Canadian Agency for Drugs and Technologies In Health (CADTH)

Annual Business Plan 2008-09

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1.0   INTRODUCTION

OVERVIEW

Aligned and Poised to Meet the Needs of Health Care Decision Makers – Now and in the Future

Health care decision makers continue to operate in an increasingly complex environment. Staying abreast of rapid technological changes remains a challenge. Information is more abundant than ever, however finding reliable sources of data that address the decision maker's specific needs is crucial. The Canadian Agency for Drugs and Technologies in Health (CADTH) is a significant contributor in meeting the need for reliable information and for supporting decision makers as they contend with these demands. CADTH's products and services continue to respond to and align with jurisdictional needs for high quality, impartial, evidence-based information on drugs, vaccines, devices, medical and surgical procedures, equipment, materials and health care systems. CADTH's has continued to work with decision makers in aligning its deliverables to respond to and support their efforts in achieving the best outcomes - both for patient health and the health care system. Reflecting the rapid pace of change within Canada's health care system, CADTH has also continued to broaden its range of services and products to match those needs. CADTH's five year Strategic Plan (2006-2011), approved by the Conference of Deputy Ministers (CDM) in October 2005 contains the following seven strategic goals:

- Deliver the CDR, HTA and COMPUS programs.
- Ensure that CADTH's products and services are relevant and responsive to stakeholder needs.
- Facilitate increased uptake and utilization of the products, services and processes produced by CADTH and its partners.
- Invest in and collaborate with pan-Canadian research capacity in support of CADTH's programs.
- Support the implementation of the HTS 1.0.
- Transition CCOHTA to CADTH.
- Manage change and growth within CADTH.

In developing the 2008-09 Business Plan, CADTH set its focus on achieving three primary objectives:

- CADTH will continue to deliver to its customers the full range of high quality products and services in keeping with the CADTH mandate and strategic direction.

- On April 1, 2008 CADTH will be entering the first year of a new five year grant agreement with Health Canada. HC has indicated its desire to have Provincial/Territorial partners contribute more funds towards the operations of CADTH and a keen interest for CADTH to be positioned in the future to demonstrate value for money and provide evidence of uptake and utilization of CADTH products and services in a systematized way in the jurisdictions.

- CADTH has identified new initiatives and enhancements in support of its 2006-2011 Strategic Plan which are responsive to the feedback CADTH has received in the past 12

months through the EKOS evaluation, from stakeholders as gathered by the Liaison Program staff, the Board of Directors and CADTH's committees and ongoing dialogue with affiliated health related organizations. CADTH will need to continue to demonstrate the highest value it can to its Members in order to garner long term increased financial support to implement these new initiatives in the coming year.

1.1   2008- 2009 Business Plan Framework

In October 2005, the Conference of Deputy Ministers approved CADTH's 2006-2011 Strategic Plan. It is a medium-level business plan that provides the blueprint for CADTH to achieve its mandate. The scope of the plan includes key initiatives necessary to:

- Complete CADTH's transition to its new role as Canada's health technology agency
- Support the implementation of HTS 1.0 in order to support an integrated and efficient approach to the management of health technologies
- Deliver and enhance its three core programs, the Health Technology Assessment (HTA), Common Drug Review (CDR), and the Canadian Optimal Medication Prescribing and Utilization Service (COMPUS); and
- Increase the uptake and utilization of CADTH's products

Now at the mid point of the Strategic Plan timeframe, CADTH's 2008-09 Business Plan will preserve the work of the past several years, however the expanded initiatives initially envisioned in the 5 year plan will be challenging to address in year 3 with the resources available.

EKOS Research Associates Inc. completed its independent evaluation of CADTH in 2007. The evaluation concluded that CADTH had met its strategic objectives for the period under review. This is a strong endorsement of CADTH's progress towards achieving its strategic plan. The recommendations from the evaluation were focused primarily on continuous improvement with some new recommendations around future evaluation activities. These recommendations were considered in the preparation of the 2008-09 Business Plan.

CADTH has carefully assessed its capacity and has identified opportunities to further align its programs and services to respond to jurisdictional needs while maximizing the resources available. An analysis of the EKOS evaluation findings and ongoing stakeholders' feedback, as well as the overall objectives for the 2006-2011 Strategic Plan has also been performed. Based on these, the 2008-09 Business Plan development has focused on undertaking key initiatives that CADTH believes to be most highly valued by its stakeholders, correspond to jurisdictional feedback and are affordable.

Since the 5 year plan was approved, the CDM approved an expansion of the Common Drug Review. In 2007, CDR expanded its work beyond the original mandate of reviewing only new drugs to include old drugs with new indications as well as the introduction of enhanced transparency initiatives. Further options for expansion of CDR are dependent on the future of the National Pharmaceuticals Strategy.

As projected in the 5 year plan, CADTH is on target in terms of reaching its "steady state", with all of its programs having reached a greater degree of maturity. The HTA program, the most mature of CADTH's programs, will be the focus of the most significant change and enhancement efforts during 2008-09 as it revamps its operations to continue to respond to

demands for the delivery of a broader range of products and increased demands for rapid reviews and fewer long health technology assessments. COMPUS experience to date is limited and as such it is premature to make significant changes to that program. Early indications are that COMPUS tools are well received and predicted to influence prescribing practice.

With the implementation of the CKE directorate in 2006, the Knowledge Transfer function has matured and the Liaison Program has demonstrated its value as a key element of the knowledge exchange network utilized at CADTH. It is important to continue CADTH's efforts to promote its products and services and to support efforts that will garner uptake and use in the health care system.

CADTH is also working closely with the Policy Forum and Exchange to increase opportunities to move beyond sharing of information and to support the development of joint policy initiatives. Though progress has been slower than originally envisioned in the 2006-2011 Strategic Plan, due to the reduced funding available to implement HTS mechanisms, progress is being made for these two mechanisms.

1.2   CADTH Vision, Mission And Guiding Principles

The vision, mission and guiding principles for CADTH remain unchanged. They remain relevant in the context of CADTH's current strategic direction. CADTH remains committed to aligning its services to respond to the changing needs of the Canadian Health Care System and to supporting its stakeholders.

CADTH Vision

The Vision of CADTH is to facilitate the appropriate and effective utilization of health technologies[1] within the Health Care Systems across Canada.

CADTH Mission

To provide timely, relevant, and rigorously derived evidence-based information to decision-makers and support for the decision-making processes.

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[1] Health technologies is defined to include drugs (including vaccines), devices, medical and surgical procedures and health systems (such as Telehealth) used in the maintenance, restoration and promotion of health.

Guiding Principles
To fulfill its mission, CADTH operates under the following set of guiding principles:
- Support, and build upon existing programs and structures across Canada.
- Build on and coordinate with F/P/T investments in research, assessment and appraisal to ensure best value for money.
- Promote decision making based on coordinated, objective, and evidence-based assessment of health technologies.
- Continue CADTH's commitment to invest in external ("to CADTH's") capacity across Canada.
- Provide structures, and transparent and inclusive processes to all jurisdictions to share information.
- Build on and expand the existing networks of health technology producers and users, and coordinate work to better utilize existing capacity and resources, and eliminate or reduce duplication of effort.

Cornerstones
Key cornerstones crucial to CADTH's success include:
- *Impartiality*: CADTH is a non-government body, working at arms-length from decision-makers, providing an impartial operational framework.
- *Relevance*: CADTH works closely with the jurisdictions to identify, prioritize and refine topics that are most relevant to its stakeholders. This interaction will continue to be strengthened as CADTH moves into its mandate change of providing recommendations or policy options in its HTA reports as well as through its work on optimal utilization and prescribing practices. The processes and products for each of CADTH's programs are tailored to need; they are designed to be appropriate for the specific question or technology under study and include a range of products and timelines to deliver.
- *Facilitation and Collaboration*: CADTH collaborates and works with Canada's health ministries and health regions, provincial and international HTA agencies, the clinical community, and Canadian research organizations. The Liaison Officer Program complements these efforts through its interaction within the jurisdictions.
- *Quality*: The quality of CADTH's work is crucial to its success and expansion. Rigorous methodologies and peer review processes are central to its work. Clinical and methods experts are regularly consulted and internal and external methods expertise continues to be enhanced.
- *Stakeholder Support*: Providing ongoing support to our stakeholders is integral to CADTH's continued success. Awareness and educational sessions, workshops, tools and support for uptake and implementation better enable users to utilize CADTH's products. Knowledge exchange and communications efforts enhance accessibility to CADTH products.

2.0   CADTH PROGRAMS/SERVICES

2.1   The Programs
With its pan-Canadian perspective, CADTH creates awareness of common issues and priorities regarding health technologies. Through its three core programs, CADTH supports the uptake and utilization of health technology information across the technology diffusion cycle, from emergence (horizon scanning) to introduction, diffusion and obsolescence (HTA and CDR), to promotion of optimal practices (COMPUS).

The three CADTH programs are:

The Common Drug Review – CDR undertakes reviews of the clinical and economic evidence for new drugs and for old drugs with new indications and provides a formulary listing recommendation to its 18 participating federal, provincial and territorial drug plans. Recommendations are based on established criteria and are developed by the Canadian Expert Drug Advisory Committee (CEDAC). The criteria are:

- Safety, efficacy and effectiveness of the drug compared to alternatives
- Therapeutic advantages and disadvantages related to current accepted therapy
- Cost-effectiveness relative to current accepted therapy

The ongoing status of drug reviews by the CDR and the recommendations and reasons for recommendations are publicly available on the CADTH web site.

The process, which takes 19-25 weeks from submission to recommendation, reduces duplication, maximizes the use of limited resources and expertise, and provides equal access to the same high level of evidence and advice by all participating plans.

A submission to the CDR constitutes a submission for formulary listing to all participating plans. While submissions are typically made by the drug manufacturer, drug plans may also initiate a CDR submission. For a drug to be eligible for submission, it must have received approval for marketing from Health Canada.

Formulary decisions are made by each of the participating drug plans, based on the CDR recommendation, individual plan mandates and jurisdictional priorities and resources. In practice, drug plans adopt CDR recommendations approximately 95% of the time.

The Canadian Optimal Medication Prescribing and Utilization Service - COMPUS was launched in 2004 as the third core program at CADTH. In partnership with the Federal, Provincial, and Territorial Health Ministries, COMPUS identifies and promotes optimal drug therapy. Evidence-based recommendations, tools, and services are provided to encourage the use of evidence-based clinical and cost-effectiveness information in decision making among health care providers and consumers.

By providing strategies, tools, and services to encourage the adoption of optimal therapy, COMPUS supports improved health outcomes and helps ensure limited health care resources can be targeted more effectively.

COMPUS is the first pan-Canadian initiative to support optimal drug therapy and one of the only programs of its kind in the world.

Health Technology Assessment –The HTA program includes three core services:
- **Health Technology Assessment** produces comprehensive assessments addressing topics of broad and significant interest to CADTH jurisdictions. HTAs review the clinical effectiveness, cost-effectiveness and broader impact of health technologies such as budgetary, organizational, societal, ethical, and equity impacts.   These assessments examine four questions:
    - How will this health technology affect the health of Canadians?

- How does it compare with alternatives?
- Does it provide value for money?
- Are there other health service implications to consider?

- **Health Technology Inquiry Service (HTIS)** provides Canadian health care decision makers with rapid access to health technology assessment information to support policy or coverage decisions. Information based on the best available evidence is provided within 24 hours or up to 30 business days depending on the needs, the urgency of the request, and the level of response required to support the decision.

- **Horizon Scanning and Emerging Health Technologies** assesses technologies in the early stages of their life cycle in order to alert decision makers to technologies likely to have an impact on the delivery of health care in Canada. The service helps decision makers anticipate, plan and manage the introduction and diffusion of new technologies.

The HTA program tailors its reports and information products to support and inform those who make decisions about health policy and purchasing, service management, and clinical practice. Highly regarded in Canada and internationally for the quality of its work and its leadership in the development area of HTA methodologies and new products and services, the HTA Program works closely with other Canadian HTA producers. Through the Exchange, through the Partnerships in Health Technology Assessment and through contracts to Canadian educational and research organizations, the program continues to produce HTA reports, build capacity throughout the country, and to facilitate uptake of evidence-based information among decision-makers

Communications and Knowledge Exchange - The Communications and Knowledge Exchange (CKE) Directorate is a knowledge management resource that supports CADTH's overall objective of increasing jurisdictional understanding, uptake and use of CADTH's products and services. CKE brings together four areas of expertise: the Liaison Program, Knowledge Transfer, Communications and Production, and the Partnerships and Strategic Initiatives.

- **The Liaison Program** was established in 2004 to provide two-way communication between CADTH and decision-makers in participating jurisdictions, and to support decision makers in the uptake and use of CADTH information to decision making and practice. It comprises a Liaison Officer in each participating jurisdiction working closely with stakeholders and users.

- **Knowledge Transfer Program** develops products and initiatives to optimize the distribution, uptake and use of CADTH projects.

Corporate Services – the Corporate Services Directorate (CS) provides the professional and management services that are essential to CADTH's effective performance. These services include Human Resources, Finance and Administration, Information Management (IM) and Information Technology (IT).

2.2   Program Synergies

Housing these programs within CADTH brings broad ranging efficiencies and synergies including an awareness of issues and priorities, an integrated program model supported by centralized business functions, shared governance and management structures, and access to a broad range of professional, research, office and management staff. Planning and management within CADTH ensures that the three programs work in cooperation with each other; each benefits from the other and duplication of effort is avoided.

2.3   Internal and External Capacity

CADTH employs a collaborative and facilitative approach fostering, investing in and levering pan-Canadian research capacity to maximize efficiencies in meeting health technology information needs. Its external investments total approximately 20% of the total annual budget. In addition to the more than 250 experts contracted by CADTH to augment the work of its internal research teams, CADTH utilizes the services of two Partners in Health Technology Assessment (PIHTA) centres which produce a variety of reports as requested by CADTH. This type of contractual arrangement further confirms CADTH's ongoing commitment to building research capacity within Canada. A third PIHTA is being considered for implementation.

CADTH's ability to adapt and change has been a key element to its success to date. The organization is well positioned to continue to deliver on its mandate. With staffing levels approaching full capacity, a number of new and expanded products and services in place and an independent evaluation which concluded that CADTH has met its strategic objectives for the previous 4 years and that its programs are responsive to and meeting the needs of jurisdictions, CADTH is poised to address a number of continuous improvements and enhancements to its programs and services.

A knowledge organization, CADTH has invested considerable time and energy building a highly-skilled workforce to deliver on its mandate. With the knowledge gained through its work with external experts, national and international partners, as well as jurisdictional and expert advisory committees, CADTH employees constitute a highly-regarded pan-Canadian "centre of excellence" in the health technologies field.

2.4   Collaboration/Partnerships

Regarded as a leader in its field of expertise, CADTH is frequently engaged by other health technology organizations to discuss its approaches to service delivery and product development. In this regard, CADTH partners with more than 50 organizations across Canada and more than 15 organizations worldwide. This allows CADTH opportunities to undertake collaborative work in research methods and ensures knowledge management, and ongoing information sharing and networking.

3.0   PROGRAM PLANNING

3.1   Health Technology Assessment Program

The HTA Directorate is responding to changes in the demand for its products and services from its stakeholders. These changes require both an increase in the overall output from the program, and organization changes that will allow an effective response to changes in the mix of products and services that make up that demand. The need for these changes is supported by the output from the EKOS evaluation. The Directorate will eliminate the Capacity Building grant program, the grant to the Canadian Cochrane Centre, and the Genetics Grant to CIHR. The Directorate sees the opportunity to take advantage of its investments in capacity building by increasing both the number of Partners in Health Technology Assessment (PIHTA) and the volume of work undertaken by them.

The Policy Forum and the Policy Exchange are now underway; to make effective use of them, the Directorate will need to identify specific joint policy initiatives and then provide the tools required to support their implementation.

Key Initiatives / Deliverables - HTA	Impact
Provide a mix of health technology assessment products and services to support decision-making on health technology by federal, provincial and territorial governments The HTA product mix will be responsive to the changing needs and priorities of the communities HTA serves and will be entirely customer demand driven. The predicted baseline output from the HTA Program is: HTIS Level 1 250 HTIS Level 1.5 50 HTIS Level 2 25 HTIS Level 3 10 HTIS Level 4 15 HTA Reports 15 HTA Overviews 15 Total products: 380	No change to HTA program output volumes, but a shift in product demand from the health care community is anticipated. HTA is expecting to deliver 15 full HTAs in 2008/09 of which two thirds are underway. The HTIS will respond to both an increased demand for its products and expects a shift in demand for the range of products provided. As these changes take place, HTA will require increased funding to avoid a backlog of requests and longer delivery times. The Horizon Scanning Program as it exists today is eliminated; however, a modified approach will be used. An electronically distributed summary of emerging technology information generated using Euroscan information will be provided. Methods work will be postponed until 2009/10 with two fewer methods topic reports. CADTH's "Guidelines for the Economic Evaluation of Health Technologies" were updated in 2006.

Key Initiatives / Deliverables - HTA	Impact
Provide secretariat support to a number of jurisdictional and expert type committees as follows: • DSAC and ACP - establishing CADTH research priorities • Policy Forum - developing joint policy initiatives in health technology • Policy Exchange - sharing information and methodologies to improve coordination of work and resources.	Through reallocation of funds, two meetings for the Policy Forum and the Exchange were budgeted in 2007-08 to establish the committees and initiate work on the HTS. However to make progress toward joint initiatives, additional funding needs to be committed in future years in support of the committees, their secretariat and a wider table of experts. In the absence of additional funding, CADTH will be challenged to fulfill the recommendations in the Health Technology Strategy.
Oversee the CSA-HCT program on behalf of P/T Jurisdictions.	The oversight activity ensures that deliverables of the CSA-HCT program are aligned with provincial/territorial priorities.

3.2   Common Drug Review Program

The Common Drug Review (CDR) provides rigorous, timely and evidence based reviews of clinical and pharmacoeconomic information on drugs and formulary listing recommendations from the Canadian Expert Drug Advisory Committee (CEDAC). For the first three years, CDR dealt only with new drugs. The National Pharmaceuticals Strategy Progress Report of June 2006 recommended a further staged expansion of CDR to areas such as new indications for old drugs and drug class reviews. Additional funding was provided in 2007-08 to expand the mandate to new indications for old drugs and to increase the transparency of the CDR process.

Key Initiatives / Deliverables - CDR	Impact
Conduct drug reviews and provide formulary listing recommendations (35 drug reviews, 3 requests for advice)	Completion of drug reviews and evidence-based recommendations to drug plans in a timely manner.
Transparency initiatives: • Prepare plain language versions of CEDAC Recommendations and Summaries of CEDAC discussions and • Develop CDR Overviews	Improved transparency in the CDR Process. Increased public understanding of CEDAC recommendations. Responds to recommendations from CDR Evaluation.
Health Canada Collaboration Initiative: • Undertake 1-2 reviews prior to Notice of Compliance (NOC) from Health Canada	Facilitates early reviews and recommendations on priority drugs; exchange/sharing of information with HC to facilitate and improve efficiencies of CDR Reviews.
International Collaboration Initiative – Work on information sharing and improved transparency	Enhanced opportunities for sharing and exchange of information and ideas related to the challenges associated with the drug review process and outcomes and achieve

Key Initiatives / Deliverables - CDR	Impact
	efficiencies/ improvements based on experiences of other countries.
Continuous quality improvement of CDR processes	Improved quality and efficiency of CDR reviews

3.3 Canadian Optimal Medication Prescribing and Utilization Service - COMPUS

The products and services offered by COMPUS are leading to the improved prescribing and use of drugs. In select topic areas COMPUS develops evidence based reports, recommendations and practical tools to support decision makers in ultimately improving health outcomes. The recommendations and tools associated with the topic of proton pump inhibitors (PPI's) are being taken up and will continue to be used in 2008-09. Additionally, recommendations and tools in the area of diabetes management, specifically, for long and short acting insulin analogues will be available to support decisions in this important area. The outputs of the COMPUS program are gaining momentum and visibility. Improvements in prescribing and use are founded in behavioral change. COMPUS will continue to engage and expand relationships with key stakeholders to build support and to work together towards optimal drug therapy whenever possible.

Key Initiatives / Deliverables - COMPUS	Impact
Develop and deliver a range of intervention tools for long acting and short acting insulin analogue projects. Tools are used by academic detailers (educational outreach), continuing medical educators, professional associations and patients to improve the prescribing and use of insulin analogues.	Jurisdictions and stakeholders will be provided with practical tools and strategies to improve the prescribing and use of insulin analogues. Uptake and implementation of the recommendations will lead to improved health outcomes.
Develop and deliver initial Optimal Therapy reports (Phase I) for blood glucose test strips	Jurisdictions will be provided with evidence and recommendations on optimal therapy and gaps in practice/policy related to blood glucose test strips. This will enhance the ability to make informed decisions regarding health care policy and will ultimately result in improved health outcomes and quality of life, and potential savings in drug expenditures.
Commence Phase II (intervention tools) of blood glucose test strips project Commence Phase I of the oral hypoglycemics (Metformin & Glitazones) project	Jurisdictions will be provided with: practical tools and strategies to improve the prescribing and use of blood glucose test strips, and the evidence and recommendations on optimal therapy and gaps related to oral hypoglycemics in early 09/10.
Provide support to education/outreach events to improve capacity to influence prescribing behaviour.	Jurisdictions will have improved access to advice and teachings related to optimal drug therapy. The community of best practices in drug prescribing and use will be expanded.
Provide implementation support to	Implementation support will facilitate the uptake of

Key Initiatives / Deliverables - COMPUS	Impact
jurisdictions for implementation of interventions tools (PPI and Insulin Analogue) by working directly with the F/P/T's, providing advice, assistance with linkages, etc.	COMPUS products and services thereby decreasing gaps in practice and/or policy.
Provide Optimal Therapy Resources, Rx for Change database and Medication Prescribing and Use Project database.	Databases are resources for decision makers, healthcare professionals and other stakeholders involved in improving drug prescribing and use. Use of the databases will provide meaningful evidence in making decisions about programs, strategies and policies designed to lead to optimal drug therapy.
Provide evaluation framework for measurement of usefulness of COMPUS tools and messages and for jurisdictions and others to use as a guide in measuring the impact of with any policies or program changes based on COMPUS tools.	This resource will be available for providers to qualitatively and quantitatively evaluate COMPUS tools and products and their own interventions.

3.4   Communications and Knowledge Exchange Directorate

The Communications and Knowledge Exchange Directorate (CKE) is a knowledge management resource that supports CADTH's overall objective of increasing jurisdictional understanding, uptake, and use of CADTH's products and services. CKE brings together four areas: the Liaison Program, Knowledge Transfer, Communications and Production and Partnerships and Strategic Initiatives. The Liaison Program provides two-way communications between CADTH and decision makers in participating jurisdictions and supports the uptake and use of CADTH information into decision making and practice. The Knowledge Transfer program develops products and initiatives to optimize the distribution, uptake and use of CADTH products.

Key Initiatives / Deliverables - CKE	Impact
Continue Communications, Production and Web initiatives including: ▪ Enhanced, interactive web-site ▪ HTA Reports, Overviews, Structural Editing, Promotional material, support to KT Activities ▪ Program support to all directorates (graphic design; translation; printing; mailing; media monitoring; media relations; ISP hosting)	Provide Communications, Production and Web services to support delivery of HTA, COMPUS, CDR and corporate communications and knowledge transfer products in a timely and consistent manner. Web site is CADTH's primary external communications delivery vehicle and supports access and dissemination of CADTH products.
Continue the Liaison Program Initiatives which are designed to raise awareness, uptake and application of CADTH products and services and include:	Continue to implement and further develop the LO program. Increased awareness, uptake and utilization of CADTH products and services.

Key Initiatives / Deliverables - CKE	Impact
- Promote & deliver outreach initiatives - Develop an active network of contacts - Deliver, co-host and/or support +/- 800 education workshops, presentations, conference exhibits and networking meetings. - Seek on-going stakeholder feedback on CADTH products and services	Strengthened linkages and collaborative relationships between CADTH and its stakeholders Support program and CADTH wide Business Plan objectives.
Continue Knowledge Transfer initiatives including: - Support to more recently prioritized HTA projects and those being guided by the Policy Forum. - Support to stakeholder uptake and application of HTA Products. Projected: 2 existing and 4 new joint policy initiatives; 3 medium and 1 low KT level projects; custom support to jurisdictions; early release requests (30); topic prioritization and refinement; HTA-KT process improvements - COMPUS KT project work plan; conceptualization, creation and roll-out of diabetes interventions; - CDR plain language recommendations/reasons for recommendations; CEDAC summaries	Continue the current level of KT support has been maintained as it is essential to meeting objectives for uptake and utilization of CADTH projects and services. KT support for jurisdictional support in messaging is on a time permitting basis. Demands on existing KT resources will increase. KT initiatives will need to be prioritized according to topics and level of effort required.
Undertake Partnership and Strategic Initiatives including - CADTH 4th Annual Symposium - Partnership Activities including conference exhibits/workshops, strategic collaborations - Corporate Memberships	Productive interaction between producers of evidence-based resources and decision makers. Increase awareness of CADTH and its products and services across Canada. Build and maintain relationships with international, national and jurisdictional organizations. Support program and CADTH wide Business Plan objectives.

3.5   Corporate Administration

The Executive Office and Corporate Services directorate provide oversight to the operations of CADTH; support governance efforts of the Board of Directors; provide strategic, financial and human resource guidance and support as well as the technological tools and expertise to ensure effective and efficient operation of CADTH; provide research information services and information management expertise to support the research scientific efforts of CADTH's HTA, CDR and COMPUS programs; and supports planning, implementation and accountability activities across the organization. CS annual plans are designed to respond specifically to the needs of CADTH's program areas and operates on a business model that combines internal staff to deliver core services and contracted services as needed.

Key Initiatives / Deliverables - CS	Impact
Provide corporate support to Programs including Finance and Administration and Human Resources,	Responds to organizational need for appropriate tools/information/services/ processes, etc. to support decision-making at CADTH. HR programs and services support CADTH in securing and retaining its highly skilled workforce.
Provide Research Information Services to HTA, CDR and COMPUS programs	Research information services staff retrieve and manage the scientific information required by the three CADTH programs to develop the products/services/deliverables for which they are responsible. Contribute to ~ 500 reports, products, or services annually.
Provide IM/IT services to support CADTH's information management and information technology needs.	Provides technology management, applications, tools, hardware and software platforms, and services which contribute to accessing information, document sharing, communications activities, etc. for the CADTH organization.
Provides Corporate governance support initiatives (support to Board of Directors, Executive and Audit Committees; orientation).	Assistance to the Board of Directors in carrying out its responsibilities to govern the organization.
Work with the CADTH Board to develop the next 5 year CADTH Strategic Plan	Development of an updated 5 year plan to accurately reflect CADTH's evolution since 2005 and to incorporate changes in products and services based on customer feedback and the independent evaluation completed in 2007.
Oversee CADTH Evaluation Framework / Performance Management activities	Demonstrate CADTH's effectiveness, identify opportunities for improvements/changes and to respond to reporting requirements of funding organizations. Consideration will be given to EKOS Evaluation recommendations with respect to Evaluation initiatives.