August 21, 2018

REQUEST FOR PROPOSALS - RFP No. RP801-2018-02

FOR Developing a Pan-Canadian Vision for Cancer Research in Canada

CLARIFICATION - QUESTIONS & ANSWERS

Please see the answers below regarding any questions raised in relation to this RFP.

1. Question:
   Are you able to share some more information about your engagement sessions for the refresh of the Cancer Control Strategy?
   a. What is being planned?
   b. Who/which groups are you engaging or speaking with?
   c. What types of questions are being asked?
   d. Can we add to these questions and coordinate efforts as part of this project?

Answer:
Recently, the federal government asked the Partnership to coordinate the modernization of the Canadian Strategy for Cancer Control. Engagement with patients and their families, the public and cancer control leaders are all essential to ensuring the Strategy charts a vision for the future, while addressing pressing concerns and ensuring Canada remains a leader in delivering high-quality cancer care.

a. Consultation and engagement efforts are taking place across the country to understand the diverse needs, values and priorities of Canadians when it comes to cancer prevention, screening, detection, treatment, survivorship and end-of-life care. A discussion paper is in development and will be used to support these activities and the dialogue with Canadians. Starting in September, meetings with the Partnership’s key networks, committees and partner groups, including Indigenous partners will be leveraged as an opportunity for discussion. Consultation with the public and members of vulnerable populations (adolescents and young adults with cancer, people who identify as lesbian, gay, bisexual, transgender, queer or two-spirited (LGBTQ2), new immigrant populations, rural, remote and northern populations, inner city communities, minorities and poorer Canadians) to gather input and feedback on priorities in cancer control will also start in the fall of 2018. This will take place through a series of in-person sessions with Canadians across the country. Digital tools or opportunities for providing input to the refresh of the Canadian Strategy for Cancer Control will also be available; this includes a Choicebook or deliberative
survey tool, and a channel for organizations to provide a written response or submission. This information will then be distilled and presented to the Minister of Health in May 2019.

b. The Partnership’s goal is to support as many Canadians participating as possible. This includes those living with cancer, caregivers, advocates, healthcare professionals, health system administrators, researchers and Indigenous communities. Special effort is being made to ensure the voices of vulnerable populations are heard.

c. Questions and discussion will focus on the future of cancer control for all Canadians including priorities and emerging opportunities for action.

d. The overall approach to engagement efforts for the research Vision would need to be coordinated with the refresh of the Canadian Strategy for Cancer Control, including exploring options on the approach to the questions and feedback.

2. **Question:**
   Do you have a preference on the groups to engage as part of this project?
   a. Any expectations on in-person engagements?

   **Answer:**
   Identifying relevant stakeholders to engage with will be part of the overall project. The CCRA Executive office working with CCRA members and Board will help to advise on stakeholder identification. Ensuring representation from the breadth of cancer research is a requirement. There are no preconceived expectation for the in-person engagements.

3. **Question:**
   Have you had a broad vision document in the past that we will be building from?

   **Answer:**
   There has been no previous document of this type. CCRA has developed two strategic documents in the past to lead the work of the Alliance, but the Vision is intended to go beyond just the work of CCRA. Some more focused visioning work happened at the 2017 CCRA annual members meeting. Meeting materials and report will be provided to the successful Proponent.

4. **Question:**
   Who or what groups will be approving the vision?

   **Answer:**
   The CCRA Board and members will be asked to review the vision. The CCRA Board will provide final approval. Drafts will also be shared with shared with the External
Advisory Committee for the refresh of the Canadian Strategy for Cancer Control.

5. **Question:**
   What is the scope of this vision document?
   a. Is it intended to be a vision framework or statement OR
   b. Is it broader to include strategic areas of focus for cancer research in Canada?

   **Answer:**
   It is intended to be a vision framework with priority areas that can be used by the CCRA and multiple other stakeholders to build strategies from. It will be the foundation on which CCRA develops the 3rd Pan-Canadian Strategy for Cancer Research, however the scope of the vision is not limited to the CCRA strategy.

6. **Question:**
   For Figure 1 [Dimensions of the Pan-Canadian Vision for Cancer Research]:
   a. Who created it?
   b. When was it created?
   c. Is it part of a broader document?

   **Answer:**
   a. Figure 1 was created by the CCRA Executive office in collaboration with a small working group;
   b. that was convened in July 2018 to identify a methodology and approach that resulted in this RFP.
   c. There are no additional supporting documents to go with the figure. The successful Proponent will be provided with meeting notes from that July 2018 meeting.

7. **Question:**
   Is the intent that the vision will serve the same timeframe as the cancer strategy; the next 10 years?

   **Answer:**
   The vision should be broad enough that it is “future proofed”, but at minimum correspond with the cancer strategy timeframe.

8. **Question:**
   The RFP, on page 8, asks for case studies and examples of projects in which multiple and different methodological models were applied. However, the RFP goes on to list a number of specific methodologies and it’s not clear how these particular analytical and planning frameworks directly relate to the deliverables for this project. Could you confirm if the referenced methodologies were provided for
illustrative purposes or if, in fact, that the examples provided need to employ at least one or more of these specific models?

Answer: Illustrative purposes.

9. Question:
Schedule A -- Services and Deliverables makes reference to an expectation that this project will “engage and dialogue…with the breadth of the cancer research community about future directions and priorities for cancer research in Canada” but, elsewhere, the RFP says that the Partnership is currently leading the process for the CSCC refresh which will involve the public, Indigenous communities and other stakeholders. Could you describe, in general terms, how the engagement activities and audiences will differ from the CSCC refresh-related engagement?

Answer:
The successful Proponent will leverage input gathered by the Partnership in engagements conducted to refresh the CSCC. The successful Proponent will be expected to gather information from the research community that will likely not be as heavily involved in engagements conducted by the Partnership.

10. Question:
The work related to the Pan-Canadian vision for cancer research will be informed by an Evaluation of Current State of Cancer Clinical Trials in Canada, which will be conducted an external consultancy as well. As these two related projects are out for competitive tender at the same time, does CPAC (and/or CCRA) have an opinion or view with respect to the prospect of both projects going to the same consultancy/team?

Answer:
We are open to receiving applications from the same consultancy/team for all both calls. Separate proposals are required for each, and each will be reviewed independently.

11. Question:
Is the expectation that this engagement will last one year ongoing (from October 2018 to October 2019) or that the work for this project must be delivered within that time frame?

Answer
The work for this project must be delivered within that time frame.
a. Is this timing a reflection of the Partnership’s interest in understanding emerging cancer research as it presented at conferences (Canadian and international) that will take place throughout the year?

Answer:
a. Although academic conferences might provide a source of inspiration for the Vision, focusing on conferences alone is too narrow in scope. The intention is that the Vision take into account emerging trends and innovations, not just work presented at academic conferences.

12. Question:
Can the physical copies of the proposal be hand-delivered by us or must it be mailed/couriered?

Answer:
Yes, Proponents can hand deliver the physical copies.

13. Question:
CPAC/CCRA Organization
How often do the CCRA and CPAC members (of the cancer research community) meet? Is there a formalized schedule that you can share with planned meetings? (Relevant if we intend to do a workshop with CPAC and CCRA stakeholders)?

Answer:
The CCRA Board meets three times a year (September, March and June), and the full membership comes together once a year in December. There are several Partnership partner meetings that happen throughout the year and these can be leveraged as necessary. The successful Proponent will work with the CCRA Executive Office to identify a schedule of relevant meetings.

14. Question:
What would be the project team structure on the CPAC side — would we be working with both CPAC and CCRA Executive Team members?

Answer:
The CCRA Executive office comprises the core project team. The successful Proponent will work most closely with the CCRA Executive Director and other team members if required. Working groups of CCRA members will be established as necessary. The CCRA Board will also be a source of information for the successful Proponent.

15. Question:
What degree of involvement will the CPAC team have with the Proponent over the course of this project?
a. How will core and extended team participation differ?
16. Question:
What metrics or measurements of success are currently in place against CPAC’s funding allocation?

Answer:
As this is the first time a document of this type is being developed there are no relevant metrics to share.

17. Question:
Research Approach
How does CPAC and other organizations currently engage in dialogue with the breadth of the cancer research community and other stakeholders (including the public and Indigenous communities)?

Answer:
The CCRA Executive office has strong connections to the Canadian Cancer Research community both through our CCRA membership and through the Canadian Cancer Research Conference and other large projects, including the Canadian Cancer Research Survey. The CCRA Executive Office can help to broker connections to the research community. The Partnership has also developed longstanding relationships with leaders in cancer control who can help to broker additional connections as necessary.

18. Question:
When referring to “the public, the Indigenous community, and other stakeholders”, can further elaboration be provided on which Indigenous communities, and in what regions, are being considered, as well as who is imagined as constituting the “other stakeholders”?

Answer:
See response to Question 1a above.

19. Question:
What kinds of existing research conducted by the Partnership and/or its members on the current state of cancer research in Canada can we expect to receive? Would this include research beyond the cancer research community, for example, with patients?
Answer:
The Partnership does not conduct research. CCRA is an alliance of majority of cancer research funders in Canada. The Vision should be broad and not just focus on currently funded cancer research. The successful Proponent will have access to information collection through the Canadian Cancer Research Survey.

20. Question:
CSCC
What partners does CPAC currently work with to develop (and refresh) the CSCC?

Answer:
See response to question 1 above.

21. Question:
How does this engagement fit in with The Canadian Strategy for Cancer Control: 2017-2022?

Answer:
We See Progress 2017-2022 is the Partnership’s current Strategic Plan for the Canadian Strategy for Cancer Control. We See Progress celebrates the real system-level change and innovation that is underway across Canada. It is one part of the commitments articulated in the CSCC and frames the next phase of work for the Partnership to further progress its work toward the 30-year goals shared with the broader cancer control community: reducing the incidence of cancer, lessening the likelihood of dying from cancer and improving the quality of life of those affected by cancer.

The work of creating a Vision for cancer research in Canada will help inform the refresh of the CSCC, which will in turn inform commitments of the Partnership and the broader cancer control community.