

Advancing HIV Policy and Practice Through a Network of Excellence

Ontario HIV Treatment Network
Strategic Plan to 2010

**The Ontario HIV Treatment Network Strategic Plan to 2010 was approved by
the Board of Directors, March 11, 2005**

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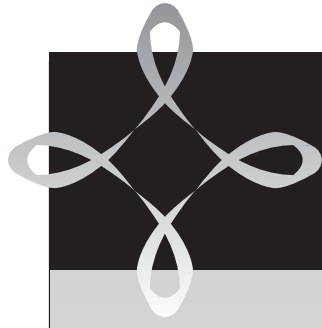
The Board of Directors of the OHTN gratefully acknowledges
the many people who contributed to the strategic plan,
including members of board committees, OHTN staff and
stakeholders. Special thanks to Jean Bacon, Health Policy
Consultant, who assisted in preparing the plan.

The OHTN is funded by the AIDS Bureau, Ontario Ministry of Health and Long-Term Care

Advancing HIV Policy and Practice Through a Network of Excellence

Ontario HIV Treatment Network
Strategic Plan to 2010

May, 2005



OHTN Mission and Values

Our mission is to optimize the quality of life of people with HIV in Ontario, and to promote excellence and innovation in treatment, research, education and prevention through a collaborative network of consumers, providers, researchers and government policy makers.



CARING, RESPECT, COMPASSION and
RESPONSIBILITY for and towards
people with HIV/AIDS.

SUPPORT and SUSTAIN EXCELLENCE
and INNOVATION in HIV care,
treatment and research.

Foster LEADERSHIP and build
INTEGRITY and ACCOUNTABILITY
as an organization.

Executive Summary

The Ontario HIV Treatment Network (OHTN), established in 1998 and funded by the AIDS Bureau of the Ontario Ministry of Health and Long-Term Care, is an independent, not-for-profit, multi-stakeholder organization committed to finding innovative ways to improve HIV care and treatment and enhance prevention strategies.

The OHTN is committed to engaging in activities that will have a direct and immediate impact on HIV policy and care in Ontario, and meet the needs of all its stakeholders groups: consumers, providers, researchers, and government policy makers. To achieve this, we must anticipate changing needs and set trends in research and technology. In the fall of 2004, the OHTN's multi-stakeholder Board of Directors began to develop a strategic plan to 2010. Over a period of six months, the Board held retreats and consultations with its programs and committees, and with over 60 people in the HIV community (i.e., people living with HIV, executive directors of AIDS service organizations, clinicians, researchers, and policy-makers). The purpose of this exercise was to assess where the organization is now and where it should be in the future. During the consultation, the Board considered several key questions: Are we providing the services and supports our stakeholders need? Is what we are doing effective? Is it a good use of our resources? Are there better ways to fulfill our mission and achieve our goals?

Our consultations revealed that, despite the progress that has been made in HIV care, prevention and research in Ontario, there are still serious gaps and unmet needs – such as the shortage of HIV care providers, the lack of research to support care and prevention, problems integrating new knowledge into practice, and the need for more integrated services that address the broad determinants of health. With our expertise in data management, health information technologies and knowledge transfer and exchange, and our capacity to fund and promote meaningful research, the OHTN is in a unique position to close many of these gaps.

This document describes the challenges facing the OHTN and sets out our strategic plan to 2010.

Our goals are:

1. To improve the health and well being of people with HIV in Ontario
2. To contribute to HIV prevention efforts in Ontario
3. To promote knowledge transfer and exchange among all HIV stakeholders
4. To ensure value for resources.

Over the next five years, the OHTN will collaborate with our stakeholders and focus on seven major objectives:

1. Support health care providers by developing HIV education, providing opportunities for networking and removing barriers to providers working in HIV care
2. Support community efforts to address the determinants of health by building partnerships between researchers and community, enhancing the capacity for community-based research, and supporting research on the determinants of health
3. Invest strategically in research and researchers that will have a significant impact on the HIV epidemic in Ontario, and promote both community-based and multi-disciplinary research
4. Support effective and innovative eHealth information technologies, such as telemedicine, clinical management systems and distance education that will help HIV physicians, other care providers and people living with HIV
5. Develop and support a clinical research database that will enhance care
6. Support knowledge transfer and exchange by holding research conferences and developing other collaborative strategies to share information with all key decision-makers and integrate new knowledge into practice
7. Monitor and evaluate OHTN activities, to ensure the organization promotes a culture of excellence, that it continually improves its programs, and make effective use of its skills and resources.

By working closely with our stakeholders to fulfill our role in the network of HIV programs and services in Ontario and Canada, we believe that we can have a measurable impact on HIV care, prevention and research. The knowledge we help develop and share will shape HIV policy and practice within the province and beyond.

We will meet the challenges, and strive to achieve our targets for 2010.

About the OHTN

The Ontario HIV Treatment Network (OHTN) is an independent, not-for-profit, multi-stakeholder organization committed to finding innovative ways to improve HIV care and treatment and enhance prevention strategies.

Our mission is to optimize the quality of life of people with HIV in Ontario, and to promote excellence and innovation in treatment, research, education and prevention through a collaborative network of consumers, providers, researchers and government policy makers.

Established in 1998, the OHTN is funded by the AIDS Bureau of the Ontario Ministry of Health and Long-Term Care. It is part of a provincial network of HIV services.

Our Strengths and Accomplishments

In our first six years of operation, the OHTN has successfully brought stakeholders together to make a difference in research, care and treatment for people with HIV in Ontario. Our work has had a direct and measurable impact on both the quantity and quality of HIV research in Ontario, and on the way that the community, clinicians and researchers develop, share and use knowledge.

As a result of our efforts:

- people with HIV in Ontario have better access to HIV drugs
- HIV physicians in Toronto and Ottawa are now using a clinical management system (CMS) to help improve HIV care
- OHTN funding for collaborative community-based research projects has made Ontario an international leader in HIV community-based research
- a total of \$4.5 million has been invested in 50 priority initiative projects that are shaping HIV care and policy
- Ontario-based researchers have received a total of \$21 million to support close to 100 investigator-driven research projects, and their findings are helping advance the field
- 92 researchers funded by the OHTN – scientists, scholars, fellows and students – have invested their time and expertise in answering key questions, and their work is creating new knowledge and improving care
- the career scientists and scholars funded by the OHTN have produced more than 150 publications, 300 presentations and attracted more than \$20 million in external (non-OHTN) research funding
- the annual OHTN Research Conference has become an important forum for knowledge transfer. In 2004, researchers presented a total of 130 papers and 350 people participated in sessions and discussions.
- data from the HIV Ontario Observational Database (HOOD), managed by the OHTN, has been used to develop 70 research presentations and four peer-reviewed published studies.

Over the past six years, the OHTN has developed expertise in supporting HIV health care providers and researchers, and responding to emerging issues. We have also made progress in developing academic and community alliances: the foundation for effective community-based research. Through our experience with the HIV Ontario Observational Database

(HOOD), the OHTN has developed the capacity to gather and manage clinical data, and to provide information to support HIV research, care and treatment. Through the process of developing the clinical management system for HIV physicians, we have also learned how providers want to use these systems.

Formal meetings that have informed this document:

- HIIP Advisory Committee (HAC) retreat, September 2004
- Board of Directors Retreat, September 2004
- Board of Directors Meetings October, December, January, February
- HIIP Advisory Committee Meetings, November, December, January, February
- Scientific Review Committee (SRC) Executive Meeting, January 11, 2005
- Priority Initiatives Program Advisory Committee Meeting, January 24, 2005
- Research Advisory Committee of HIIP, January 10 and February 28, 2005

Group consultations:

- Canadian Association of HIV Research (Ontario)

Individual consultations:

- As of March 11, 2005, over 60 individual consultations with members of the HIV community, researchers, health care providers and policy makers helped shape the development of this Strategic Plan.

Where to From Here?

The OHTN is committed to supporting activities that will continue to have an impact on HIV policy and care in Ontario, and meeting the needs of our stakeholder groups. To do this, we must recognize and anticipate changing needs and set new trends in research and technology.

In 2002, after more than a year of consultation across the province, the Ontario Advisory Committee on HIV and AIDS (OACHA) released the Ontario Provincial Strategy on HIV/AIDS. That document, which is now being used to guide all HIV activities in Ontario, challenges organizations to maintain effective HIV treatment and prevention programs and, at the same time, address the social determinants of health and inequities that threaten the health and well-being of people with HIV. Across Ontario, HIV organizations are now meeting together and with other services, such as housing providers and mental health services, to develop more integrated comprehensive services for people with HIV.

During 2003 and 2004, broad consultation on a pan-Canadian action plan for HIV called Leading Together reinforced that, for Canada to get ahead of

the epidemic, we need to take a more collaborative strategic approach. The action plan challenged governments and organizations to make strategic decisions about how to use their resources, identify where they can have the greatest impact, and develop plans to 2010 that set out how they will contribute to achieving our common goals.

In the fall of 2004, the OHTN's Board of Directors began to develop a strategic plan to 2010. Over a period of six months, the board held retreats and consultations with its programs and committees, and with people in the HIV community. The purpose of this exercise was to assess where the organization is now and where it should be in the future. During the consultation, the Board considered several key questions: Are we providing the services and supports our stakeholders need? Is what we are doing effective? Is it a good use of our resources? Are there better ways to fulfill our mission and achieve our goals? The Board prepared a draft Strategic Plan, which was reviewed by a broad range of stakeholders and then revised based on their feedback.

This document describes the challenges facing the OHTN and sets out our Strategic Plan to 2010.

Challenges Facing the OHTN

In our efforts to respond to the needs of our stakeholders – people with HIV, health care providers, researchers and policy makers – the OHTN is facing a number of challenges.

Trends in the HIV Epidemic

The HIV epidemic in Ontario remains unstable. As of December 2003, about 23,600 persons in Ontario were living with HIV infection, and prevalence (based on modeling) has increased 36% over the past five years. Men who have sex with men (MSM) still represent 61% of HIV infections in Ontario; the number of infections is rising fastest among persons from countries where HIV is endemic (increase of 86% from 1998 to 2003) and other persons infected heterosexually (increase of 64%). In 2003, women constituted 29% of new diagnoses – in part because of increasing infections in people from countries where HIV is endemic.

Report on HIV/AIDS in Ontario, 2003, RS Remis, Ontario HIV Epidemiologic Monitoring Unit.

Changing Needs of People with HIV and Populations at Risk: *Care and treatment issues.*

The OHTN was originally established to help meet the care and treatment needs of people with HIV. While OHTN's efforts have helped improve access to antiretroviral therapies, many people with HIV are now experiencing other serious clinical problems, such as: drug resistant strains of the virus, serious side effects of antiretroviral therapy, high rates of co-infection with hepatitis C (which complicates treatment), and problems adhering to complex drug regimens. A growing number of people with HIV are also coping with the effects of aging and the development of other chronic illnesses. These changing care and treatment needs create great hardship for many people with HIV and challenges for clinicians – particularly primary care physicians – trying to provide highly complex care in a client-centered care environment. They highlight the need for more research into treatments and for more support for health care providers and people living with HIV.

Social determinants driving the epidemic.

In addition to health issues, many people with HIV are struggling with social and economic stresses that have a negative effect on their health. According to a

survey conducted as part of the Ontario Provincial Strategy on HIV/AIDS, poverty, lack of appropriate affordable housing, stigma/discrimination, marginalization, addictions, mental health issues, and cultural issues are all contributing to HIV infection and to disease progression. Community-based AIDS organizations (CBAOs) are now involved in an HIV community planning initiative in Ontario, which focuses on meeting the broader health and social needs of people with HIV. They are working at the local level to develop relationships with other health and social services, such as mental health services, addiction services and housing programs, to address these social determinants of health issues. As part of a network of provincial HIV organizations, the OHTN should be supporting the community planning initiative and helping address the social determinants of health. For example, the OHTN has skills and resources that could be used to help CBAOs assess needs, conduct research and develop new service delivery models. We can also work with other organizations with a provincial mandate to facilitate more integration of health and social services.

The need for population-specific responses. According to both epidemiological data and the experience of people with HIV, the epidemic varies in different populations (i.e., MSM, Injection Drug Users (IDU), Aboriginal Peoples, people from countries where HIV is endemic,

youth, heterosexual men/women) and in different regions of the province. Needs are different, so care, treatment, support and prevention strategies must be different. Given the OHTN's capacity to fund research and promote knowledge transfer, we can and should play a role in helping CBAOs and clinicians develop more targeted programs and services.

Changing Needs of Health Care Providers

The need for more practitioners. Surveys of people with HIV, community based organizations and health care providers have all identified a critical shortage of health care providers caring for people with HIV. The situation is most acute in rural and remote parts of the province, and will be exacerbated by the number of HIV physicians and other providers who are expected to retire over the next five to 10 years. To improve care and treatment (and to have an impact on prevention strategies), it is vital to attract new providers to the field and to support the resolution of remuneration issues.

The need for more information and support. It is not enough just to attract providers, we have to retain them. According to HIV physicians, they will be more likely to continue to provide care for people with HIV if they have quick easy access to evidence-based information, specialist consultants, continuing education, mentors and peers – to help them keep up-to-date with new knowledge and research. The OHTN's expertise in knowledge transfer and exchange (KTE) and technology should be used to develop and provide supports for health care providers.

The evolution of eHealth and information technology infrastructure. Clinical management systems (CMS) have the potential to help physicians and other providers deliver the best possible care. Over the past six years, the OHTN's HIV Information Infrastructure Project (HIIP) has been a pioneer in supporting the enhancement and implementation of CMS for physicians. In the process, the OHTN has learned that physicians do not want to be restricted to a single system: they want to be able to choose the CMS that is right for their practice and be integrated with systems in their hospitals or clinics. With the evolution of eHealth initiatives in Ontario, physicians now have more choices, and there are now other well-resourced provincial players (in addition to the OHTN) who are actively supporting the development of office-based clinical management systems. This change in the eHealth environment provides the opportunity to leverage external funding for CMS activities and allows OHTN resources to be used more strategically. For example, the OHTN will be able to free up resources to invest in developing more innovative ways to extract and gather data from a variety of CMS and other sources, and enhancing capacity to manage and analyze the data – and still provide support for providers implementing CMSs.

Changing Trends in Research

A more strategic approach to research. Among HIV researchers and organizations that fund research, there is growing support for a Canadian HIV research investment strategy that will help ensure resources are used strategically and have the greatest possible impact. As part of this broad strategy, it is important to identify the OHTN's role and pursue research investment strategies that do not duplicate other well-resourced funding programs. We must develop research priorities that will capitalize on existing strengths, meet needs, and contribute to provincial, national and international research efforts.

More collaborative, community-based research (CBR). There is a growing trend towards more collaborative partnerships between researchers, academic units and the community. HIV is many years ahead of other health sectors in building community-academic alliances and supporting and conducting CBR. The OHTN has the potential to be a leader in this field.

Challenges Facing the OHTN

Changing Needs of Policy Makers

Focus on evidence-based policy. Policy makers are under increasing pressure to demonstrate that their policies, programs and services are evidence-based. They are looking to the organizations they fund to provide data and research that is relevant and will inform policy. For the OHTN to have an impact policy and practice, we must support research and other activities that target both the health priorities of people living with HIV and the related policy issues.

Increased accountability. All publicly funded organizations are under increasing pressure to demonstrate value for money spent. The OHTN will be expected to demonstrate that it is providing value for resources and achieving concrete targets. This will include assessing the impact and influence of both the research and other activities funded by the OHTN on HIV care, treatment, prevention, and social/health care policies.

Goals

1. To improve the health and well being of people with HIV in Ontario
2. To contribute to HIV prevention efforts in Ontario
3. To promote knowledge transfer and exchange among all HIV stakeholders
4. To ensure value for resources.

Objectives

1. To increase the number and capacity of health care providers caring for people with HIV
2. To support efforts to provide integrated care, treatment, support and prevention services that address all the determinants of health
3. To strategically invest in high quality research that has a direct impact on HIV care, treatment, support, policy, and prevention in Ontario
4. To support effective and innovative health information technologies
5. To support and collect data on a sufficiently large and clinically meaningful cohort of people with HIV in Ontario that will lead to research results that will improve HIV policies and care
6. To support knowledge transfer and exchange expertise to consolidate and synthesize HIV research findings that will lead to improved HIV care, treatment and prevention policies and practice
7. To monitor and evaluate the activities of the OHTN and to communicate these results to all our stakeholders.

Over the next five years, the OHTN will pursue a range of focused activities designed to build on our existing strengths, respond to the changing needs of our stakeholders, influence the broader determinants of health, and have a measurable impact on the quality of life of people with HIV in Ontario.

Strategic Activities to Support OHTN Objectives

Objective 1 – Support Health Care Providers

With its focus on both research and practice, the OHTN is in a unique position to support health care providers and provide the information they need to enhance HIV care.

The OHTN will:

1.1 Develop education strategies to attract providers to HIV care

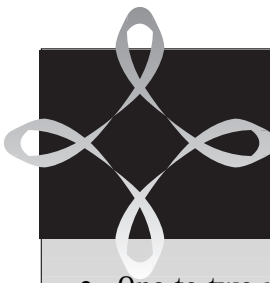
These strategies will include:

- Working with the Faculties of Health Sciences to facilitate dissemination of HIV continuing education programs that offer academic credits. Health care providers are more likely to pursue continuing education in HIV when programs offer academic credits. HIV education programs will include a strong focus on a multidisciplinary team approach to care, for example, using nurse/nurse practitioner skills to address psychosocial, addiction and mental health issues. It is expected that some of these learning activities will be available through secure portals that the OHTN will host through its own website or via TeleHealth Networking initiatives.
- Offering an HIV residency and mentorship program for physicians. The OHTN will fund one to two MDs each year in Ontario over a five-year period to attract up to 10 new HIV physicians. To ensure they understand the full range of challenges in HIV care, participants would work in a variety of clinical settings (e.g., hospital-based, primary care, community clinics).
- Offering a training/mentorship program for nurse practitioners, nurses, social workers and other health care providers. Like the physicians, other providers would also have opportunities to work in a variety of clinical settings and enhance their HIV knowledge.

1.2 Provide opportunities for providers to network and access information

These opportunities will include:

- Working with HIV physicians to establish an Ontario Society of Physicians in HIV Care. Similar groups already exist for nurses and pharmacists, and have been instrumental in attracting professionals to HIV and supporting them in their work. Physicians who become part of the Society will have easy access to



Targets and Indicators of Success

- One to two physicians participating in the residency and mentorship program per year
- Over 80% of HIV physicians in Ontario participating in the Society of Physicians in HIV Care in Ontario
- Over 90% of HIV health care providers have access to the expertise, technology and information they need to provide HIV care
- 30% increase in HIV providers attending OHTN annual conference.

evidence based information, specialist consultants, continuing education, mentors and peers. They will also have closer links with other health provider groups, and opportunities to be part of projects to assess different models of primary care for people with HIV. The Society will provide support and advice for family physicians in smaller communities who see small numbers of people with HIV, and give physicians a mechanism for influencing policy at the OMA, OACHA and the MOHLTC.

- Hosting an annual conference for HIV health care providers to promote networking. While many OHTN provider support initiatives will be delivered on-line, most providers prefer to receive information/education in face-to-face meetings, conferences and training sessions. To meet this need, the OHTN will host an annual one-day provider conference (in conjunction with the two-day annual OHTN Research Conference), which will give all providers the opportunity to come together, discuss HIV care and treatment, and develop links with researchers and the broader HIV community.

1.3 Work collaboratively with the AIDS Bureau, OACHA, and professional associations to address strategic health provider policy issues

Many barriers to HIV care are due to systemic issues that must be addressed through government policy or provider practices. For example, HIV is a highly complex disease, and the current funding mechanism does not compensate physicians for the time required to provide that care. The OHTN will support research on the impact of current and alternative funding mechanisms as well as other strategic provider issues, which can then be used to inform new models of HIV care and advocate for change. As part of this strategy, the OHTN will continue to support the work of its Ambassador Committee, which has played a pivotal role in ensuring that people with HIV have access to appropriate medications.

Strategic Activities to Support OHTN Objectives

Objective 2 – Support Community Efforts to Address the Determinants of Health

Since the OHTN's inception, we have been committed to addressing issues that are a priority to the HIV community. Both the Ontario and pan-Canadian strategies endorse a determinants of health approach that tries to address the underlying factors driving the epidemic.

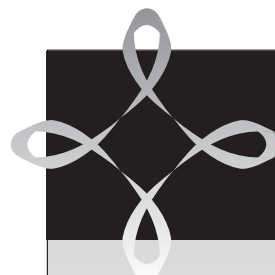
Through partnerships, research and strategic use of resources, the OHTN will support the community's efforts to provide integrated care, treatment, support and prevention services that address all the determinants of health.

The OHTN will:

2.1 Build partnerships with researchers and agencies whose work can have an impact on social justice issues and the social determinants of health

This will include:

- Building sustainable partnerships with HIV researchers and agencies, such as the Ontario AIDS Network (OAN), HIV/AIDS Legal Clinic Ontario (HALCO), the African and Caribbean Council on HIV/AIDS in Ontario (ACCHO), and the Wellesley Central Corporation.
- Building sustainable partnerships with researchers/organizations working in relevant fields, such as housing, mental health, and addictions, to influence the determinants of health, such as the Centre for Research on Inner City Health, the Health Systems Research Consultation Unit at the Centre for Addiction and Mental Health, and the CLEAR Unit at McMaster.
- Bringing together all those who work with people at risk to address common issues and improve health outcomes.
- Working with the community and other sectors to develop innovative approaches to increase public awareness of HIV issues, the determinants of health, and generate support for social changes to improve health.



Targets and Indicators of Success

- An increase in the number of projects funded that reflect community priorities related to the social determinants of health
- An increase in the number of initiatives that involve other sectors
- Evidence-based strategies to address the underlying factors driving the epidemic and enhance care and prevention programs.

2.2 Support community-based capacity building initiatives

The Ontario AIDS Network (OAN) plays a lead role with community-based AIDS organizations, providing skills training, acting as a knowledge broker and providing leadership in advocacy efforts. The OHTN will partner with the OAN and other emerging community based networks to create more networking and capacity building opportunities for communities, focusing particularly on the determinants of health.

2.3 Participate in the AIDS Bureau provincial community planning initiative

The OHTN will participate, with other provincial HIV organizations, in the community planning initiative, and identify ways to provide more integrated services, and to support local community planning initiatives that will help to improve the well being of people living with HIV in Ontario.

2.4 Fund projects related to the social determinants of health.

The OHTN has already identified health and housing as its first priority initiative. Other possible priorities include HIV and mental health, co-infection with hepatitis C, access to health services for those most vulnerable and affected by HIV, and the need for evidence-based, population specific prevention programs.

Strategic Activities to Support OHTN Objectives

Objective 3 – Invest Strategically in Research

The OHTN's investment in research over the past six years has had a significant impact on research capacity and productivity in Ontario, especially through its Investigator-Driven Research Program.

For the next five years, the OHTN will continue to support research that has the potential to improve life for people with HIV and will take a more strategic approach to its research investments. Our intent is to be a “strategic investor” and support research and researchers who will have significant influence on the HIV epidemic in Ontario.

The OHTN will:

3.1 Redefine our investment strategies

The OHTN is one of a number of organizations across Canada that fund HIV research. Through consultation with people with HIV/AIDS, community partners, researchers, research institutes, health care providers, policy makers across Ontario, and provincial and national research funding agencies, the OHTN will redefine its research investment strategy. This will include:

- Working with other national, provincial and regional organizations involved in research to determine the OHTN's role in a pan-Canadian research strategy.
- Identifying a number of investment strategies that will help define the OHTN's role in the broader research landscape, and increase its profile provincially, nationally and internationally. These strategies will take into account Ontario's research strengths, the epidemic, and national and global research activities and funding opportunities.
- Using the strategic priorities to direct and focus the use of research resources. While the OHTN will continue to allocate a significant proportion of its resources to the “open call” Investigator Driven Research Program, we will also make greater use of targeted calls and requests-for proposals (RFPs) to attract more investment in social and epidemiological areas and cross-cutting research projects that can meet specific HIV needs in Ontario.



Targets and Indicators of Success

- An increase in the number of community based research initiatives
- An increase in the number of community based researchers receiving salary support from the OHTN
- An increase in the number of multidisciplinary research projects funded
- An increase in research productivity measured in terms of publications and scientific presentations
- An increase in the number of OHTN-funded researchers who are successful in applying for grants from other research organizations (e.g., CIHR, NIH)
- Research findings that have implications for policy and practice.

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- Assessing the need to adjust research funding mechanisms to put more emphasis on salary and infrastructure support for researchers and on areas requiring capacity development.

3.2 Support community-based research

Community-based research, which is based on the alliance between researchers and the community, has the potential to ensure that research is focused on unmet needs and that research results will have a direct and immediate impact on practice. Community-based organizations are often limited in their ability to conduct or participate in research due to lack of skills (e.g., grant writing) or lack of links with research organizations and academic institutions.

The OHTN will actively support and encourage community-based research by:

- Allocating a significant proportion of its resources to building capacity in Community Based Research (CBR). These funds will be used to build strategic academic-community alliances and to develop competitive research proposals that address OHTN community priority issues.
- Enhancing the research capacity of community-based organizations by providing career support, assistance with grant writing and other research skills, and funding for protocol development for community based researchers.
- Providing strategic funding for request for proposals for CBR projects that would be subject to the rigorous peer review process of the Investigator-Driven Research Program (IDRP) funding mechanism.
- Linking communities to appropriate capacity building and research funding organizations.

3.3 Promote multidisciplinary research

Health care reform, provincially and nationally, is based on making more effective use of all health human resource skills to provide multidisciplinary care. Given the complexities of HIV care, a multidisciplinary approach has the potential to have a significant impact on health outcomes. Where appropriate, the OHTN will help promote multidisciplinary models of care by promoting, supporting and building capacity for multidisciplinary research that brings together a range of health providers and researchers to find innovative solutions to problems.

Strategic Activities to Support OHTN Objectives

3.4 Enhance the capacity of Ontario researchers

In addition to funding research and providing direct support for scientists, the OHTN will pursue other strategies designed to support Ontario researchers, and enhance their capacity to compete for other research funding and play an appropriate role in HIV research nationally and internationally, including:

- Supporting academic leaders in HIV research who will help train and mentor new researchers.
- Working with universities and research institutes to encourage them to foster young researchers interested in working in HIV.
- Helping established researchers apply for infrastructure grants (e.g., Innovation Funds, Infoway) that will support the buildings, equipment and machines required for research.
- Building strong linkages with CAHRO (Ontario Chapter of Canadian Association of HIV Research).
- Working with researchers to champion a Canadian strategy for HIV research that makes the best use of all skills and resources.

Objective 4 – Support Effective and Innovative eHealth Information Technologies

Technology will be a key tool in educating and supporting health care providers, and shaping HIV policy and practice. The OHTN will develop significant expertise in eHealth information and will continue to use that expertise to support providers and PHAs.

The OHTN will:

4.1 Support physicians using clinical management systems

A number of HIV physicians are now using Clinical Management Systems (CMS) provided by the OHTN and will continue to need support. Over the next five years, other physicians may need consultative and financial assistance in implementing CMSs. The OHTN will continue to support HIV physicians using the CMS and those interested in implementing a CMS who may not be eligible for access from other sources.

4.2 Develop eHealth expertise to support health care providers and people with HIV

The OHTN will continue to pursue a number of activities designed to ensure that HIV providers and people with HIV have access to the technology and support they need to improve care, including:

- Working with Smart Systems for Health Agency, and eHealth initiatives such as OntarioMD and Public Health, to link members of the proposed Society of Physicians in AIDS Care, and provide virtual forums where they can engage in confidential discussions.
- Hosting or supporting the OntarioMD portal to give HIV physicians easy access to information available through that system.
- Using telemedicine to link family physicians, pharmacists and social workers in remote areas with specialists and continuing education.
- Using internet technologies to distribute information to all HIV care providers.
- Providing on-line and distance opportunities for HIV education for all providers.
- Implementing technologies to support client-centered care, such as tools that help people living with HIV access their personal health information with the help and medical support of their health care provider.

Targets and Indicators of Success

- An increase in the number of HIV physicians using CMSs
- An increase in the number of providers using OHTN technologies, such as the web site, telemedicine, and distance education
- An increase in the number of people with HIV and health care providers using OHTN technologies to manage their care.

Strategic Activities to Support OHTN Objectives

Objective 5 – Develop and Support a Clinical-Research Database that will Enhance Care

One of the OHTN's original roles was to manage the HIV Ontario Observational Database, and to help researchers and clinicians use the data to improve care and inform health services planning. To support all its activities, the OHTN will continue to enhance, gather, manage and analyze data on the clinical care and treatment of people with HIV.

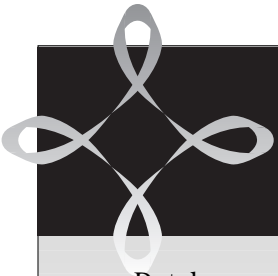
The OHTN will:

5.1 Identify the data required to support stakeholders

The OHTN will identify the data required to support providers, people with HIV, community, researchers and policy makers.

This will be done by:

- Determining which data can be collected through databases housed at the OHTN (building on the HOOD/CRD cohort databases).
- Identifying data that can be obtained by linking with other databases such the Canadian Institute for Health Information (CIHI), vital statistics data and social service data repositories.



Targets and Indicators of Success

- Databases are actively used to support care, treatment and research
- Stakeholders recognize the OHTN as a source of data and information
- Researchers use data for projects.

5.2 Enhance the capacity to gather and use data from different sources

The OHTN will enhance its capacity to gather and use data by:

- Developing greater expertise in extracting data from other HIV-related sources, such as electronic medical records that are part of clinical management systems (CMS), clinics, community-based AIDS organizations, and physicians' offices (eHOOD).
- Developing the protocols to link with other administrative, health and clinical databases.
- Using the clinical-research database as the basis for an active and productive collaborative Program of Research. In developing the Research Program, the OHTN will develop links to key academic and community research groups within and outside of Ontario, and use those relationships to build research collaborations, leverage research activity and funding, and make effective use of research skills and resources.
- Providing staff support for external researchers to use clinical-research data to explore well defined and integrated research questions that have the potential to make a difference in the lives of people living with and affected by HIV.

5.3 Continue to protect the data

As the data custodian, the OHTN will be responsible for securely storing anonymized health data.

We will ensure the data is protected and used appropriately by:

- Collecting essential health information that, when analyzed, can have an impact on care, treatment and policy.
- Using the principles and research policies developed by the OHTN to govern how data from people living with HIV is collected and used in research.
- Maintaining a data governance committee whose membership is 50% + 1 people with HIV.

Strategic Activities to Support OHTN Objectives

Objective 6 – Support Knowledge Transfer and Exchange Expertise

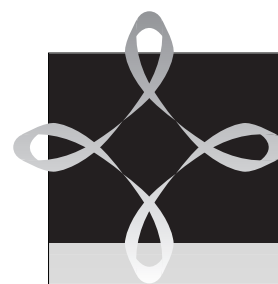
The OHTN's role goes beyond gathering and analyzing data, and supporting research. It includes ensuring that information developed through its activities is used to improve care and treatment for people with HIV. As part of its commitment to shape both practice and policy, the OHTN will actively support knowledge transfer and exchange (KTE) strategies designed to ensure that new knowledge is shared and used to improve care, treatment and prevention services, and to shape policy.

The OHTN will:

6.1 Enhance knowledge transfer capacity

The OHTN will enhance the capacity to share information with the right people, tailor information to diverse audiences, and shape knowledge that will lead to evidence-based HIV policies and programs in Ontario by:

- Continuing to host the annual Research Conference to highlight the results of current HIV research.
- Developing strategies to disseminate knowledge generated through its research investments.
- Developing partnerships with academic and policy Knowledge Transfer Programmes.
- Ensuring information is available in appropriate accessible forms, such as web summaries of current and completed research studies, annual reports on current trends in all OHTN priority areas, briefing notes or policy papers for health policy makers on specific areas of research, guidelines or educational programs for CBAOs, people with HIV or providers.



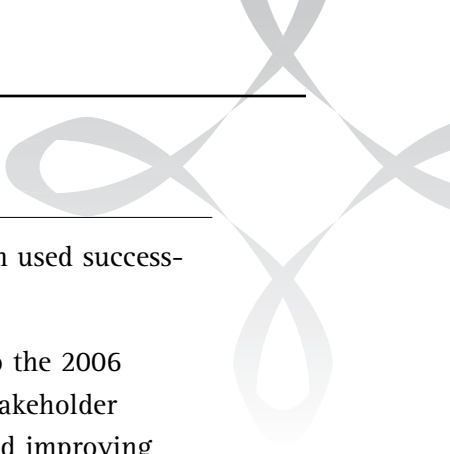
Targets and Indicators of Success

- Stakeholders recognize the OHTN as a source of information
- Knowledge developed through OHTN activities is disseminated in a timely manner and reflected in practice and policy (i.e., uptake)
- A project related to OHTN knowledge transfer activities is accepted for presentation at the 2006 International AIDS Conference.

6.2 Develop collaborative and interactive approaches to knowledge transfer and exchange

The OHTN will collaborate with the community to develop effective ways to share information and communicate/apply evidence by:

- Working closely with the OAN and its member agencies to understand their information needs.

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- Building on knowledge transfer and exchange strategies that have been used successfully in other sectors.
 - Working with stakeholders to identify an effective way to contribute to the 2006 International AIDS Conference and showcase Ontario's unique multi-stakeholder approach to developing knowledge, influencing policy and practice, and improving HIV programs and services.

Strategic Activities to Support OHTN Objectives

Objective 7 – Monitor and Evaluate OHTN Activities

The OHTN is committed to providing value for resources, continually improving our programs and exceeding expectations. We are accountable to our funder for our use of resources and to all our stakeholders for the effectiveness and relevance of our activities. Over the next five years, the OHTN will put in place an annual mechanism for the objective and systematic evaluation of all the activities of the OHTN to ensure that they meet and exceed expectations of the funder and our major stakeholder groups.

The OHTN will:

7.1 Establish monitoring/evaluation mechanisms

The OHTN will promote a culture of excellence by:

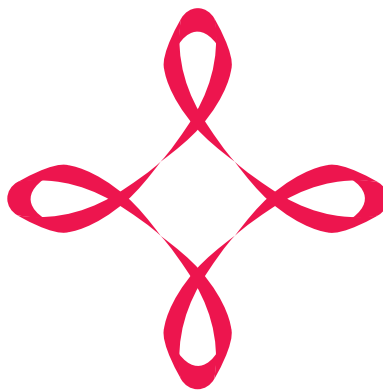
- Establishing clear objectives and measurable targets and outcomes for all our objectives.
- Developing mechanisms to continuously monitor our activities.
- Conducting an annual evaluation of all our activities.
- Using monitoring and evaluation results to continuously refine our objectives, activities and priorities.

7.2 Communicate our results to all stakeholders

Our stakeholders have the right to receive regular updates on our progress.

The OHTN will fulfill this obligation by:

- Developing quarterly reports and an annual report card that will be disseminated to all stakeholders.
- Being transparent and open about how and where resources are used, and reporting on their impact.



OHTN's four interconnected red ribbons symbolize our four key stakeholders – consumers, providers, researchers and government policy makers – working collaboratively to improve life for people with HIV. They represent our mission: excellence and innovation in treatment, research, education and prevention. They also capture our core values: caring, respect, compassion and responsibility for and towards people with HIV/AIDS, who are at the centre of our work.

The way the ribbons intertwine symbolizes our effort to bring together different people, different perspectives, and different skills to achieve common goals.

Together we are stronger, and we can make a difference.



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