Cancer Research UK response to the Wellcome-Royal Society Future Partnership Project

Part 2

Cancer Research UK (CRUK) is the world’s largest independent cancer charity dedicated to saving lives through research. We support research into all aspects of cancer and this is achieved through the work of over 4,000 scientists, doctors and nurses. In 2016/17, we spent £432 million on research in institutes, hospitals and universities across the UK. We receive no funding from the Government for our research and are dependent on fundraising with the public. CRUK wants to accelerate progress so that three in four people survive their cancer for 10 years or more by 2034.

CRUK is involved in several multi-lateral and bilateral international research and innovation partnerships. We have drawn on our experience in these partnerships to understand what elements make them a success. However, the UK exiting the EU is an unprecedented event. Our response, therefore, represents considered thoughts as well as drawing on examples of initiatives CRUK is involved in. There may be several ways to achieve the same goal, but we have focused on key principles that would support CRUK’s work in the future.

We believe a two-part process is required to achieve the best outcome for research and patients:

1. Develop a **framework** for the new relationship between the UK and the EU. This should address the fundamental, underpinning aspects that support research collaboration such as an agreed legislative framework and principles for a mutually beneficial relationship in the long term. This would lay the foundation of a continued close collaboration for research and innovation, and for the development of individual partnerships. *We refer to this aspect as ‘framework’ throughout.*

2. The development of **individual partnerships** for specific initiatives. Partnerships are generally created for a specific purpose within a given timeframe, and would require bespoke arrangements to ensure success. An example of a specific partnership would be the UK’s interaction with Framework Programme 9. *We refer to this aspect as ‘partnership(s)’ throughout.*

**Elements that underpin successful partnerships**

Q1: Thinking of existing models, agreements, or international partnerships, what features have made them a success?

**A framework for the UK-EU relationship**

When identifying potential partners, consideration needs to be given to the feasibility of collaborating with another country (or countries). For example, whether similar regulatory or healthcare systems are needed. Consideration should therefore be given to:

- **Aligned regulation, standards, policies and processes:** aligned ethical and regulatory standards are necessary to ensure that research collaborations can take place. This includes clinical standards, regulation of clinical trials, ethical patient consent/participation, data...
protection, animal research, researcher integrity, diversity and inclusion, and policies regarding intellectual property. For example, aligned ethical standards for using animals in research is essential in funding projects as part of our Grand Challenge. The International Rare Cancers Initiative (IRCI) has found that fundamental differences in practice between the US and Europe have made collaboration in trials for rare diseases unfeasible in some instances.

- **Open access and knowledge/data sharing:** the ability to share knowledge and data between the different partner countries is necessary to the success of international research. This includes access to and storage of samples and data in places that are accessible to all involved parties. It is not only essential the right agreements enable this data to be shared and stored, but there should also be resource to provide guidance on how to access the data. In our experience in the International Cancer Benchmarking Programme (ICBP), researchers often need guidance to understand what data is available in different jurisdictions and assistance to understand the mechanisms needed to access that data. The ICBP facilitates data sharing between the researchers and the different countries and gives researchers six months to scope out projects properly so they can refine the project and understand what data is available.

- **People and building relationships:** scientific collaboration relies first and foremost on relationships between researchers. It is essential that researchers and other people involved can travel easily between partner countries as required to ensure collaboration runs smoothly and efficiently. With our Accelerator Award, the partner funder organisations have regularly visited each other and agreed to the principle of staff exchange between funder organisations. The Accelerator Award can also fund collaborative multi-institution training programmes for funded researchers (e.g. lab secondments for PhDs/clinicians in different countries). This should also include meaningful patient and public involvement where relevant to help set priorities.

**Partnership considerations**

We have drawn on our experience from several international partnerships CRUK is involved in. Further details of these partnerships can be found in Appendix A. There are many features and themes – prior to starting a partnership and once initiated - that are consistently mentioned as important in making international partnerships a success.

**Early shared priority setting:** this is fundamental to the success of any partnership. It is vital that partners agree on what the core global issues are and that this is clearly articulated in an agreement. This should be mutually beneficial to all partners. It is important to first establish “what” the partnership is attempting to achieve before determining “how” this will be achieved.

**Clear aims, strategy and governance:** once the priorities have been set, clear aims should be defined for the partnership and a coherent strategy developed, agreed and shared. The governance of the partnership also needs to be clear and transparent to ensure success. Any strategy should be monitored and evaluated regularly and there should be procedures in place should there be any disagreement between partners. If there is disagreement over an aspect of the partnership, there needs to be a procedure for resolving this and, if needed, a neutral arbitration procedure if escalated.
Clearly agreed funding model: for any partnership to be successful requires sufficient funding and aligned funding models or processes. In the ICBP, partners pay a contribution into a central funding pot based on the population size of their country to make it fair. The funding needs to be centrally held and flexible enough to support the highest quality research in a way that can genuinely lead to impact. In our experience, problems can arise if there is no central flexible funding model. For example, the IRCI found that multiple funding jeopardy can occur if partner countries agree on a research programme that relies on subsequent agreement from national funders 1. This means that time and resource can be wasted if a national funder decides not to proceed with a particular funding programme. This issue can be avoided if there is central funding that can be spent across all the countries, or if national funders are involved at an earlier stage. As part of the funding model, there also needs to be clear and transparent currency agreements (e.g. fixed exchange rates).

Time and processes to initiate and build relationships: Any funding model should allow time and expenditure for researchers to come together to build relationships and for good collaborative ideas to emerge that are worthy of funding. The Grand Challenge Expression of Interest phase is a good example of this.

Operational considerations in partnership working

Good organisation: to ensure excellence, there should be dedicated resource assigned to organisation and co-ordination. This may take the form of a secretariat or a team dedicated to running any programmes that are part of the partnership. There should be resource to provide any infrastructure necessary to organise and co-ordinate the partnership.

Regular, transparent and co-ordinated communication: successful partnerships have effective and co-ordinated communication. The type of communication that works well will depend on the nature of the partnership but generally communication should be regular and involve elements that are face-to-face, video/virtual/tele conferencing, email/electronic communication, and regular information sharing. The partnership also needs to present a unified front externally.

Appropriate capacity and equitable access to resource and materials: there needs to be sufficient capacity and resource in all partner locations to make the partnership a success. This might include ensuring sufficient overhead costs are covered, time for researchers to participate in programmes, access to patients, access to drugs/investigational medicinal products, access to biological/clinical samples and other materials required to carry out research. If the operating environments in partnership jurisdictions are too different, it will make it more challenging for a partnership to be successful. This will be important when making comparisons in clinical settings and it may make it more difficult to secure buy-in from the clinical community with divergent operating environments.

The shape of an ambitious new partnership

Q2: What elements must be included in a research and innovation partnership agreement between the UK and the EU to ensure it is close, valuable and effective? Please comment on how these would be prioritised.

It is vital that patients and research are prioritised in Brexit negotiations and that the best possible future research and innovation relationship is secured between the UK and the EU. The features

described in our response to Q1 are all important when considering what a future UK-EU research and innovation relationship would look like.

We believe a one-size-fits-all approach is unlikely given the complexity across the different types of research and innovation, in addition to the timescales involved. We therefore believe a two-part approach is required.

Part 1 – developing a framework for the UK and EU future relationship

The overarching priority must be to establish an agreement between the UK and EU on the fundamental, underpinning, aspects that support research collaboration. This should set the foundation for continued collaborative working across the UK and the EU, regardless of specific initiatives. This framework should include the following elements:

**An agreed legislative framework**

As mentioned in our answer to Q1, a key part of a collaborative framework is ensuring alignment and mutual recognition of regulations and policies. As the UK will no longer be a Member State, it will be crucial to quickly clarify what the UK, EU and Member States would need to reflect in legislation to allow collaboration to work in practice. Within this, we believe the following should be prioritised:

- **An aligned and optimal regulatory environment for clinical trials and approval of medicines:** The UK and the EU must come to an agreement to ensure the UK can adopt and align with the EU Clinical Trial Regulation, for the benefit of patients in the UK and the EU. This is particularly important for clinical trials where more than one country is needed to recruit the appropriate number of patients, such as those for rare or paediatric cancer. Our policy statement on alignment with the EU Clinical Trial Regulation can be found [here](http://www.cancerresearchuk.org/sites/default/files/dec2017_cruk_policy_statement_eu_clinical_trial_regulation.pdf). The UK and EU must also come to an agreement to ensure the future drug licensing system does not exacerbate delays in access to the most innovative treatments for patients, both in the UK and across the EU. Our policy statement on drug licensing following the UK’s exit from the EU can be found [here](http://www.cancerresearchuk.org/sites/default/files/cruk_policy_statement_on_brexit_and_drug_licensing_final.pdf).

- **Support for a vibrant and mobile research workforce:** It’s vital that the global research workforce can continue to work effectively together to make the best use of our combined talent and resources. While the UK will develop its own immigration system post-Brexit (the components of which we have set out in our policy statement found [here](http://www.cancerresearchuk.org/sites/default/files/sept17_cruk_policy_statement_researcher_mobility.pdf)), it is crucial that an agreement between the UK and the EU is sought that recognises the importance of researcher mobility to and from the UK and EU.

**Principles of a mutually beneficial working relationship**

As set out in Q1, the relationship must be mutually beneficial. The framework must therefore outline the overarching financial model and principles of continued engagement. Regarding the latter, it is important that all parties can contribute to ongoing developments in the environment in which it is working. The research landscape will undoubtedly change in the coming years and the UK has played a strong role in informing the direction of travel in the past. For example, the MHRA has been

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instrumental in designing and delivering a robust regulatory environment across the EU. It’s vital the agreement acknowledges that the UK can continue to help shape decisions about how to best support a thriving research environment across the EU. The UK would also continue to value expertise from the EU in informing decision making. This framework should also establish the parameters for a transitional arrangement.

Part 2 – developing individual partnerships on specific initiatives

Once the underpinning aspects of research collaboration have been agreed, bespoke partnership agreements can be negotiated for specific initiatives. The development of these partnerships should follow the principles set out in our answer to Q1, including early shared priority setting, governance agreements and funding models. The operational considerations should also be reflected. An example of an individual partnership that should be developed is the UK’s participation in the future EU framework programme (FP9).

Practical steps to achieve such a partnership

Q3a: What practical steps are needed to achieve the overall model you describe in Question 2?

We have set out the practical aspects that need to be considered in establishing a future UK-EU research and innovation relationship in our responses to Q1 and Q2.

Collaboration between the UK and the EU is feasible, given the existing arrangements. But these will change as the UK exits the EU and so it is fundamental that both parties agree that a framework for a new relationship is worth pursuing. As we have set out above, it is vital to agree on the fundamental aspects that would support a collaborative approach, including alignment or mutual recognition of legislation that underpins research. Following this, bespoke partnership agreements can be forged on specific initiatives.

Q3b: Thinking about the wider negotiating environment, what factors are likely to affect the ability to implement a shared vision on research and innovation?

There are several underpinning aspects of negotiations which will impact on the ability to implement a framework for a new relationship, and subsequent individual partnerships. These include:

- The UK’s relationship with the European Courts of Justice
- The UK having a separate, sovereign, immigration system
- The overarching financial settlement that the UK agrees with the EU in the long term.

Shared political will between all partner countries to work through these potential hurdles is required to negotiate a mutually beneficial research and innovation collaborative environment between the UK and the EU.
Appendix A – Some of CRUK’s international partnerships

We have drawn upon the following international partnerships that CRUK is involved in to develop this response.

**Grand Challenge**

Cancer Research UK’s Grand Challenge is the most ambitious cancer research grant in the world - a series of £20m awards seeking international, multi-disciplinary teams willing to take on the toughest challenges in cancer - providing the freedom to try novel approaches, at scale, in the pursuit of life changing discoveries. In the first round, 9 teams were shortlisted from 56 entries. The generous support of partners (including the Dutch Cancer Society) and donors enabled 4 of these remarkable Grand Challenge teams to be funded. We are currently in application stage of the second round of Grand Challenge funding, which received 134 expressions of interest from 1570 investigators in 513 institutes in 41 countries. Of the applications we have received, 72.4% are led by international (non-UK) researchers.

Further information: [www.cancerresearchuk.org/grandchallenge](http://www.cancerresearchuk.org/grandchallenge)

**International Rare Cancer Initiative (IRCI)**

The IRCI is a joint initiative between Cancer Research UK (CRUK), the National Institute of Health Research Clinical Research Network: Cancer (NIHR CRN:Cancer), the National Cancer Institute (NCI), the European Organisation for Research and Treatment of Cancer (EORTC), the Institut National Du Cancer (INCa), Clinical Oncology Society of Australia (COSA), Japan Clinical Oncology Group (JCOG) and Canadian Cancer Trials Group. The aim of this initiative is to facilitate the development of international clinical trials for patients with rare cancers to boost the progress of new treatments for these patients.

Further information: [http://www.irci.info/](http://www.irci.info/)

**International Cancer Benchmarking Partnership (ICBP)**

The International Cancer Benchmarking Partnership (ICBP) is a unique and innovative collaboration that brings together clinicians, policymakers, researchers and cancer data experts. It aims to measure international differences in cancer survival and, crucially, identify factors that might be driving these differences. The partnership includes 22 jurisdictions across 8 countries and 3 continents, including: Australia (New South Wales, Victoria and Western Australia), Canada (Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland, Nova Scotia, Ontario, Prince Edward Island, Quebec and Saskatchewan), Denmark, Ireland, New Zealand, Norway, Sweden and the United Kingdom (England, Northern Ireland, Scotland and Wales).

Further information: [www.cancerresearchuk.org/icbp](http://www.cancerresearchuk.org/icbp)

**International Tobacco Control Programme (ITCP)**

The aim of Cancer Research UK’s (CRUK) International Tobacco Control Programme (ITCP) is to reduce tobacco-related disease and deaths in low- and middle-income countries (LMIC) by reducing tobacco prevalence and preventing youth uptake. The programme will support LMIC governments implement the Framework Convention on Tobacco Control (FCTC) with a particular focus on increasing tobacco taxes and reducing its affordability. The ITCP is a partnership with the
International Development Research Centre (IDRC), Canada University of Cape Town (UCT), South Africa and the American Cancer Society (ACS).

Further information: http://www.cancerresearchuk.org/sites/default/files/international_tobacco_control_programme_external_v05_no_crop.pdf

**Accelerator Award**

The Accelerator Award is funded through a partnership between CRUK, AIRC (Associazione Italiana per la Ricerca sul Cancro) and FC AECC (la Asociación Española Contra el Cáncer). It encourages cross-institutional collaboration to accelerate translational research.

Further information: http://www.cancerresearchuk.org/funding-for-researchers/our-funding-schemes/accelerator-award