

## International panel - Terms of Reference

### Short introduction – Copenhagen Health Science Partners (CHSP)

CHSP is a new strategic partnership between the University of Copenhagen and the Capital Region of Denmark for clinical and translational health research, education and innovation. CHSP grew out of the desire to further integrate research environments, clinical practice and education into the health and medical sciences for the benefit of patients and society. As a result it represents a shared strategic focus, which, in the long run, will bring the stakeholders' new and existing joint public health initiatives together in the new organisation.

CHSP's mandate is to promote synergies and collaboration between research, clinical practice and education and thus contribute to the transformation that is needed in the health sector. Common priorities and development will provide the partners with the momentum to further advance a number of chosen target areas to ensure the generation of new and greater value for society. CHSP was established based on the goal of rapidly putting excellent research into play in clinical practice and for patients with the help of translational collaboration, new education measures and greater agility among the partners.

The strategic management of CHSP will be overseen by a Board of Partners comprising the:

- Capital Region of Denmark: Regional Chief Executive, the Director of the Centre for Regional Development in the Capital Region of Denmark and the CEO of Rigshospitalet
- University of Copenhagen: Rector and the Dean of the Faculty of Health and Medical Sciences

In autumn 2016 the Board of Partners established an Executive Board with four members from each partner organisation who will jointly ensure strategic collaboration.

The position as director of CHSP is currently being conducted by Deputy Director of Rigshospitalet in a part-time function. The Director of CHSP has overall responsibility for the strategic and professional/academic development of collaboration between the partners.

The joint aims of the partners will be achieved through targeted initiatives and a clear strategic focus. An essential component of the collaboration is thus a number of Clinical Academic Groups (CAGs). The goal of the individual CAG is to strengthen the translational approach in order to achieve research-based breakthroughs in the treatment of patients, as well as support the general transformation of the healthcare system in the Capital Region of Denmark, along with international dissemination of results. This is to be achieved in a process where research, clinical practice and education/clinical training become equal and mutually beneficial elements.

In spring 2017, the first four CAGs in CHSP were established with help from an international assessment panel.

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December 2017 an open call for the next round of applications, with deadline on April 1st 2018 at 12.00 noon, is published to promote support for the establishment of CAGs. CHSP expects to establish further four CAGs after the round of applications, with an international panel assessing and prioritising the applications.

### Role and composition of the international assessment panel

#### Panel's role/task

The primary task of the international assessment panel is to execute the evaluation of the CAG applications in May 2018.

The panel's assessment will aid and ensure selection of the next four CAGs. It will take into account which projects are deemed best suited to contribute to the strategic aims of the collaboration. In other words, based on underlying academic quality, the panel will assess applications based on the forward-looking vision and strategic aims of the collaboration in terms of better integrating basic research, clinical research and clinical treatment, as well as (clinical) education and training with a strong and unique potential for clinical and societal impact.

The panel, in cooperation with the Executive Board, will select and invite 6 applicants for an interview with the panel in Copenhagen in May 2018. A prioritised assessment must then be prepared for the CHSP Executive Board, explaining the reasons for the recommendation.

In addition, a brief individual written response to each of all the applicants must be prepared based on the panel's assessment of the applicant's ability to contribute to the fulfilment of the strategic goals of CHSP. The following procedure will include consideration of the panel's recommendation in the Executive Board, then at the University and the region's top management, before the final nomination of the four new CAGs.

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## The panel's composition

The assessment panel must collectively possess a variety of skills that enable the evaluation of the applications in accordance with the aims of the call for applications and the basis of the CHSP collaboration.

The assessment panel must as a group, represent/possess the following qualifications and skills:

- Leading, internationally recognised researcher/clinician in the clinical and pre-clinical area
- Thorough knowledge of cross-organisational collaborations between hospitals and universities
- A strategic management perspective on the relationship and links between research, clinical practice and education, as well as on the opportunities for social value creation this type of collaboration represents
- A strategic understanding of
  - 1) international (including Scandinavian) health research, research policy and research funding
  - 2) development of the healthcare system and the future challenges and demands hospitals face in the treatment of patients
  - 3) the socio-economic impact of health research, innovation and development, including the potential for cooperating with industry and so on

Prior to assembling the panel, CHSP will appoint a chairman from among its members, who, at the meeting in Copenhagen, will be in charge of:

1. Initiating joint discussion of the applications
2. Writing and ensuring, with the aid of the CHSP secretariat, the panel's recommendations to the Executive Board
3. To prepare a short individual feedback for each applicant, which includes whether the application is CAG-suitable

Panel members are also expected to:

- Assess the applications and select 6 for oral presentation. It is suggested that the panel conduct a video meeting prior to the selection of the 6 applications
- Attending interviews from 22 to 23 of April in Copenhagen
- prepare a short feedback to every application

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## Secretariat support

Members of the panel will receive the applications electronically in one batch in PDF format on April 10, 2018.

CHSP and its secretariat will assist the panel throughout the period in case of questions or other ambiguities; just as the secretariat will be present during the entire meeting in Copenhagen to assist the panel with the ongoing compilation of the discussion and editing drafts of the panel's final assessment.

## Conflict of interest

To ensure that an assessment is not subject to bias, reviewers must not have a conflict of interest (such as close family relationships or friendships with any of the individuals involved in the proposed CAG, joint projects or co-authorships within the past five years).

## The panel's work plan (tentative)

March 2018	Video meeting with all members of the international assessment panel and chair and vice chair of the Executive Board on overall purpose of CHSP, vision, CAGs in Danish context, process etc.
April 2018	Panel members each receive the CAG applications by e-mail
May 2018	Video meeting with chair of the international panel and chair and vice-chair of the Executive Board to select applicants who will present their CAG proposal to the panel
May 2018	Panel meeting in Copenhagen and dinner
May 2018,	Panel meeting and interview, including presentation from applicants and panel evaluation
June 2018	Chair of the panel forwards the individual feedback to all applicants to the secretariat of CHSP

CHSP will bear the expenses, based on existing rules and tariffs, for travel, food and accommodation for panel members attending the meeting in Copenhagen and the launch of CHSP and the CAGs.

The panel will receive DKK 30,000 in remuneration, with an additional DKK 10,000 given to the panel chair, for participation.

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## The purpose of CAGs

### What is a CAG, and what should assessment of its purpose be based on?

As a strong, academic-based network acting within fields which offer particular potential, CAGs will bring collaboration between clinicians and hospital and university researchers to a new level, with the ultimate objective of producing concrete, groundbreaking results. Individual CAGs are expected to contribute *both* through pioneering research *and* by enhancing quality in clinical practice and education. The goal of the individual CAG is thus to strengthen the translational approach, so that research and innovation, clinical practice, education and training become equal and mutually beneficial elements of an overall focus on a particular field. The expected results should be achieved within the framework of research and the creation of value for society.

The individual CAG's professional ambitions must be persuasive regarding the mutual effort to achieve research and innovation, clinical practice, education and training of an excellent quality. Furthermore, it must be substantiated that the realisation of the full potential within a given field can only be achieved via the proposed CAG collaboration and its shared vision, ambition and priorities.

The individual CAG will enhance collaboration between clinicians and researchers from one, and preferably more, hospitals/departments, and researchers and instructors at one or more university departments. The aim of CAGs is to ensure the free flow of existing know-how, the collaborative development of new knowledge and the various participants' mutual influence on each others' academic and research agendas. In other words, clinicians will have an impact on the researchers' agendas and the researchers – at universities or hospitals – can influence academic activity in the clinical setting. Cooperation must be two-way.

The CAG structure should lead to a significant professional and organisational boost that will benefit research, clinical practice and, last but not least, patients/society. Collaborating in a CAG must add value creation to the participating environments, which must realise a special potential as a result of the CAG structure. A greater exchange must occur across existing structural/organisational barriers to help erode them.

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### Criteria for the panel's assessment of CAG applications

In assessing individual CAG applications, the panel must ensure and assess whether CAG's objectives and scope meet the overall strategic goals of CHSP cooperation, and if the area needs the organizational boost, a CAG will provide. The panel can follow the criteria below to evaluate the applications, cf. CAG call for applications and description.

#### Goal:

- Promoting education and excellent research within all disciplines of the health and medical sciences
- Clear clinical outcomes and potential socio-economic gains
- A strong, shared vision that can withstand international auditing

#### Team/organisation:

- Proven excellence or potential for excellence
- Strong and clear management with organisational skills and extensive knowledge of and experience with research management
- Potential for communication, education and skills development, outreach and innovation
- Strong international network and plans for developing such a network

#### Practicability:

- Clear and realistic description of the governance structure in relation to the CAG internally and in relation to both university and hospitals
- Clear, realistic and documentable implementation plan
- Concrete suggestions for innovative educational and learning measures within the area of the CAG
- Necessary funding potential