



Canadian Institutes of Health Research  
Instituts de recherche en santé du Canada

# Canadian Institutes of Health Research

2018–19

## Departmental Plan

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The Honourable Ginette Petitpas Taylor, P.C., M.P.  
MINISTER OF HEALTH

## **Canadian Institutes of Health Research (CIHR)**

At the Canadian Institutes of Health Research (CIHR), we know that research has the power to change lives. As Canada's health research investment agency, we collaborate with partners and researchers to support the discoveries and innovations that improve our health and strengthen our health care system.

### **Canadian Institutes of Health Research**

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## Minister's message

I am pleased to present the 2018–19 Departmental Plan of the Canadian Institutes of Health Research (CIHR).

In Budget 2018, the Government proposed a historic investment to support the work of Canada's three granting councils - the largest increase in new funding for fundamental research through the granting councils in Canadian history.



As Canadians, we strive to be among the healthiest people in the world, to find innovative solutions to pressing health challenges, and to build an efficient and sustainable health care system.

The research supported by CIHR helps us to achieve all of these goals. By supporting innovative, world-class research, CIHR provides us with the scientific evidence we need to develop the treatments, practices, and policies that are improving the health of Canadians.

In 2017, Canada's Fundamental Science Review made a number of recommendations that will shape the future direction of CIHR. Most notably, the report recommended the creation of the Canadian Research Coordinating Committee. This committee will seek to harmonize the work of all federal granting agencies, helping to ensure that research funding processes are coordinated and that investments are aligned with our most urgent health priorities.

Among the many health priorities we face as a nation, the opioids crisis remains one of the most pressing. The tragedies caused by opioid use and addiction are heartbreaking and urgent action is required to address this public health crisis. CIHR will continue to play a vital role in this effort by harnessing the expertise of researchers, health care practitioners, and other stakeholders.

Together, they will develop evidence-based solutions to help us end the systemic issues that are causing problematic use of opioids.

CIHR will also continue to focus on building capacity for Indigenous health research. An Institute Advisory Board on Indigenous Peoples' Health was created to guide this process, and members of this advisory body will further lend their expertise to strengthen Indigenous health research across all CIHR Institutes. CIHR has also committed to investing 4.6% of its budget (equivalent to the percentage of Indigenous peoples in Canada) on research aimed at improving the health of First Nations, Inuit, and Métis peoples, as well as building research capacity in this area. I applaud CIHR's efforts and commitment to this issue and look forward to following its progress on this front.

Gender equity will continue to be a point of emphasis as well. Through its Equity Strategy, CIHR is committed to ensuring that its programs, funding opportunities, and evaluation systems result in the fair treatment of all participants. Moving forward, CIHR will strive to identify and eliminate systemic biases against any individual or group that would hinder access to CIHR funds, and encourage the larger health research enterprise to adopt practices that are more equitable.

On behalf of CIHR, I invite you to read this 2018–19 Departmental Plan to learn more about how CIHR’s investments are helping to improve the health of Canadians and strengthen Canada’s health care system. The report highlights CIHR’s key anticipated outcomes and results, as well as human resources and budgetary plans for the upcoming fiscal year.<sup>1</sup>

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**Minister of Health**

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<sup>1</sup> Note that [Budget 2018](#) initiatives and funding will be reported in CIHR’s 2019-20 Departmental Plan.

## Plans at a glance

The Canadian Institutes of Health Research's (CIHR) mandate is to "excel, according to internationally accepted standards of scientific excellence, in the creation of new knowledge and its translation into improved health for Canadians, more effective health services and products and a strengthened Canadian health care system". CIHR's five year [Health Research Roadmap II](#)<sup>i</sup> identifies the strategic direction that will guide CIHR and its 13 Institutes to deliver on its mandate and vision. Through the guidance of its Roadmap and the CIHR Act, CIHR has a single Core Responsibility: Funding Health Research and Training. The achievement of this Core Responsibility is determined through three Departmental Results. In 2018–19, CIHR will place even greater attention on harmonization of its work with and contributions to Canada's research ecosystem through the newly announced Canada Research Coordinating Committee.

### Departmental Result 1: Canada's health research is internationally competitive

Science is an increasingly global endeavour. To address complex health and scientific challenges of a continuously changing landscape, national and international partner collaborations are critical in order to refresh priorities and integrate diverse perspectives to advance the boundaries of health knowledge. In 2018–19, CIHR will continue to redesign and refine the integration of its [Foundation Grant](#)<sup>ii</sup> and [Project Grant](#)<sup>iii</sup> programs under the Investigator-Initiated Research Program, to support Canada's most accomplished and innovative researchers and projects. Through its Research in Priority Areas, CIHR will also foster international collaborations by funding grants designed to enable researchers in Canada to collaborate with those in other countries, for example through the [Healthy Life Trajectories Initiative \(HeLTI\)](#).<sup>iv</sup>

### Departmental Result 2: Canada's health research capacity is strengthened

Canada has a strong track record in health research; however continual efforts are required to strengthen capacity in new areas of science and to invest in the next generation of highly qualified health research personnel. In 2018–19, CIHR will continue to collaborate with Tri-Agency partners to support the [Vanier](#)<sup>v</sup> and [Banting](#)<sup>vi</sup> programs to enhance Canada's health research capacity. Further, in alignment with the Government of Canada's broader Gender-based analysis plus (GBA+)<sup>2</sup>, CIHR is proactively integrating equity by ensuring that sex and gender are taken into account in the design, conduct, and reporting of all funded research projects; and also monitoring the equity of [CIHR's funding systems](#)<sup>vii</sup> to ensure equitable access to CIHR funds for all eligible individuals. CIHR also continues to advance its priorities in [Indigenous Health Research \(IIR\)](#)<sup>viii</sup> through capacity building efforts and impactful strategic initiatives aimed at improving the health of Indigenous peoples as outlined in its [ten-point action plan](#).<sup>ix</sup>

<sup>2</sup> Gender-based analysis plus (GBA+) - An analytical process used to help identify the potential impacts of policies, Programs and services on diverse groups of women, men and gender-diverse people. The "plus" acknowledges that GBA goes beyond sex and gender differences to consider multiple identity factors that intersect to make people who they are (such as race, ethnicity, religion, age, and mental or physical disability).

### Departmental Result 3: Canada’s health research is used

Through the [scientific leadership of its Institutes](#),<sup>x</sup> CIHR strives to actively mobilize and translate Canada’s research capacity to address critical and emerging health issues to address the evolving health needs and expectations of Canadians and the Government of Canada.

In 2018–19, CIHR will mobilize Canada’s best research and innovation talent to address societal challenges and our ability to transform these discoveries into products, services, and processes that improve the quality of life of Canadians. As a result, CIHR will remain responsive to targeted Government priorities and emerging threats through its partnerships and major initiatives such as the [Federal Initiative to Address HIV AIDS in Canada](#),<sup>xi</sup> [Antimicrobial Resistance \(AMR\)](#),<sup>xii</sup> [Drug Safety Effectiveness Network \(DSEN\)](#),<sup>xiii</sup> [Networks of Centres of Excellence \(NCE\)](#),<sup>xiv</sup> [Canadian Drugs and Substances Strategy \(CDSS\)](#)<sup>xv</sup> and Canada’s [Strategy for Patient Oriented Research \(SPOR\)](#).<sup>xvi</sup>

In 2018–19, CIHR will continue to promote the [Tri-Agency Open Access Policy on Publications](#)<sup>xvii</sup> to improve access to the results of research funded by the three agencies, and to increase the dissemination and exchange of research results, in alignment with the Government of Canada's broader policy on [Open Government](#).<sup>xviii</sup>

For more information on the Canadian Institutes of Health Research’s plans, priorities and planned results, see the “Planned results” section of this report.



## Planned results: what we want to achieve this year and beyond

### Core Responsibility

#### Funding Health Research and Training

##### Description

CIHR is Canada's health research investment agency. By funding research excellence, CIHR supports the creation of new knowledge and its translation into improved health for Canadians, more effective health services and products and a strengthened Canadian health care system. This is done by providing grants that fund health research and/or provide career and training support to the current and next generation of researchers.

##### Planning highlights

To achieve CIHR's Departmental Results, CIHR and its Institutes will continue to promote excellence, creativity and breadth in Health Research and Knowledge Translation by supporting leading researchers and important advances in health.

##### Departmental Result 1 of CIHR's Core responsibility: Canada's health research is internationally competitive

As part of its mission, CIHR seeks to lead, stimulate and facilitate effective national and international partner collaborations in health research that benefit Canadians and the global community. To address complex health and scientific challenges, CIHR contributes to research through grants and training awards. In 2018–19, CIHR will continue to contribute to domestic and international health research through the following actions and initiatives:

- i) Promoting a culture of collaboration in the international research environment

CIHR will support Canadian investigators in international research endeavours through: (1) the implementation of renewed agreements with Australia and New Zealand on indigenous health research; (2) a Canadian-European Union flagship initiative on human data storage; and, (3) health equity through existing and new initiatives of the [International and global health collaborations](#).<sup>xix</sup>

- ii) Supporting World-Class Researchers through its Investigator-Initiated Research

CIHR will continue to invest in Investigator-Initiated Research, namely through the Foundation Grant and Project Grant programs. These grants represent complementary approaches for promoting creativity, driving innovation and capturing groundbreaking health research in diverse and emerging fields by funding high-impact research programs and projects.

To achieve its Departmental Result 1 – Canada’s health research is internationally competitive, CIHR will:

- i) Invest in the Dementia Research Strategy through international partnerships and transnational projects such as the National Institutes of Health’s Alzheimer Disease Neuroimaging Initiative (ADNI) and five transnational projects involving Canadian investigators through the European Union Joint Programme – Neurodegenerative Disease Research (JPND);
- ii) Maintain international leadership in the development of a Virtual Research Institute for the [Antimicrobial Resistance Initiatives](#),<sup>xx</sup> a global platform for scientific interaction;
- iii) Support existing and new initiatives in [Global health research](#)<sup>xxi</sup> such as [Innovating for Maternal and Child Health in Africa](#),<sup>xxii</sup> and
- iv) Continue to support world-class investigator-initiated research through the engagement of over 1800 Canadian and international peer reviewers – the peer review process will result in funding scientific excellence and impactful research through a minimum of 600 Project Grants and 30 Foundation Grants.

Departmental Result 2 of CIHR’s Core responsibility: Canada’s health research capacity is strengthened

CIHR aims to build capacity and support health research landscape by providing research training and salaries to researchers and academic organizations. Canada has a strong track record in health research; however continual efforts are required to strengthen capacity in new areas of science and to invest in the next generation of highly qualified health research personnel. These investments are designed to demonstrate excellence and the potential impact the research will have on health systems and/or health outcomes by:

- i) Establishing strong foundations in Indigenous health

CIHR will continue to support [Indigenous health research \(IHR\)](#)<sup>xxiii</sup> through the [Pathways to Health Equity for Aboriginal Peoples Initiative](#)<sup>xxiv</sup> and [Indigenous Healthy Life Trajectories Initiative \(I-HeLTI\)](#).<sup>xxv</sup> These grants focus on scale-up of promising interventions across communities and include the launch of a large capacity building initiative focused on establishing a solid foundation for IHR driven by and grounded in Indigenous communities in Canada. CIHR is also planning to launch a request for applications for [Development Grants for Network Environments for Indigenous Health Research \(NEIHR\)](#).<sup>xxvi</sup>

- ii) Equity-based research and considerations

As part of the evidence-based approach guiding the CIHR Equity Strategy, CIHR has developed the [CIHR's Gender Equity Framework](#),<sup>xxvii</sup> and will continue to assess whether, where, and under what circumstances, there are barriers to equitable access to CIHR funding in order to promote fair treatment of all participants and best practices in its programs, funding opportunities, and evaluation systems. CIHR is also committed to the Government of Canada's

[Health Portfolio Sex and Gender-based analysis policy](#)<sup>xxviii</sup> and will foster the practice of [Gender-based analysis plus \(GBA+\)](#)<sup>xxix</sup> across the health research enterprise.

iii) Strengthening training and career support

By providing training and salary awards, CIHR will invest to support the next generation of researchers and trainees in Canada and abroad, from a variety of disciplines with its partners.

To achieve its Departmental Result 2 – Canada’s health research capacity is strengthened, CIHR will:

- i) Facilitate consultations with partners to inform the development of the second phase of Canada’s SPOR initiative and secure matched funding for every federal dollar invested;
- ii) Continue to develop innovative approaches to empower health research trainees through hands-on experience in diverse training environments and networking workshops;
- iii) Foster the practice of GBA+ through training for program applicants, peer reviewers and staff, and for CIHR program design and delivery;
- iv) Maintain its commitment to support Canada’s post-secondary institutions through the [Canada First Research Excellence Fund \(CFREF\)](#),<sup>xxx</sup>
- v) Support, together with its Tri-Agency partners, between 15 and 35 researchers through the [Canada 150 Research Chairs](#),<sup>xxxi</sup>
- vi) Support, together with its Tri-Agency partners, at least 550 new and established researchers through the [Canada Research Chairs](#)<sup>xxxii</sup> program; and
- vii) Support over 500 new Canada Graduate Scholarships (CGS) at the masters and doctoral levels, 55 new Vanier CGS and 23 new Banting postdoctoral fellowships.

### Departmental Result 3 of CIHR’s Core responsibility: Canada’s health research is used

CIHR will provide targeted funding for the advancement, application and translation of health research knowledge to address priority health challenges as identified by CIHR and the 13 Institutes. In collaboration with partners and other federal departments and agencies, CIHR will continue to advance its knowledge translation mandate by funding research and activities that support the use of research by policy makers, health practitioners, or patients, as well as by building capacity in these areas:

i) Bridging research and policy

Several programs and initiatives are undertaken to support interaction, exchange and mutual learning between researchers and decision makers in order to support and facilitate the sharing and use of information on high priority topics. For example, in 2018–19, CIHR will host at least 10 meetings to bring together senior policy makers and researchers to discuss health topics of shared interest and/or of high priority through the [Best Brains Exchanges](#).<sup>xxxiii</sup>

## ii) Responding to government priorities

CIHR supports several initiatives that respond to targeted Government of Canada priorities and emerging threats, as mentioned in the Plans at a glance section. In 2018–19, CIHR will continue to invest in health initiatives to address pressing health and societal challenges such as the opioid crisis. CIHR is investing through the [Canadian Research Initiative in Substance Misuse \(CRISM\)](#)<sup>xxxiv</sup> initiative, as part of the [Federal Action on Opioids](#)<sup>xxxv</sup> and the Government of Canada’s strategy: the [Canadian Drugs and Substances Strategy \(CDSS\)](#)<sup>xxxvi</sup> which has recently replaced the National Anti-Drug Strategy.

To achieve its Departmental Result 3 – Canada’s health research is used, CIHR will:

- i) Foster a collective research culture, develop skills, resources, and infrastructure, and harness the transformative potential of research data through its [Health Research and Health-Related Data Framework and Action Plan](#);<sup>xxxvii</sup>
- ii) Continue to respond to immediate and urgent research needs, such as those that relate to cannabis legalization, regulation and [research](#)<sup>xxxviii</sup> on ways to prevent opioid overdoses and treat opioid dependency;
- iii) Support the [HIV/AIDS Research Initiative](#)<sup>xxxix</sup> in the areas of Implementation Science and co-morbidities such as aging, neurological conditions and mental health; and
- iv) Secure matched funding for every federal dollar invested in Canada’s SPOR Strategy and invest in the [Rewarding Success Initiative](#)<sup>xl</sup> designed to support clinical research with patients and enhance health system sustainability.

To promote innovation in program and policy design, CIHR’s new Departmental Results Framework (DRF) and Performance Information Profiles (PIP) will provide a solid base of evidence against which to measure the Agency’s performance of its programs and initiatives. This integrated planning process will allow for program activity commitments and outcomes to be identified; risks and opportunities to be assessed; performance to be monitored and measured; lessons to be learned and shared; and results to be disseminated. The public reporting of this information is found in CIHR’s [Corporate plans and reports](#)<sup>xli</sup> website, which includes Evaluations, Management Response Action Plans and Departmental Results Reports.

### Experimentation

In alignment with the government’s commitment to innovation and leveraging the [Build in Canada Innovation Program](#),<sup>xlii</sup> CIHR along with the Office of the Auditor General have entered into an experimentation opportunity with MindBridge AI, a local high tech Canadian start-up. This technology will be implemented within the context of CIHR’s financial and internal audit functions and will be leveraged to improve the efficiency and effectiveness of the organization’s financial oversight activities. This includes improving CIHR’s ability to detect anomalies within the complete financial context of the organization. Additional long term benefits offer the

potential for a transferable innovation that can be used by Departments/Agencies within the Government of Canada for improving their operations. As a “testing department” CIHR is providing data, expertise and human resources to support this innovation over fiscal 2018–19.

### Planned results

Departmental Results	Departmental Result Indicators	Target	Date to achieve target	2014–15 Actual results	2015–16 Actual results	2016–17 Actual results
Canada's health research is internationally competitive	Canada's rank among G7 nations in share of health research publications	2nd in the G7	March 31 2019	2nd	2nd	2nd*
	% of research involving international collaborations	Greater than or equal to 11%**	March 31 2019	11%	11%	11%
	Citation score of health research publications compared to the world average	Greater than or equal to 1.5	March 31 2019	1.53	1.52	1.53
Canada's health research capacity is strengthened	\$ co-invested by partners in health research	Greater than or equal to \$0.80**	March 31 2019	\$0.76	\$0.80	\$0.79
	% of research that addresses sex or gender considerations	Greater than or equal to 56%	March 31 2019	35%	44%	50%
	% of research investments addressing Indigenous health	Greater than or equal to 4.6% of CIHR's annual base budget	March 31 2019	2.0%	1.9%	2.4%
	% of the next generation of researchers that go on to work in a research position	Greater than or equal to 87%	March 31 2019	Not available‡	Not available‡	86%
Canada's health research is used	% of federal health documents informed by research	Greater than or equal to 20%	March 31 2019	16%	24%	21%
	% of research that informs patents	Greater than or equal to 9%	March 31 2019	Not available‡	Not available‡	9%*
	% of health research publications accessible to Canadians	Greater than or equal to 70%	March 31 2019	Not available‡	Not available‡	66%
	% of research contributing to improving health for Canadians	Greater than or equal to 39%	March 31 2019	37%	37%	39%

\* Due to the nature of the data, the last information available is 2014.

\*\* Data are based on the rolling average of the previous three years of available data and the data trend across years (ex: data for 2016–17 Actual results are 2014–2015 to 2016–2017).

‡ This new performance indicator was added for fiscal year 2016–17 and prior year data are either not available or available for the years indicated in the Planned Results table.

## Budgetary financial resources (dollars)

2018–19 Main Estimates	2018–19 Planned spending	2019–20 Planned spending	2020–21 Planned spending
1,072,042,234	1,072,042,234	1,066,531,569	1,062,869,566

## Human resources (full-time equivalents)

2018–19 Planned full-time equivalents	2019–20 Planned full-time equivalents	2020–21 Planned full-time equivalents
235	234	237

Financial, human resources and performance information for the Canadian Institutes of Health Research's Program Inventory is available in the [GC InfoBase](#).<sup>xliii</sup>

## Internal Services

### Description

Internal Services are those groups of related activities and resources that the federal government considers to be services in support of Programs and/or required to meet corporate obligations of an organization. Internal Services refers to the activities and resources of the 10 distinct service categories that support Program delivery in the organization, regardless of the Internal Services delivery model in a department. The 10 service categories are: Management and Oversight Services; Communications Services; Legal Services; Human Resources Management Services; Financial Management Services; Information Management Services; Information Technology Services; Real Property Services; Materiel Services; and Acquisition Services.

Budgetary financial resources (dollars)

2018–19 Main Estimates	2018–19 Planned spending	2019–20 Planned spending	2020–21 Planned spending
30,391,028	30,391,028	30,118,813	29,357,011

Human resources (full-time equivalents)

2018–19 Planned full-time equivalents	2019–20 Planned full-time equivalents	2020–21 Planned full-time equivalents
242	237	230

### Planning highlights

The Government of Canada through CIHR is responsible for delivering on a national health research agenda. As a steward of public funds, CIHR will pursue innovation and continuous improvement in the design and delivery of its programs and internal services to reinforce an environment that cultivates effective management, enhances transparency and accountability, ensures responsible governance and stewardship and builds a modern world-class through the following activities:

- i) Adapting to a changing landscape

The government of Canada has announced a new committee, the [Canada Research Coordinating Committee \(CRCC\)](#),<sup>xliv</sup> which will address some recommendations of the [Canada’s Fundamental Science Review](#).<sup>xlv</sup> The CRCC will coordinate and support the efforts of research funding of the Tri-Agency and the [Canada Foundation for Innovation \(CFI\)](#)<sup>xlvi</sup> to improve and harmonize access to funds; strengthen equity, diversity and capacity of Indigenous communities to conduct research and work with the broader academic community; and, provide more flexibility to allow researchers to conduct research with minimal administrative costs.

In 2018–19, CIHR will be finalizing its implementation of the [Policy on Results](#)<sup>xlvii</sup> and specific requirements under this directive, which focuses on strengthened culture of measurement, evaluation and innovation in program and policy design to improve results for Canadians.

ii) Identifying risks and evaluation priorities

CIHR is currently at the end of its 2015–18 Risk Based Audit Plan and is undertaking the creation of the 2018–21 plan, which should be approved by its Governing Council in June of 2018. CIHR will also be refreshing its Evaluation Plan in parallel. For more detailed information on Evaluations and Audits of the Agency, see the “Supplementary Information” section.

iii) Systems and service innovation and harmonization

The Government of Canada’s Fundamental Science Review recommended the improved coordination, collaboration, and sharing of best practices amongst the Tri-Agency. As a result, CIHR will work to ensure harmonization and sharing of best practices in Information Management (IM) and Information Technology (IT) services.

CIHR will be monitoring compliance to its [Open Access policy](#),<sup>xlviii</sup> which promotes research use by improving access and is consistent with government of Canada commitment to openness and transparency. It is a Tri-Agency effort to promote the [Tri-Agency Open Access Policy on Publications](#)<sup>xlix</sup> to improve access to the results of research funded by the Tri-Agency, and to increase the dissemination and exchange of research results.

iv) Supporting a healthy work environment

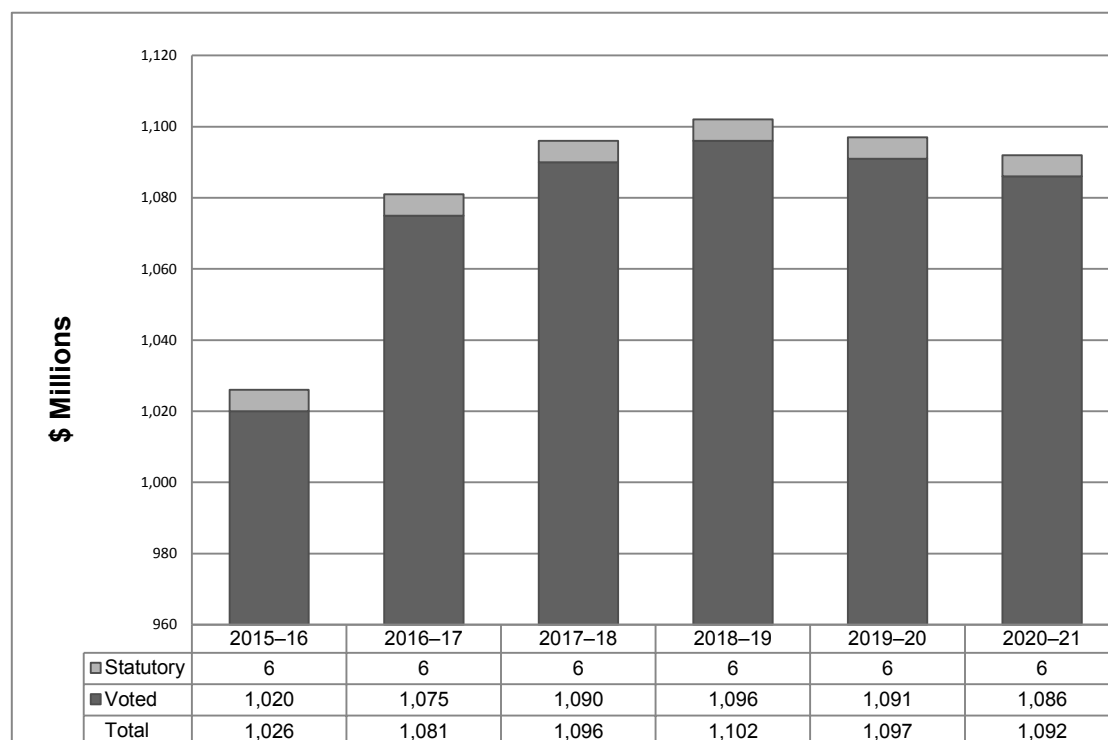
In 2018–19, CIHR will implement a new multiyear Human Resources Strategy to remain a highly performing organization and continue to deliver on its commitment to support and promote the health of its employees. This strategy will be developed in the context of a new Human Resources Framework and will leverage the existing [Talent Management and Mental Health Strategies](#)<sup>1</sup> as government-wide priorities. In particular, a focus will be put on innovative mechanisms to attract, recruit and develop employees in a healthy workplace free of discrimination and harassment, supported by a sound management framework.



## Spending and human resources

### Planned spending

#### Departmental spending trend graph



#### Budgetary planning summary for Core Responsibility and Internal Services (dollars)

Core Responsibility and Internal Services	2015–16 Expenditures	2016–17 Expenditures	2017–18 Forecast spending	2018–19 Main Estimates	2018–19 Planned spending	2019–20 Planned spending	2020–21 Planned spending
Funding Health Research and Training	998,331,528	1,049,492,127	1,068,085,927	1,072,042,234	1,072,042,234	1,066,531,569	1,062,869,566
<b>Subtotal</b>	<b>998,331,528</b>	<b>1,049,492,127</b>	<b>1,068,085,927</b>	<b>1,072,042,234</b>	<b>1,072,042,234</b>	<b>1,066,531,569</b>	<b>1,062,869,566</b>
Internal Services	28,046,625	31,838,217	28,282,166	30,391,028	30,391,028	30,118,813	29,357,011
<b>Total</b>	<b>1,026,378,153</b>	<b>1,081,330,344</b>	<b>1,096,368,093</b>	<b>1,102,433,262</b>	<b>1,102,433,262</b>	<b>1,096,650,382</b>	<b>1,092,226,577</b>

Over the next few years, CIHR's actual and planned spending is expected to remain stable at approximately \$1.1 billion.

The \$55.0M variance between 2015–16 and 2016–17 actual expenditures is mainly due to the allocation of new ongoing funding through Budget 2015 and Budget 2016, with both funding beginning in 2016–17. Budget 2015 allocated \$15.0M to CIHR to expand Canada’s SPOR (\$13.0M) as well as address antimicrobial resistance (\$2.0M). Budget 2016 allocated \$30.0M to maintain and reinforce Canada’s position as a leading-edge, global knowledge economy by increasing CIHR’s support for early career investigators.

The remaining variance between 2015–16 and 2016–17, and the variance between 2016–17 and 2017–18, is related to funding for Tri-Agency programs. Funding for these programs varies by fiscal year as CIHR is allocated funding following each distinct competition depending on the successful applications’ alignment with CIHR’s health-related mandate.

The variance between 2017–18 and future years is mainly due to the allocation of additional funding to CIHR as follows:

- \$34.6M from 2017–18 to 2022–23 from the 2018 Centres of Excellence for Commercialization and Research Tri-Agency program competition to support the operation of research and commercialization centres that bring together people, services, and research infrastructure to position Canada at the forefront of breakthrough innovations;
- \$32.9M from 2017–18 to 2024–25 to support the new Canada 150 Research Chairs Tri-Agency program announced in Budget 2017 to fund top-tier international scholars and researchers and enhance Canada’s reputation as a global centre for science, research and innovation excellence;
- \$12.0M from 2017–18 to 2021–22 to support the Climate Change initiative announced in Budget 2017 by developing and implementing a targeted research initiative on health and climate change specific to the underlying issues of food security and Lyme; and
- \$2.0M ongoing to support the Canadian Drugs and Substances Strategy announced in Budget 2017 by investing in new research on drugs and substances.

The remaining variance in future years is explained by the funding allocated to CIHR for the other currently funded Tri-Agency programs, such as the Canada First Research Excellence Fund (CFREF) program, the Canada Excellence Research Chair (CERC) program, and the Business-Led Networks of Centres of Excellence (BL-NCEs).

## Planned human resources

Human resources planning summary for Core Responsibility and Internal Services (full-time equivalents)

Core Responsibility and Internal Services	2015–16 Actual full-time equivalents	2016–17 Actual full-time equivalents	2017–18 Actual full-time equivalents	2018–19 Actual full-time equivalents	2019–20 Actual full-time equivalents	2020–21 Actual full-time equivalents
Funding Health Research and Training	209	227	254	235	234	237
<b>Subtotal</b>	<b>209</b>	<b>227</b>	<b>254</b>	<b>235</b>	<b>234</b>	<b>237</b>
Internal Services	194	198	223	242	237	230
<b>Total</b>	<b>403</b>	<b>425</b>	<b>477</b>	<b>477</b>	<b>471</b>	<b>467</b>

In 2015–16, CIHR completed an internal reorganization, which resulted in the realignment of resources and a number of positions remaining vacant until the reorganization was fully implemented. This reorganization also resulted in the temporary freezing of positions in 2015–16 and part of 2016–17.

In 2016–17, CIHR unfroze these positions to address operational requirements and created positions to deliver the programs and initiatives funded from Budget 2015 and Budget 2016.

While positions were unfrozen or created during the 2016–17 fiscal year, CIHR staffed most of these positions in 2017–18. Moreover, CIHR created positions to address both government-wide and organizational priorities.

### Estimates by vote

For information on the Canadian Institutes of Health Research's organizational appropriations, consult the [2018–19 Main Estimates](#).<sup>li</sup>

## Future-Oriented Condensed Statement of Operations

The Future-Oriented Condensed Statement of Operations provides a general overview of the Canadian Institutes of Health Research's operations. The forecast of financial information on expenses and revenues is prepared on an accrual accounting basis to strengthen accountability and to improve transparency and financial management.

Because the Future-Oriented Condensed Statement of Operations is prepared on an accrual accounting basis, and the forecast and planned spending amounts presented in other sections of the Departmental Plan are prepared on an expenditure basis, amounts may differ.

A more detailed Future-Oriented Statement of Operations and associated notes, including a reconciliation of the net cost of operations to the requested authorities, are available on the [Canadian Institutes of Health Research's website](#).<sup>iii</sup>

### Future-Oriented Condensed Statement of Operations for the year ended March 31, 2019 (dollars)

Financial information	2017–18 Forecast results	2018–19 Planned results	Difference (2018–19 Planned results minus 2017–18 Forecast results)
Total expenses	1,102,064,652	1,109,297,008	7,232,356
Total revenues	5,647,641	5,647,641	0
Net cost of operations before government funding and transfers	1,096,417,011	1,103,649,367	7,232,356

Total expenses are planned to increase by \$7.2M (0.7%) in 2018–19. The increase is mainly due to the allocation of additional funding to CIHR. Total revenues are planned to remain the same in 2018–19.

As a result, the net cost of operations is planned to increase similarly by \$7.2M (0.7%) from 2017–18 to 2018–19. Total expenses include grants and awards payments for health research and training of approximately \$1,036.7M in 2017–18 and \$1,046.0M in 2018–19. The balance relates to operating expenses including salaries, goods and services, and peer review expenses (non-public servant travel and hospitality).

Total revenues include funds received from external parties for health research and training.

## Supplementary information

### Corporate information

#### **Organizational profile**

**Appropriate minister:** The Honourable Ginette Petitpas Taylor, P.C., M.P.

**Institutional head:** Dr. Roderick McInnes, President (Acting President)

**Ministerial portfolio:** Health

**Enabling instrument:** [Canadian Institutes of Health Research Act](#)<sup>liii</sup> (S.C. 2000, c. 6)

**Year of incorporation / commencement:** 2000

#### **Raison d’être, mandate and role**

“Raison d’être, mandate and role: who we are and what we do” is available on the [Canadian Institutes of Health Research’s website](#).<sup>liv</sup>

#### **Operating context and key risks**

Information on operating context and key risks is available on the [Canadian Institutes of Health Research’s website](#).<sup>lv</sup>

## Reporting framework

The Canadian Institutes of Health Research Departmental Results Framework and Program Inventory of record for 2018–19 are shown below:

<b>Departmental Results Framework</b>	<b>Core Responsibility: Funding Health Research and Training</b>		<b>Internal Services</b>
	Departmental Result: Canada's health research is internationally competitive	Indicator: Canada's rank among G7 nations in share of health research publications	
		Indicator: % of research involving international collaborations	
		Indicator: Citation score of health research publications compared to the world average	
	Departmental Result: Canada's health research capacity is strengthened	Indicator: \$ co-invested by partners in health research	
		Indicator: % of research that addresses sex or gender considerations	
		Indicator: % of research investments addressing Indigenous health	
		Indicator: % of the next generation of researchers that go on to work in a research position	
	Departmental Result: Canada's health research is used	Indicator: % of federal health documents informed by research	
		Indicator: % of research that informs patents	
		Indicator: % of health research publications accessible to Canadians	
		Indicator: % of research contributing to improving health for Canadians	
	<b>Program Inventory</b>	Program: Investigator-Initiated Research	
Program: Training and Career Support			
Program: Research in Priority Areas			

Concordance between the Departmental Results Framework and the Program Inventory, 2018–19, and the Program Alignment Architecture, 2017–18

2018–19 Core Responsibility and Program Inventory	2017–18 Lowest-level program of the Program Alignment Architecture	Percentage of lowest-level Program Alignment Architecture program (dollars) corresponding to the Program in the Program Inventory
<b>Core Responsibility:</b> Funding Health Research and Training		
Investigator-Initiated Research	1.1.1: Operating Support	100%
	1.1.2: Training and Career Support	60%
	1.2.2 Horizontal Health Research Initiatives	40%
Training and Career Support	1.1.2: Training and Career Support	40%
Research in Priority Areas	1.2.1: Institute-Driven Initiatives	100%
	1.2.2 Horizontal Health Research Initiatives	60%
Internal Services	Internal Services	100%

## Supporting information on the Program Inventory

Supporting information on planned expenditures, human resources, and results related to the Canadian Institutes of Health Research's Program Inventory is available in the [GC InfoBase](#).<sup>lvi</sup>

## Supplementary information tables

The following supplementary information tables are available on the [Canadian Institutes of Health Research's website](#):<sup>lvii</sup>

- ▶ Departmental Sustainable Development Strategy
- ▶ Details on transfer payment programs of \$5 million or more
- ▶ Disclosure of transfer payment programs under \$5 million
- ▶ Gender-based analysis plus
- ▶ Planned evaluation coverage over the next five fiscal years
- ▶ Upcoming internal audits for the coming fiscal year

## Federal tax expenditures

The tax system can be used to achieve public policy objectives through the application of special measures such as low tax rates, exemptions, deductions, deferrals and credits. The Department of Finance Canada publishes cost estimates and projections for these measures each year in the [Report on Federal Tax Expenditures](#).<sup>lviii</sup> This report also provides detailed background information on tax expenditures, including descriptions, objectives, historical information and references to related federal spending programs. The tax measures presented in this report are the responsibility of the Minister of Finance.

## Organizational contact information

### **Canadian Institutes of Health Research**

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Ottawa, Ontario K1A 0W9

[www.cihr-irsc.gc.ca](http://www.cihr-irsc.gc.ca)



## Appendix: definitions

### **appropriation (crédit)**

Any authority of Parliament to pay money out of the Consolidated Revenue Fund.

### **budgetary expenditures (dépenses budgétaires)**

Operating and capital expenditures; transfer payments to other levels of government, organizations or individuals; and payments to Crown corporations.

### **Core Responsibility (responsabilité essentielle)**

An enduring function or role performed by a department. The intentions of the department with respect to a Core Responsibility are reflected in one or more related Departmental Results that the department seeks to contribute to or influence.

### **Departmental Plan (plan ministériel)**

A report on the plans and expected performance of appropriated departments over a three-year period. Departmental Plans are tabled in Parliament each spring.

### **Departmental Result (résultat ministériel)**

Any change or changes that the department seeks to influence. A Departmental Result is often outside departments' immediate control, but it should be influenced by Program-level outcomes.

### **Departmental Result Indicator (indicateur de résultat ministériel)**

A factor or variable that provides a valid and reliable means to measure or describe progress on a Departmental Result.

### **Departmental Results Framework (cadre ministériel des résultats)**

The department's Core Responsibilities, Departmental Results and Departmental Result Indicators.

### **Departmental Results Report (rapport sur les résultats ministériels)**

A report on the actual accomplishments against the plans, priorities and expected results set out in the corresponding Departmental Plan.

### **experimentation (expérimentation)**

Activities that seek to explore, test and compare the effects and impacts of policies, interventions and approaches, to inform evidence-based decision-making, by learning what works and what does not.

**full-time equivalent (équivalent temps plein)**

A measure of the extent to which an employee represents a full person-year charge against a departmental budget. Full-time equivalents are calculated as a ratio of assigned hours of work to scheduled hours of work. Scheduled hours of work are set out in collective agreements.

**gender-based analysis plus (GBA+) (analyse comparative entre les sexes plus [ACS+])**

An analytical process used to help identify the potential impacts of policies, Programs and services on diverse groups of women, men and gender-diverse people. The “plus” acknowledges that GBA goes beyond sex and gender differences to consider multiple identity factors that intersect to make people who they are (such as race, ethnicity, religion, age, and mental or physical disability).

**government-wide priorities (priorités pangouvernementales)**

For the purpose of the 2018–19 Departmental Plan, government-wide priorities refers to those high-level themes outlining the government’s agenda in the 2015 Speech from the Throne, namely: Growth for the Middle Class; Open and Transparent Government; A Clean Environment and a Strong Economy; Diversity is Canada's Strength; and Security and Opportunity.

**horizontal initiative (initiative horizontale)**

An initiative in which two or more federal organizations, through an approved funding agreement, work toward achieving clearly defined shared outcomes, and which has been designated (by Cabinet, a central agency, etc.) as a horizontal initiative for managing and reporting purposes.

**non-budgetary expenditures (dépenses non budgétaires)**

Net outlays and receipts related to loans, investments and advances, which change the composition of the financial assets of the Government of Canada.

**performance (rendement)**

What an organization did with its resources to achieve its results, how well those results compare to what the organization intended to achieve, and how well lessons learned have been identified.

**performance indicator (indicateur de rendement)**

A qualitative or quantitative means of measuring an output or outcome, with the intention of gauging the performance of an organization, program, policy or initiative respecting expected results.

**performance reporting (production de rapports sur le rendement)**

The process of communicating evidence-based performance information. Performance reporting supports decision making, accountability and transparency.

**planned spending (dépenses prévues)**

For Departmental Plans and Departmental Results Reports, planned spending refers to those amounts presented in the Main Estimates.

A department is expected to be aware of the authorities that it has sought and received. The determination of planned spending is a departmental responsibility, and departments must be able to defend the expenditure and accrual numbers presented in their Departmental Plans and Departmental Results Reports.

**plan (plan)**

The articulation of strategic choices, which provides information on how an organization intends to achieve its priorities and associated results. Generally a plan will explain the logic behind the strategies chosen and tend to focus on actions that lead up to the expected result.

**priority (priorité)**

A plan or project that an organization has chosen to focus and report on during the planning period. Priorities represent the things that are most important or what must be done first to support the achievement of the desired Departmental Results.

**Program (programme)**

Individual or groups of services, activities or combinations thereof that are managed together within the department and focus on a specific set of outputs, outcomes or service levels.

**Program Alignment Architecture (architecture d'alignement des programmes)<sup>3</sup>**

A structured inventory of an organization's programs depicting the hierarchical relationship between programs and the Strategic Outcome(s) to which they contribute.

**result (résultat)**

An external consequence attributed, in part, to an organization, policy, program or initiative. Results are not within the control of a single organization, policy, program or initiative; instead they are within the area of the organization's influence.

**statutory expenditures (dépenses législatives)**

Expenditures that Parliament has approved through legislation other than appropriation acts. The legislation sets out the purpose of the expenditures and the terms and conditions under which they may be made.

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3. Under the Policy on Results, the Program Alignment Architecture has been replaced by the Program Inventory.

**Strategic Outcome (résultat stratégique)**

A long-term and enduring benefit to Canadians that is linked to the organization’s mandate, vision and core functions.

**sunset program (programme temporisé)**

A time-limited program that does not have an ongoing funding and policy authority. When the program is set to expire, a decision must be made whether to continue the program. In the case of a renewal, the decision specifies the scope, funding level and duration.

**target (cible)**

A measurable performance or success level that an organization, Program or initiative plans to achieve within a specified time period. Targets can be either quantitative or qualitative.

**voted expenditures (dépenses votées)**

Expenditures that Parliament approves annually through an Appropriation Act. The Vote wording becomes the governing conditions under which these expenditures may be made.

## Endnotes

- i Health Research Roadmap II, <http://www.cihr-irsc.gc.ca/e/48964.html>
- ii Foundation Grant Program, <http://www.cihr-irsc.gc.ca/e/47618.html>
- iii Project Grant Program, <http://www.cihr-irsc.gc.ca/e/49051.html>
- iv Healthy Life Trajectories Initiative (HeLTI), <http://www.cihr-irsc.gc.ca/e/49510.html>
- v Vanier Canada Graduate Scholarship, <http://www.vanier.gc.ca/>
- vi Banting Postdoctoral Fellowships, <http://banting.fellowships-bourses.gc.ca/>
- vii Equitable access to health research funding, <http://www.cihr-irsc.gc.ca/e/50068.html>
- viii Indigenous health research, <http://www.cihr-irsc.gc.ca/e/50339.html>
- ix Action Plan: Building a healthier future for First Nations, Inuit, and Métis peoples, <http://www.cihr-irsc.gc.ca/e/50372.html>
- x Priority-Driven Research, <http://www.cihr-irsc.gc.ca/e/50077.html>
- xi Federal Initiative to Address HIV/AIDS in Canada, <https://www.canada.ca/en/public-health/services/hiv-aids/federal-initiative-address-hiv-aids-canada.html>
- xii Antimicrobial Resistance Initiatives, <http://www.cihr-irsc.gc.ca/e/40484.html>
- xiii Drug Safety and Effectiveness Network, <http://www.cihr-irsc.gc.ca/e/40269.html>
- xiv Networks of Centres of Excellence of Canada, <http://www.nce-rce.gc.ca>
- xv Canadian drugs and substances strategy, [https://www.canada.ca/en/health-canada/services/substance-abuse/canadian-drugs-substances-strategy.html?utm\\_source=vanity\\_url&utm\\_medium=url\\_en&utm\\_content=redirect\\_justice\\_nationalantidrugstrategy.gc.ca&utm\\_campaign=pidu\\_14](https://www.canada.ca/en/health-canada/services/substance-abuse/canadian-drugs-substances-strategy.html?utm_source=vanity_url&utm_medium=url_en&utm_content=redirect_justice_nationalantidrugstrategy.gc.ca&utm_campaign=pidu_14)
- xvi Strategy for Patient-Oriented Research, <http://www.cihr-irsc.gc.ca/e/41204.html>
- xvii Tri-Agency Open Access Policy on Publications, <http://www.cihr-irsc.gc.ca/e/32005.html>
- xviii Open Government, <http://open.canada.ca/en>
- xix International and global health collaborations, <http://www.cihr-irsc.gc.ca/e/27171.html>
- xx Antimicrobial Resistance Initiatives, <http://www.cihr-irsc.gc.ca/e/40484.html>
- xxi Global health research, <http://www.cihr-irsc.gc.ca/e/46355.html>
- xxii Innovating Maternal and Child Health in Africa (IMCHA), <https://www.idrc.ca/en/initiative/innovating-maternal-and-child-health-africa>
- xxiii Indigenous health research, <http://www.cihr-irsc.gc.ca/e/50339.html>
- xxiv Pathways to Health Equity for Aboriginal Peoples Initiative, <http://www.cihr-irsc.gc.ca/e/43630.html>
- xxv Indigenous Healthy Life Trajectories Initiative (I-HeLTI), <http://www.cihr-irsc.gc.ca/e/50635.html>
- xxvi Development Grants for Network Environments for Indigenous Health Research (NEIHR), <http://www.cihr-irsc.gc.ca/e/50745.html>
- xxvii CIHR's Gender Equity Framework, <http://www.cihr-irsc.gc.ca/e/50238.html>
- xxviii Health Portfolio Sex and Gender-Based Analysis Policy, <https://www.canada.ca/en/health-canada/corporate/transparency/corporate-management-reporting/health-portfolio-sex-gender-based-analysis-policy.html>
- xxix Gender-based analysis plus (GBA+), <http://www.swc-cfc.gc.ca/gba-acis/index-en.html>
- xxx Canada First Research Excellence Fund (CFREF), <http://www.cfref-apogee.gc.ca/home-accueil-eng.aspx>
- xxxi Canada 150 Research Chairs, <http://www.canada150.chairs-chaires.gc.ca/home-accueil-eng.aspx>
- xxxii Canada Research Chairs, <http://www.chairs-chaires.gc.ca>
- xxxiii Best Brains Exchange, <http://www.cihr-irsc.gc.ca/e/43978.html>
- xxxiv Canadian Research Initiative in Substance Misuse (CRISM), <http://www.cihr-irsc.gc.ca/e/44597.html>
- xxxv Federal Action on Opioids, <https://www.canada.ca/en/health-canada/services/substance-abuse/prescription-drug-abuse/opioids/federal-actions.html>
- xxxvi Canadian drugs and substances strategy, [https://www.canada.ca/en/health-canada/services/substance-abuse/canadian-drugs-substances-strategy.html?utm\\_source=vanity\\_url&utm\\_medium=url\\_en&utm\\_content=redirect\\_justice\\_nationalantidrugstrategy.gc.ca&utm\\_campaign=pidu\\_14](https://www.canada.ca/en/health-canada/services/substance-abuse/canadian-drugs-substances-strategy.html?utm_source=vanity_url&utm_medium=url_en&utm_content=redirect_justice_nationalantidrugstrategy.gc.ca&utm_campaign=pidu_14)
- xxxvii CIHR Health Research and Health-Related Data Framework and Action Plan, <http://www.cihr-irsc.gc.ca/e/50182.html>
- xxxviii The Government of Canada invests in lifesaving opioids research, [https://www.canada.ca/en/institutes-health-research/news/2017/09/the\\_government\\_ofcanadainvestsinlife-savingopioidsresearch.html](https://www.canada.ca/en/institutes-health-research/news/2017/09/the_government_ofcanadainvestsinlife-savingopioidsresearch.html)

- xxxix HIV/AIDS Research Initiative, <http://www.cihr-irsc.gc.ca/e/25832.html>
- xl Rewarding Success Initiative, <http://www.cihr-irsc.gc.ca/e/50481.html>
- xli Corporate plans and reports, <http://www.cihr-irsc.gc.ca/e/37798.html>
- xlii Build in Canada Innovation Program, <https://www.tpsgc-pwgsc.gc.ca/app-acq/picc-bcip/index-eng.html>
- xliiii GC InfoBase, <https://www.tbs-sct.gc.ca/ems-sgd/edb-bdd/index-eng.html#start>
- xliv Canada Research Coordinating Committee, <http://www.ic.gc.ca/eic/site/icgc.nsf/eng/07620.html>
- xlv Canada's Fundamental Science Review, <http://www.sciencereview.ca/eic/site/059.nsf/eng/home>
- xlvi Canada Foundation for Innovation (CFI), <https://www.innovation.ca/>
- xlvii Policy on Results, <http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=31300>
- xlviii CIHR Open Access Policy, <http://www.cihr-irsc.gc.ca/e/46068.html>
- xliv Tri-Agency Open Access Policy on Publications, [http://www.science.gc.ca/eic/site/063.nsf/eng/h\\_F6765465.html](http://www.science.gc.ca/eic/site/063.nsf/eng/h_F6765465.html)
- I Twenty-Fourth Annual Report to the Prime Minister on the Public Service, <https://www.canada.ca/en/privy-council/corporate/clerk/publications/2017-annual-report-landing-page.html>
- li 2017–18 Main Estimates, <https://www.canada.ca/en/treasury-board-secretariat/services/planned-government-spending/government-expenditure-plan-main-estimates.html>
- lii Future Oriented Condensed Statement of Operations, <http://www.cihr-irsc.gc.ca/e/50786.html>
- liiii Canadian Institutes of Health Research Act, <http://laws-lois.justice.gc.ca/eng/acts/C-18.1/FullText.html>
- liv Raison d'être, mandate and role, <http://cihr-irsc.gc.ca/e/50825.html>
- lv Operating context and key risks, <http://cihr-irsc.gc.ca/e/50826.html>
- lvi GC InfoBase, <https://www.tbs-sct.gc.ca/ems-sgd/edb-bdd/index-eng.html#start>
- lvii Supplementary information tables, <http://cihr-irsc.gc.ca/e/50823.html>
- lviii Report on Federal Tax Expenditures, <http://www.fin.gc.ca/purl/taxexp-eng.asp>