Canadian Institutes of Health Research

2020–21

Departmental Plan

The Honourable Patty Hajdu, 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.
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From the Minister

I am pleased to present the 2020–21 Departmental Plan of the Canadian Institutes of Health Research (CIHR).

This year will be an exciting time for Canada’s health research community, as we will celebrate the 20th anniversary of CIHR and the launch of the agency’s new Strategic Plan, which will guide CIHR’s priorities and investments over the next decade.

The strategic planning process involved the most extensive public consultation and engagement ever conducted in the agency’s 20-year history. The plan reflects the diverse perspectives and priorities of the Canadian public, the health research community, stakeholders, partners, and patients. It will set out a long-term vision for improving the health of Canadians, while also establishing shorter-term priorities and strategies that will strengthen Canada’s health research ecosystem.

CIHR will also continue to work in collaboration with its Tri-Agency partners – the Natural Sciences and Engineering Research Council (NSERC) and the Social Sciences and Humanities Research Council (SSHRC) – to develop policies and strategies that push the boundaries of research and improve Canada’s competitiveness on the world stage. These include a commitment to promoting open science to publicly funded research; increasing equity, diversity, and inclusion in the research enterprise; and, building Indigenous health research capacity. The development and implementation of these policies will play a critical role in ensuring that Canada’s health research enterprise remains strong and sustainable, and provides a pipeline of innovation that will improve our lives today and for generations to come.

CIHR will also play an important role on key Government of Canada priorities, including my commitment to ensure that research takes diversity factors into account to improve women’s health. In support of these commitments, CIHR will work with its partners within the Health Portfolio and the rest of the Government of Canada to deliver the research-based evidence that will inform better policies and programs.

On behalf of CIHR, I invite you to read this 2020–21 Departmental Plan to learn more about how CIHR’s investments are helping to improve our health and strengthen our health care system.

The Honourable Patty Hajdu, P.C., M.P.
Minister of Health
Plans at a glance

The Canadian Institutes of Health Research (CIHR) invests in health research and training to support the creation of new knowledge and its translation into improved health for Canadians.

This year, CIHR will launch its new Strategic Plan, which will guide its activities from 2020 to 2030. This Strategic Plan, developed in consultation with the health research community, will align with CIHR’s mandate, as described in the *CIHR Act*, to improve the health of Canadians through health research, including knowledge creation, knowledge translation, and research capacity building.

In 2020–21, CIHR will build its organizational capacity to implement the vision, priorities, and strategies identified in the Strategic Plan. This will include building capacity for knowledge translation, implementing new approaches to planning and priority-setting, and enhancing its data analytics functions in order to further strengthen CIHR’s ability to make evidence-informed decisions and measure the impacts of its investments.

CIHR will invest in internationally competitive health research and research training to improve the health of Canadians and the health care system. It will collaborate with its Government of Canada partners to address areas of priority, including Canada’s opioids crisis, and advancing reconciliation with Indigenous peoples. CIHR will also support the commitments set out in the mandate letter of the Minister of Health, including measures to ensure that diversity factors are taken into account in research in order to improve women’s health.

CIHR will also continue to work with the Natural Sciences and Engineering Research Council of Canada (NSERC) and the Social Sciences and Humanities Research Council of Canada (SSHRC) to implement the Canada Research Coordinating Committee (CRCC) priorities, including equity, diversity, and inclusion (EDI), early career researchers (ECR), and Indigenous research. It will continue to work closely with the Canada Foundation for Innovation (CFI) and other partners throughout the health research ecosystem to support a more cohesive research environment in Canada.

For more information on CIHR’s plans, priorities, and planned results, see the “Core responsibilities: planned results and resources” section of this report.
Core responsibility: planned results and resources

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
In support of its Core Responsibility to fund health research and training, CIHR invests in investigator-initiated research and priority-driven research, supports the development of research and other professional skills across career stages, and focuses on knowledge translation that facilitates the application of the results of research and their transformation into new policies, practices, procedures, products, and services. A robust, face-to-face peer review system supports the selection of the most innovative and cutting-edge applications for research and/or knowledge translation, while upholding the principles of fairness, transparency, and excellence.

CIHR’s Core Responsibility delivers its activities through three Programs (financial, human resources, and performance information available in the GC InfoBase):

- The Investigator-Initiated Research Program provides funding for discovery-oriented, investigator-led research (i.e., projects identified by health researchers across the country).
- The Training and Career Support Program invests in the next generation of researchers to build and maintain Canada’s health research capacity to respond to new or existing challenges.
- The Research in Priority Areas Program promotes and builds upon Canada’s firm foundation of research excellence by engaging the research community and encouraging interdisciplinary, integrative health research to address gaps or emerging health priorities.

In 2020–21, CIHR’s focus will be on the development and implementation of its Strategic Plan. Developed around a long-term vision, this Strategic Plan will communicate CIHR’s priorities, and how these will guide CIHR in fulfilling its mandate, as described in the CIHR Act, to improve the health of Canadians through knowledge creation, knowledge translation, and capacity development. These elements will continue to be key components of CIHR’s vision and strategic direction, as it works to achieve the following three Departmental Results:
Departmental Result # 1: Canada’s health research is internationally competitive
In 2020–21, CIHR’s support for health research excellence through investigator-initiated and priority-driven research investments will contribute towards making Canada’s health research internationally competitive and internationally recognized. Advancing health research knowledge on critical issues is a central component of CIHR’s mandate and it will remain a guiding principle of CIHR’s vision in 2020–21 and beyond.

In 2020–21, CIHR will continue its ongoing efforts to expand and modernize the definition of research excellence. As a signatory (along with NSERC, SSHRC, CFI, and Genome Canada) to the San Francisco Declaration on Research Assessment (DORA), CIHR will work with partners, stakeholders, and the broader research community to review policies, programs, tools, and practices to identify ways to improve how research and the impact of research are measured and evaluated.

Departmental Result # 2: Canada’s health research capacity is strengthened
CIHR recognizes that the health research landscape is evolving and that Canada’s next generation of research talent must be equipped to apply their skills in an ever-changing environment. Through direct (recipient of CIHR training awards) and indirect (paid from a researcher’s CIHR grant) funding to trainees and postdoctoral fellows, CIHR investments will strengthen Canada’s health research capacity by supporting the development of scientific, professional, and organizational leaders within and beyond the health research enterprise.

In 2020–21, CIHR will continue to work with NSERC and SSHRC on the implementation of the Early Career Researcher (ECR) Action Plan. This will include providing access to research funding opportunities designed to support academic research careers and skills development, as well as efforts to enhance reporting standards to accurately measure the success of ECRs in academia.

CIHR is committed to funding science of the highest standards through rigorous and reproducible research, which includes the systematic integration of sex, gender, and other identity factors into research designs, methods, analyses, and interpretation, when appropriate. In 2018–19, 62% of CIHR-funded research applications indicated that sex and/or gender were considerations of the research design. In 2020–21, CIHR will work with the Minister of Health to integrate sex- and gender-based analyses, as well as diversity analyses, to ensure research takes diversity factors into account to improve health care. CIHR will also work with the Minister of Health on the mandate letter commitment to create academic research grants that improve our understanding of race, diversity, and gender.

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1 This includes all grants and awards that received a payment in the 2018–19 fiscal year. Calculation excludes funding awarded through Tri-Agency programs (e.g., Canada Research Chairs, Canada Excellence Research Chairs, etc.).
CIHR will continue working in collaboration with SSHRC, NSERC, and CFI as part of the Strategic Plan for Strengthening Indigenous Research Capacity (SIRC), which was approved by the CRCC in October 2019. Implementation of this plan will start in 2020–21 with the introduction of a series of mechanisms that will seek to build relationships with First Nations, Métis, and Inuit peoples; support the research priorities and create greater funding accessibility for Indigenous peoples within the granting agencies; and champion Indigenous leadership, self-determination, and capacity building in research. These mechanisms will build on CIHR’s long-standing commitment to Indigenous health research through its dedicated Institute of Indigenous Peoples’ Health. In collaboration with Indigenous communities, CIHR will also continue to identify opportunities to increase its research investments in Indigenous health research, with the goal of achieving its target of 4.6% of its annual base budget of grants and awards.

CIHR will also work with NSERC and SSHRC on the implementation of the Tri-Agency Equity, Diversity and Inclusion (EDI) Action Plan. Implementation measures in 2020–21 will focus on advancing the inclusion of EDI considerations into research design, and moving towards a more comprehensive understanding of research excellence. The Tri-Agency partners will continue to work on updating the questionnaire for collection of self-identification information, establishing reporting standards to provide coordinated publication of program participation and success rates, and apply Gender-Based Analysis Plus (GBA+) across all programs. In addition, continued implementation of the Dimensions pilot program, launched in 2019, will help facilitate a post-secondary transformation to increase equity, diversity, and inclusion and help drive deeper cultural change within the research ecosystem.

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

The health of Canadians improves when health research knowledge is used. Knowledge translation is a fundamental part of CIHR’s mandate to improve the health of Canadians and our health care systems and it will continue to be a priority of the organization within its new Strategic Plan and vision.

Through the Tri-Agency Open Access Policy on Publications, CIHR-supported research papers are expected to be made freely accessible within 12 months of publication, facilitating the use of CIHR-supported research knowledge within Canada and abroad. As part of this commitment to open science, CIHR – along with SSHRC and NSERC – has partnered with the Canadian Association of Research Libraries (CARL) and the European discovery service OpenAIRE to increase the availability of Canadian open access content.

In 2020–21, CIHR will continue to support activities related to the development of a Research Data Management Policy, in collaboration with its Tri-Agency partners. Work in this area is aligned with federal priorities related to digital research infrastructure and will be achieved through engagement of Government of Canada partners including Innovation, Science, and
Economic Development Canada (ISED) and the New Digital Research Infrastructure Organization (NDRIO).

CIHR will also continue to invest in targeted research and knowledge translation activities related to Government priorities to connect research results with decision-making in a policy setting. CIHR will continue to work with Government of Canada partners, including Health Canada (HC), the Public Health Agency of Canada (PHAC), as well as Environment and Climate Change Canada (ECCC), to support research and knowledge translation activities in areas of priority to Canadians.

**Gender-based analysis plus**

CIHR has a **GBA+ Framework** that seeks to build GBA+ capacity and sustain the practice of GBA+ through three streams:

- **GBA+ in CIHR-Funded Research**: Ensure that GBA+ is taken into account in research design, methods, analysis and interpretation and/or dissemination of findings. CIHR’s **Sex and Gender-based Analysis (SGBA) in Research Action Plan** aims to systematically integrate sex, gender, and other identity considerations into CIHR-funded research to ensure that CIHR-funded health research is relevant and impactful for Canada’s diverse population.

- **GBA+ in CIHR’s Funding System**: Ensure equitable access to CIHR funds across eligible individuals. CIHR’s **Equity Strategy** sets a vision for creating an equitable funding system by: a) identifying and eliminating systematic biases against any individual or groups that would hinder access to CIHR funds; and b) influencing the larger health research enterprise to adopt practices that are more equitable. CIHR has also developed Action Plans to address systemic barriers experienced by certain groups including a **Gender Equity Framework**, **Official Languages and Minority Communities Action Plan**, and **Action Plan: Building a healthier future for First Nations, Inuit and Métis Peoples**.

- **GBA+ in CIHR’s Workplace**: Ensure that CIHR conducts its business in an equitable manner. This stream is operationalized through federal legislation (such as the **Employment Equity Act**, the **Canadian Multiculturalism Act**, and the **Official Languages Act**) and policies (such as the Employment Equity policy, Duty to Accommodate policy, and Harassment in the Workplace policy). In 2018, CIHR implemented mandatory GBA+ training for all employees and members of Governing Council.

CIHR monitors implementation of GBA+ in each of the three streams as follows:

- Tracking integration of sex and gender in all research proposals;
- Monitoring equity in all of its funding programs through the **Tri-Agency Self-identification Questionnaire**, which collects information on applicant age and gender,
as well as whether the individual identifies as Indigenous, a visible minority, or a person with a disability;

- Administering surveys to applicants and recipients of CIHR funding, as part of program evaluations, to monitor differential impacts of funding programs on the four designated employment equity groups;
- Tracking GBA+ training completed by employees and Governing Council members, and participating in Health Portfolio-wide surveys to assess staff knowledge and application of GBA+.

These findings are used to identify gaps in the application of GBA+ and inequities in access to funding, and to develop evidence-based solutions to improve GBA+ in CIHR-funded research, CIHR’s funding system, and CIHR’s workplace.

CIHR is also working with NSERC and SSHRC to implement a Tri-Agency Equity, Diversity and Inclusion (EDI) Action Plan, which includes activities that cut across the three areas of CIHR’s GBA+ Framework.

**United Nations’ 2030 Agenda for Sustainable Development and the UN Sustainable Development Goals (SDGs)**

In 2020–21, CIHR will support the achievement of the following SDGs.

- **SDG 3: Ensure healthy lives and promote well-being for all at all ages** by continuing to:
  - fund research aimed at reducing morbidity and premature mortality within Canada;
  - support the research and development of vaccines and medicines for communicable and non-communicable diseases that primarily affect developing countries; and
  - initiate a new strategic approach to global health research.

- **SDG 5: Achieve gender equality and empower all women and girls** by implementing existing measures and developing innovative approaches to address gender inequality within the research landscape and empower Canada’s female researchers. CIHR will also continue to implement proactive measures to ensure that the research it funds is relevant and impactful for women, girls, and other intersecting identity groups, including investing in specific research initiatives focused on gender transformative interventions.

- **SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable** by continuing to invest in initiatives such as the Healthy Cities Research Initiative, which supports research focused on implementing tested interventions for maximizing the health-promoting potential of urban environments.

**Experimentation**

In 2020-21, CIHR will experiment with Robotics Process Automation (RPA). RPA is the use of software to replicate business processes that rely on manual, routine, or repetitive tasks.
Leveraging RPA should yield process efficiencies and internal control improvements, as well as; it should also allow employees to pursue more creative, higher-value work. Currently, significant resource time and effort is being spent on manual, repetitive tasks, which reduces employees’ capacity to focus on more strategic or value-added activities. The desired outcomes of the Proof of Concept (PoC) are to demonstrate that RPA can offer significant benefits, opportunities, and efficiencies for the organization and to validate the effectiveness of the open source software used in the PoC.

In alignment with the Government of Canada Digital Standards, CIHR has initiated a PoC using an open source software called RaiMan’s SikuliX. This tool was originally developed through a collaboration of the Massachusetts Institute of Technology (MIT) and INTEL, and is now solely supported by a community of practice. CIHR will use planning tools provided by InfoTech (Canadian think tank) to identify high-yield projects and rely on an internal business analyst to complete the business process mapping. CIHR has also engaged Transport Canada to compile lessons learned from these efforts. If successful, CIHR plans to showcase its experience so that others (especially other small departments and agencies) can benefit from CIHR’s work.
# Planned results for Funding health research and training

<table>
<thead>
<tr>
<th>Departmental Results</th>
<th>Departmental Result Indicators</th>
<th>Target</th>
<th>Date to achieve target</th>
<th>2016–17 Actual results</th>
<th>2017–18 Actual results</th>
<th>2018–19 Actual result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada’s health research is internationally competitive</td>
<td>Canada’s rank among G7 nations in share of health research publications</td>
<td>2nd in the G7</td>
<td>March 31, 2021</td>
<td>2nd</td>
<td>2nd</td>
<td>2nd</td>
</tr>
<tr>
<td></td>
<td>% of research involving international collaborations</td>
<td>Greater than or equal to 11%</td>
<td>March 31, 2021</td>
<td>11%</td>
<td>12%</td>
<td>12%</td>
</tr>
<tr>
<td></td>
<td>Citation score of health research publications compared to the world average</td>
<td>Greater than or equal to 1.5</td>
<td>March 31, 2021</td>
<td>1.53</td>
<td>1.53</td>
<td>1.53</td>
</tr>
<tr>
<td>Canada’s health research capacity is strengthened</td>
<td>$ co-invested by partners in health research</td>
<td>Greater than or equal to $0.80</td>
<td>March 31, 2021</td>
<td>$0.79</td>
<td>$0.84</td>
<td>$0.84</td>
</tr>
<tr>
<td></td>
<td>% of research that addresses sex or gender considerations</td>
<td>Greater than or equal to 56%</td>
<td>March 31, 2021</td>
<td>50%</td>
<td>57%</td>
<td>62%</td>
</tr>
<tr>
<td></td>
<td>% of research investments addressing Indigenous health</td>
<td>Greater than or equal to 4.6% of CIHR’s annual base budget</td>
<td>March 31, 2021</td>
<td>2.4%</td>
<td>3.0%</td>
<td>3.1%</td>
</tr>
<tr>
<td></td>
<td>% of the next generation of researchers that go on to work in a research position(^2)</td>
<td>Greater than or equal to 87%</td>
<td>March 31, 2021</td>
<td>86%</td>
<td>69%</td>
<td>92%</td>
</tr>
<tr>
<td>Canada’s health research is used</td>
<td>% of federal health documents informed by research</td>
<td>Greater than or equal to 20%</td>
<td>March 31, 2021</td>
<td>21%</td>
<td>25%</td>
<td>23%</td>
</tr>
<tr>
<td></td>
<td>% of research that informs patents</td>
<td>Greater than or equal to 9%</td>
<td>March 31, 2021</td>
<td>9%</td>
<td>14.4%</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>% of research contributing to improving health for Canadians</td>
<td>Greater than or equal to 39%</td>
<td>March 31, 2021</td>
<td>39%</td>
<td>37%</td>
<td>37%</td>
</tr>
</tbody>
</table>

Financial, human resources and performance information for CIHR’s program inventory is available in the GC InfoBase.xix

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\(^2\) In 2018, CIHR launched an end-of-award report for recipients of its Fellowship Award to complement data collected from Banting and Vanier recipients and award recipients from 2009 to 2018 were contacted to complete the survey. This resulted in the majority (56%) of the respondents having two or more years from the end of their award to secure substantive research-related employment as compared to Banting and Vanier respondents who had only up to one year after the end of their award. It is expected that future reporting will see a slight reduction in the observed result, bringing it in line with the established baseline for this indicator.
Planned budgetary financial resources for Funding health research and training

<table>
<thead>
<tr>
<th>2020–21 budgetary spending (as indicated in Main Estimates)</th>
<th>2020–21 planned spending</th>
<th>2021–22 planned spending</th>
<th>2022–23 planned spending</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,183,861,746</td>
<td>1,183,861,746</td>
<td>1,201,853,838</td>
<td>1,164,449,289</td>
</tr>
</tbody>
</table>

Financial, human resources and performance information for CIHR’s program inventory is available in the **GC InfoBase**.\(^{xx}\)

Planned human resources for Funding health research and training

<table>
<thead>
<tr>
<th>2020–21 planned full-time equivalents</th>
<th>2021–22 planned full-time equivalents</th>
<th>2022–23 planned full-time equivalents</th>
</tr>
</thead>
<tbody>
<tr>
<td>257</td>
<td>254</td>
<td>254</td>
</tr>
</tbody>
</table>

Financial, human resources and performance information for CIHR’s program inventory is available in the **GC InfoBase**.\(^{xxi}\)
Internal Services: planned results

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 services that support Program delivery in the organization, regardless of the Internal Services delivery model in a department. These services are:

- Management and Oversight Services
- Communications Services
- Legal Services
- Human Resources Management Services
- Financial Management Services
- Information Management Services
- Information Technology Services
- Real Property Management Services
- Materiel Management Services
- Acquisition Management Services

Planning highlights
In 2020–21, to support the operationalization of the Strategic Plan, CIHR will implement a new approach to planning and priority-setting. This process will be the first component of a multi-phased integrated approach to changing the way in which CIHR establishes its priorities and allocates its resources.

As part of its new approach to planning and priority-setting, CIHR will increase its data analytics capacity to enhance the evidence available to inform its decision-making. Drawing upon qualitative and quantitative sources, this function will monitor the impacts of CIHR investments and inform the implementation of the organization’s strategic direction by supporting the use of data to identify current and future needs.

In addition, CIHR will continue working with SSHRC and NSERC to develop one user-centric grants management platform, the Tri-Agency Grants Management Solution (TGMS).\textsuperscript{xxii} The existing grants management systems are limited in their capacity to adapt to the changing needs of the research community and the agencies’ evolving business needs. Through this one platform, there is an opportunity to modernize grants management and meet the standards of excellence that the Canadian research community and Tri-Agency staff expect in terms of efficiency, interoperability, accessibility, and usability. In 2020–21, the TGMS Initiative will begin the third year of its Discovery Phase, which is expected to culminate with the selection of an industry partner, and the necessary Treasury Board project, expenditure, and contract authorities to proceed to the implementation phase.
Planned budgetary financial resources for Internal Services

<table>
<thead>
<tr>
<th></th>
<th>2020–21 budgetary spending (as indicated in Main Estimates)</th>
<th>2020–21 planned spending</th>
<th>2021–22 planned spending</th>
<th>2022–23 planned spending</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30,996,904</td>
<td>30,996,904</td>
<td>31,704,184</td>
<td>31,433,522</td>
</tr>
</tbody>
</table>

Planned human resources for Internal Services

<table>
<thead>
<tr>
<th></th>
<th>2020–21 planned full-time equivalents</th>
<th>2021–22 planned full-time equivalents</th>
<th>2022–23 planned full-time equivalents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>237</td>
<td>230</td>
<td>226</td>
</tr>
</tbody>
</table>
Spending and human resources

This section provides an overview of the department’s planned spending and human resources for the next three consecutive fiscal years, and compares planned spending for the upcoming year with the current and previous years’ actual spending.

Planned spending

Departmental spending 2017–18 to 2022–23

The following graph presents planned (voted and statutory) spending over time.

![Graph showing planned spending over time from 2017–18 to 2022–23]
Budgetary planning summary for core responsibilities and Internal Services (dollars)

The following table shows actual, forecast and planned spending for each of CIHR’s core responsibility and to Internal Services for the years relevant to the current planning year.

<table>
<thead>
<tr>
<th></th>
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<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Health Research and Training</td>
<td>1,068,516,854</td>
<td>1,117,593,924</td>
<td>1,169,736,232</td>
<td>1,183,861,746</td>
<td>1,183,861,746</td>
<td>1,201,853,838</td>
<td>1,164,449,289</td>
</tr>
<tr>
<td>Subtotal</td>
<td>1,068,516,854</td>
<td>1,117,593,924</td>
<td>1,169,736,232</td>
<td>1,183,861,746</td>
<td>1,183,861,746</td>
<td>1,201,853,838</td>
<td>1,164,449,289</td>
</tr>
<tr>
<td>Internal Services</td>
<td>28,644,331</td>
<td>33,333,203</td>
<td>31,105,310</td>
<td>30,996,904</td>
<td>30,996,904</td>
<td>31,704,184</td>
<td>31,433,522</td>
</tr>
<tr>
<td>Total</td>
<td>1,097,161,185</td>
<td>1,150,927,127</td>
<td>1,200,841,542</td>
<td>1,214,858,650</td>
<td>1,214,858,650</td>
<td>1,233,558,022</td>
<td>1,195,882,811</td>
</tr>
</tbody>
</table>

CIHR’s planned spending has increased to $1.2 billion in 2019–20 and is expected to remain at that level going forward.

CIHR’s variance in expenditures and planned spending is mainly due to the allocation of new ongoing funding announced in Federal Budgets for CIHR and funding for Tri-Agency programs (in collaboration with its Tri-Agency partners). Funding for these programs impact CIHR’s planned spending on an annual basis as CIHR receives time-limited funding following each competition and depending on the successful applications’ alignment with CIHR’s health-related mandate.

The net variance between 2018–19 and future years is mainly due to the allocation of additional funding to CIHR as follows:

- $21.1M in 2019–20, increasing to $25.1M annually in 2023–24 and on-going for the Canada Research Chairs program announced in Budget 2019;
- $15.7M in 2019–20, increasing to $46.0M annually in 2022–23 and ongoing to enhance support for health research announced in Budget 2018;
- $4.1M in 2019–20, increasing to $7.4M annually in 2021–22 and on-going to support graduate students through research scholarships (Canada Graduate Scholarships program) announced in Budget 2019;
- $3.7M in 2019–20 for the Business-Led Networks of Centres of Excellence program, gradually ramping down over time until program is completely phased out in 2024–25;
• $2.0M in 2019–20, increasing to $3.3M annually in 2021–22 and on-going for paid parental leave for student researchers announced in Budget 2019; and
• $2.0M per year, starting in 2019–20, for five years to support cervical cancer research.

As noted in Budget 2018, some of these programs (Business-Led Networks of Centres of Excellence, Centres of Excellence for Commercialization and Research, and Networks of Centres of Excellence) are winding down or consolidated with the associated funding transferred to other federal government departments, which is partly the source of the variance from 2021–22 to 2022–23.
Planned human resources

The following table shows actual, forecast and planned full-time equivalents (FTEs) for CIHR’s core responsibility in its departmental results framework and to Internal Services for the years relevant to the current planning year.

Human resources planning summary for core responsibilities and Internal Services

<table>
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</thead>
<tbody>
<tr>
<td>Funding health research and training</td>
<td>255</td>
<td>229</td>
<td>254</td>
<td>257</td>
<td>254</td>
<td>254</td>
</tr>
<tr>
<td>Subtotal</td>
<td>255</td>
<td>229</td>
<td>254</td>
<td>257</td>
<td>254</td>
<td>254</td>
</tr>
<tr>
<td>Internal Services</td>
<td>205</td>
<td>232</td>
<td>235</td>
<td>237</td>
<td>230</td>
<td>226</td>
</tr>
<tr>
<td>Total</td>
<td>460</td>
<td>461</td>
<td>489</td>
<td>494</td>
<td>484</td>
<td>480</td>
</tr>
</tbody>
</table>

The net increase from 2018–19 to 2019–20 is largely attributable to the creation of new positions in 2018–19 to deliver and support programs to enhance health research announced in Budget 2018. In 2019–20, CIHR also created temporary positions to lead the key activities pertaining to the development of its Strategic Plan. The increase is offset starting in 2021–22 due to these term positions, as well as others, ending in 2021–22 and 2022–23.

Estimates by vote

Information on the CIHR’s organizational appropriations is available in the 2020–21 Main Estimates.
Condensed future-oriented statement of operations

The condensed future-oriented statement of operations provides an overview of the CIHR’s operations for 2019–20 to 2020–21.

The amounts for forecast and planned results in this statement of operations were prepared on an accrual basis. The amounts for forecast and planned spending presented in other sections of the Departmental Plan were prepared on an expenditure basis. Amounts may therefore 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 CIHR’s website.\textsuperscript{xxiv}

Condensed future-oriented statement of operations for the year ending March 31, 2021 (dollars)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses</td>
<td>1,214,309,883</td>
<td>1,225,404,899</td>
<td>11,095,016</td>
</tr>
<tr>
<td>Total revenues</td>
<td>7,422,089</td>
<td>4,877,155</td>
<td>(2,544,934)</td>
</tr>
<tr>
<td>Net cost of operations before government funding and transfers</td>
<td>1,206,887,794</td>
<td>1,220,527,744</td>
<td>13,639,950</td>
</tr>
</tbody>
</table>

Total expenses include grants and awards payments for health research and training of approximately $1,140.0M in 2019–20 and $1,151.3M in 2020–21. The remaining amount of $74.3M in 2019–20 and $74.1M in 2020–21 relates to operating expenses such as salaries, goods and services, and peer review expenses (non-public servant travel and hospitality).

Total revenues include funds received from external partners for health research and training, as well as any refunds of prior year grants and awards payments.

Expenses are expected to increase in line with the allocation of additional authorities provided to fund and deliver grants and awards payments.

Revenues are expected to decrease as a result of fewer anticipated partner donations for funding in 2020–21, in part because CIHR received a partner donation of $1.0M in 2019–20 which is not expected to reoccur in 2020–21.
Corporate information

Organizational profile

**Appropriate minister(s):** The Honourable Patty Hajdu, P.C., M.P.

**Institutional head:** Dr. Michael J. Strong, President

**Ministerial portfolio:** Health

**Enabling instrument(s):** *Canadian Institutes of Health Research Act* xxv (S.C. 2000, c. 6)

**Year of incorporation / commencement:** 2000

Raison d’être, mandate and role: who we are and what we do

“Raison d’être, mandate and role: who we are and what we do” is available on CIHR’s website xxvi

For more information on the department’s organizational mandate letter commitments, see the “Minister’s mandate letter”. xxvii

Operating context

Information on the operating context is available on CIHR’s website xxviii
Reporting framework

CIHR’s approved departmental results framework and program inventory for 2020–21 are as follows.

| Departmental Result: Canada’s health research is internationally competitive | Indicator: Canada’s rank among G7 nations in share of health research publications |
| Departmental Result: Canada’s health research capacity is strengthened | Indicator: % of research involving international collaborations |
| Departmental Result: Canada’s health research is used | Indicator: Citation score of health research publications compared to the world average |

<table>
<thead>
<tr>
<th>Core Responsibility: Funding Health Research and Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Departmental Result: Canada’s health research is internationally competitive</td>
</tr>
<tr>
<td>Indicator: Canada’s rank among G7 nations in share of health research publications</td>
</tr>
<tr>
<td>Indicator: % of research involving international collaborations</td>
</tr>
<tr>
<td>Indicator: Citation score of health research publications compared to the world average</td>
</tr>
</tbody>
</table>

| 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 research contributing to improving health for Canadians |

<table>
<thead>
<tr>
<th>Program Inventory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program: Investigator-Initiated Research</td>
</tr>
<tr>
<td>Program: Training and Career Support</td>
</tr>
<tr>
<td>Program: Research in Priority Areas</td>
</tr>
</tbody>
</table>
Supporting information on the program inventory

Supporting information on planned expenditures, human resources, and results related to CIHR’s program inventory is available in the GC InfoBase. xxix

Supplementary information tables

The following supplementary information tables are available on CIHR’s website: xxx

- Departmental Sustainable Development Strategy
- Details on transfer payment programs
- Gender-based analysis plus

Federal tax expenditures

CIHR’s Departmental Plan does not include information on tax expenditures that relate to its planned results for 2020–21.

Tax expenditures are the responsibility of the Minister of Finance, and the Department of Finance Canada publishes cost estimates and projections for government-wide tax expenditures each year in the Report on Federal Tax Expenditures. xxxi This report provides detailed information on tax expenditures, including objectives, historical background and references to related federal spending programs, as well as evaluations, research papers and gender-based analysis. The tax measures presented in this report are solely the responsibility of the Minister of Finance.

Organizational contact information

Mailing address
Canadian Institutes of Health Research
160 Elgin Street, 9th Floor
Address Locator 4809A
Ottawa, Ontario K1A 0W9

Telephone: 613-954-1968
Toll Free: 1-888-603-4178
Fax: 613-954-1800
Email: support-soutien@cihr-irsc.gc.ca
Website(s): 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 a department over a 3-year period. Departmental Plans are tabled in Parliament each spring.

departmental priority (priorité ministérielle)
A plan or project that a department has chosen to focus and report on during the planning period. Departmental priorities represent the things that are most important or what must be done first to support the achievement of the desired departmental results.

departmental result (résultat ministériel)
A consequence or outcome that a department seeks to achieve. 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)
A framework that consists of the department’s core responsibilities, departmental results and departmental result indicators.

Departmental Results Report (rapport sur les résultats ministériels)
A report on a department’s actual accomplishments against the plans, priorities and expected results set out in the corresponding Departmental Plan.

experimentation (expérimentation)
The conducting of activities that seek to first explore, then test and compare, the effects and impacts of policies and interventions in order to inform evidence-based decision-making, and improve outcomes for Canadians, by learning what works and what doesn't. Experimentation is related to, but distinct from innovation (the trying of new things), because it involves a rigorous comparison of results. For example, using a new website to communicate with Canadians can be an innovation; systematically testing the new website against existing outreach tools or an old website to see which one leads to more engagement, is experimentation.

**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 assess how diverse groups of women, men and gender-diverse people experience policies, programs and services based on multiple factors including race, ethnicity, religion, age, and mental or physical disability.

**government-wide priorities (priorités pangouvernementales)**
For the purpose of the 2020–21 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 are given funding to pursue a shared outcome, often linked to a government priority.

**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.

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.

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.

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 inventory (répertoire des programmes)
Identifies all of the department’s programs and describes how resources are organized to contribute to the department’s core responsibilities and results.

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.

strategic outcome (résultat stratégique)
A long-term and enduring benefit to Canadians that is linked to the organization’s mandate, vision and core functions.
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

6. San Francisco Declaration on Research Assessment (DORA), www.sfdora.org/read/
26. Raison d'etre, mandate and role: who we are and what we do, www.cihr-irsc.gc.ca/e/51852.html
30. Supplementary Information Tables, www.cihr-irsc.gc.ca/e/51850.html