decisions about the management of health technologies.