THE ARTHRITIS SOCIETY

Strategic Direction for the National Research and Career Development Program (R & CD) (2005 – 2010)

"Building on the Past - Breaking down the barriers"

Preamble:

The Arthritis Society has been the leader in the development of arthritis related health care in Canada and has been instrumental in fostering leading edge research in arthritis.

Over the past five years arthritis research, in general, has lead to improvements in the quality of life for people with arthritis; e.g. the discovery of biologics. Canadian researchers have put Canada in the forefront of arthritis research worldwide. The formation of the Canadian Arthritis Network (the first disease-specific Centre of Excellence) has created the synergy for collaborative arthritis research endeavors and, specifically, the Alliance for a Canadian Arthritis Program (ACAP) and the Canadian Rheumatology Research Consortium (CRRC).

These are unprecedented times of opportunity for arthritis research in Canada. As the numbers of people with arthritis continue to rise, and the realization of the impact in both human and economic terms increases, the case for additional arthritis support for the public research agenda grows daily. (It has been noted by several Canadian opinion leaders that this is nothing less than a public health emergency). At the same time, the demand for accountability to donors is also a prominent issue in the expectations of our donors, large and small.

However, the research landscape has been changing rapidly over the past few years. The research world has evolved into a dramatically different paradigm. It is shifting to a model based more on collaboration between groups/teams of researchers and across disciplines to enhance productivity and excellence.

It is time for the Society to consider a major change in its position and to develop new focussed initiatives for participation in a national arthritis research strategy to optimize the utilization of its resources, both at the national peer-review and at the Divisional level. We need to find ways for all parts of Canada, in one way or another, to be involved in a coherent and integrated research effort. It is very important for our funders to see how the larger arthritis research agenda impacts their own communities.

Although the Society still has a major role to play in the field of arthritis, we must create synergy with our other 'partners' in the field; e.g. Canadian Institutes of Health Research (CIHR), Institute of Musculoskeletal Health and Arthritis (IMHA), the Canadian Arthritis Network (CAN), the Canadian Rheumatology Association (CRA), the Canadian Paediatric Rheumatology Association (CPRA), the Arthritis Health Professional Association (AHPA), Industry and the Arthritis Centres. Collectively, we have common goals but each has a different emphasis. CIHR is known for its strong commitment to curiosity driven research. CAN/NCE, working in many similar areas of endeavor brings an important focus on innovation and the urgent need for the

economic competitiveness that Canada requires across a broad spectrum of research work, including arthritis. TAS has a long and very visible reputation for a decidedly patient focused emphasis on both research and career development. The Canadian arthritis community is exceptionally well positioned to respond to these combined challenges. Partnership and collaboration across the major arthritis research funders and practitioners alike augers well for our individual and collective ability to be both strategic and accountable and represents a remarkable opportunity to continue to break down the more traditional barriers that would otherwise sub-optimize our potential. Canada needs a national strategy and a directed, focused research effort. It is important for all of our supporters to see how the role of their work in their own communities plays in the larger arthritis research agenda.

The Past:

Research over the past several decades has provided valuable advances and insights into arthritis and arthritis related conditions and, very importantly, a base to take the research effort to the next level. This base, until now, has been primarily individual investigator, curiosity -driven research and, therefore, quite broad in scope. A new, more strategic approach should enhance accountability and our effectiveness at fund-raising.

The Present:

The Society is still funding individuals; both clinical and research training and independent investigator research.

The Arthritis Society has influenced change in the way arthritis research is performed. Arthritis 2000, the Osteoarthritis Consensus Conference and the Frontiers in Inflammatory Joint Diseases Consensus Conference have led to the initiation of a more community to bedside to bench and back again approach – a novel approach whereby research is being driven by relevant problem solving, and vice-versa. These innovative Conferences have impacted research at CIHR, IMHA and CAN; it is now proposed for them to impact The Arthritis Society research agenda in a significant manner in order to increase the potential for 'quantum' advances in both our understanding of the diseases, as well as to develop new interventions to treat and prevent arthritis and related diseases.

The Future:

The Society should build on its past accomplishments and should embrace the recent developments in the overall research landscape which we have helped initiate; moving from investigator-driven to the more collaborative trans-disciplinary approach. This should facilitate the application of new knowledge and develop new treatments and strategies for care to enable the transfer to health care providers and, ultimately, to improve the quality of life for people currently dealing with the disability of arthritis and to provide hope for our next generation.

It is also important that all Canadians feel part of this process. Moreover, this broader approach should enhance the Society's ability to raise funds and demonstrate the benefits of its research activities.

One of the advantages of the new strategy will be to harmonize the Society's research program with international trends in health research. This too involves the bringing together of basic and clinician scientists, clinicians and consumers; a strategic focus which has the potential for significant and timely results. Furthermore, such an interactive environment provides for an effective mentoring and training ground for both clinical and basic science training.

This coherent and integrated research strategy will also provide 'identity/branding' to the Society's research program and be highly visible in the community.

The Society's Scientific Advisory Committee (SAC) believes that this new program will greatly enhance the Society's ability to attract public attention to raise funds, to support research and patient care and to focus even greater emphasis on MSK health (arthritis prevention).

Therefore, the **new strategic vision** of the Society's National Research and Career Development is to:

- identify arthritis 'research, research training' and 'clinical rheumatology training and teaching' separately in order to clarify these two aspects of the Society's R & CD program. Thus, the Clinical Fellows, Clinician Teachers and Arthritis Centre block grants (the 16 medical schools) would be accounted for separately on the Society's financial statements, nationally and provincially
- 2) support *Arthritis Society National Research Initiatives (NRIs)* which foster trans-disciplinary collaboration where clinicians, researchers and consumers are juxtaposed so that more comprehensive research questions can be better generated and the results of that research better translated into clinical care which, ultimately, will translate into more evidence-based practice in an ongoing manner. (The Outline of the NRI applications and process is attached as Appendix A).
- 3) recognize that there is still a need to assist new investigators just starting their independent arthritis research careers. Such individuals may or may not be included in the *NRIs* but, to enhance their future success, it is proposed that the Society initiate a 'First Time Operating Grant' program to foster a commitment to Canadian arthritis research.
- 4) recognize the importance of supporting individuals in the 'mid-term' of their careers; i.e. those who are past eligibility for a New Investigator award and who still warrant funding. These will be people with both a commitment to research excellence, but who also have the leadership skills to develop and run the proposed *NRIs* and who will mentor the future generation of researchers.
- 5) recognize that implementation of this new strategic vision may require groups coming together to formulate plans for a *NRI*, particularly individuals that do not have a track record of working together. Therefore, to facilitate and enhance the potential for successful

Initiative applications, the Society will award a one year 'National Research Initative Development' grant for those working in priority areas.

6) recognize the importance of providing an opportunity for members of the research community, particularly those already involved in *National Research Initiatives* and those ready to become part of a *Initiative* to network, share their successes and learn the value of being part of an *NRI*. The venue for this to occur is through annual symposia/workshops.

Process:

The 'new strategic vision' will commence with the 2005/06 granting year with the funding of the first *Initiative*; the Plan calls for one new *NRI* to be funded each subsequent year.

- individual research grant applications will still be entertained in the 2005/06 granting cycle. In subsequent years, it is intended that these individual grants will gradually be folded into the *Iniatives* and, ultimately, be considered only as part of an *NRI* application
- a First Time Operating Grant program would commence with the 2006/07 granting year
- the current Research Fellowship and New Investigator programs will be folded into the new *NRI* program as feasible
- the current Investigator program will continue. Under exceptional circumstances these awards may be renewed for a second term with the designation 'Senior Investigator
- *National Research Initiative Development* grants will commence with the 2006/07 granting year. These *Development* grants would be awarded for one year only, up to \$50K each per year. The Society will support a maximum of 3 such applications per year
- annual scientific conferences will be held, in conjunction with other national conferences, such as CAN, CRA, Canadian Orthopaedic Association (COA), Canadian Paediatric Rheumatology Association (CPRA), AHPA, etc.
- research priorities will be announced each year, based on the changing research landscape. The first year (2005/06) will focus on the priorities identified from the Frontiers in Inflammatory Joint Diseases Consensus Conference. Research priorities will be identified regularly through discussions with the Society's various stakeholder groups
- TAS Divisions will have a much greater opportunity to be involved in communicating both research and career development awards, to continue to raise TAS' research profile with our donors.

The Scientific Advisory Committee (SAC) will strike a Review Panel to consider these applications. The Panel will report to SAC (and therefore, through SAC to the National Board of Directors). In addition, ad hoc teams will be specifically constituted to provide first hand information regarding the participation and the environment of *Initiatives*. They would also review mid-term assessments of the *NRIs* and evaluate progress.

The Society, and its partners, will develop the Regulations governing the above-mentioned programs early in the new year (2005). Further work may be required as implementation proceeds.

Requests for Applications (RFAs) for the first *Arthritis Society National Research Iniative* will be announced in the spring. Review of this first *Initiative* will be a two-stage process; letter of intent and then invitation to submit a full proposal. It is expected funding of this first award will commence in the early fall of 2005.

SAC is firmly committed to this new research strategy and believes that these *Initiatives* will profoundly impact individuals with arthritis, the rate and scope of progress and the training and career development of the next generation. It will demonstrate that The Arthritis Society is continuing to provide leadership in arthritis research.

ARTHRITIS SOCIETY NATIONAL RESEARCH INIATIVES

Outline

Arthritis Society National Research Initiatives (NRIs) will provide:

- integration of health care professionals, researchers and consumers
- trans-disciplinary research with the potential to be national in scope (be that virtual or physical)
- the ability, through information technology, to encompass all areas of Canada
- excellent environments for the development and mentoring of the next generation of investigators
- the potential for a quantum leap from the individual research approach
- NRI applications will, in the first year, be invited in the areas of priority identified by the
 Frontiers in Inflammatory Joint Diseases Consensus Conference. Priorities will be reviewed
 each year through discussions with the Society's medical and scientific committees and
 through its partners in the national research strategy. These priorities will be based on
 previous successes and the changing arthritis research landscape.

To be considered, *NRI* applications would include integration of health care professionals, researchers (ideally both clinical and basic science) and include consumer involvement. The *NRIs* must have excellent training and career development environments, including mentoring, commitment of the host institution, excellent trans-disciplinary environments (rheumatology, orthopaedics, allied health, social sciences, population health, health services, etc.). They may be virtual or physical. A more geographically inclusive Canadian arthritis research scene is critical. Consequently, multi-institutional and trans-provincial applications are encouraged.