Goal:

Create a research and education program that builds up on existing capacities strengthens the potential of portuguese research institutions Improves the international visibility of research done in Portugal

Principles:

Research-oriented

Peer reviewed competitive grant proposals

Activities:

1. PhD – MD/PhD Program on Biomedical Sciences Fellowships plus OH for 10 PhD and 5 MD per year average 5 years to complete the PhD

2. Science

Collaborative research grants with joint retreat

Training Workshops (open to international applicants)

Symposia/Summer School series (focus on international participation)

1. PhD - MD/PhD program in Biomedical Sciences (basic & translational)

Aim – have very good students (portuguese and non-portuguese) in the best portuguese Labs at the several national Institutions.

Students register at any portuguese University according to host Lab

Governance:

Board of Trusties Harvard-Portugal partnership

Governing board for PhD program meets low frequency (this will act as an "umbrella" for existing programs; composed by representatives from interested institutions)

Executive board (subject to evaluation / rotation)
1 executive director plus 1 co-chair from Harvard
Includes administration of Workshops

2. Science Program

Collaborative research grants: at least 2 portuguese groups from different institutions plus one group from Harvard Call for 2y, evaluation, extension up to 3y Includes salaries for 2 positions (PhD, technician or post-doc) plus running costs and equipment, per group

Governance:

Board of Trusties Harvard-Portugal partnership

Scientific Advisory Board

Executive board for Science program (rotating 4-5y) 1 executive director plus 1 co-chair from Harvard)

Funds required: 20 million

1. Collaborative research grants

150k per year per group; 450k per grant per year total 3 years (2+1)
1st call (accept up to 4), 2nd call after 2 years (accept up to 4)
total 10,8 million

Annual Workshop and retreat for grant awardees: 100k per year Annual International Symposium: 50k per year (total 0,75 million)

2. PhD – MD/PhD Program
10 PhD and 5 MD; 22k per student per year
(12k stipend + 1k health + 1k travel + 3k tuition + 5k bench fee)
Total 1,65 million per call (15 x 22k x 5 y)
Total 5 calls: 8,2 million

Training Workshops for PhD students: 50k per year

Annual Retreat PhD students: 10k per year (total 0,3 million)

Funds required: 8-10 million per year x 5y (total 50 million)

Governance:

Call of proposals/ evaluation/ management Monitoring/ accountability

Selection and PhD degree

Pateirsairrevieudprocess

FCT

Fundação Gulbenkian Fundação Champalimaud Fundação Luso-Americana

Portugal – Harvard Program

Public Content on Health and Biomedical Sciences

Lisbon, 11th July 2007

Public Content

CONTEXT: A project of the Harvard Medical School – Portugal Program with the participation of a wide range of Portuguese partnering institutions:

- All the Medical Schools and other health sciences schools
- All the Biomedical Research Associate Labs and some other Research Centers
- INSA National Institute of Health
- Ciência Viva Agency for Scientific and Technological Culture
- Scientific Societies
- Hospitals and local family centers
- Directorate General of Health
- High Commissariat for Health
- Pharmaceutical Approval Agency
-
- UMIC Knowledge Society Agency

OBJECTIVES:

- High quality, rich and easily understandable health biomedical sciences information for the general public
- The best online knowledge base of health information for the public in Portuguese language
- Diversified knowledge depth from very simple basic information to tools for students, practitioners and other mediators to deal with the public
- Support to healthcare communities of practice
- Public availability of first contents within 12 months

TARGET GROUPS:

- Public at large
- Intermediaries (teachers, journalists, NGOs, ...)
- Students of medicine and other health sciences
- Communities of practice

DISTRIBUTION CHANNELS/LOCAL EXPERIMENTATION AND FEEDBACK:

- Ciência Viva
- •Family healthcare units (there are about 100 of them for about 10.000 people)
- Healthcare practitioners
- NGOs

....

DISTINGUISHING CHARACTERISTICS (usability and mediation):

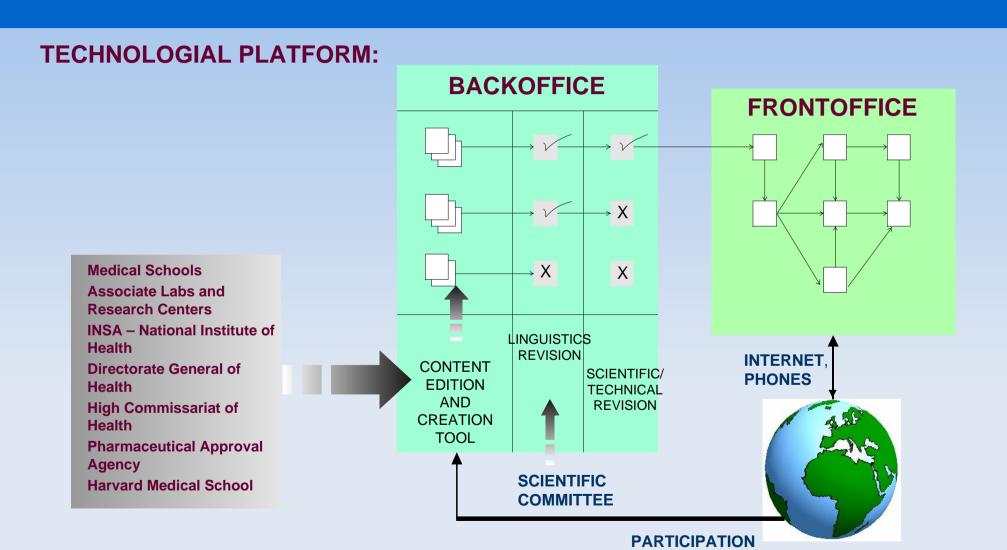
- Both ICT based and proximity interaction
- Up to date technology high legibility, video, sound interactivity, adaptability to users needs
- Multimodal availability PCs, cell phones, PDAs, telephone access with voice recognition menus, interactive IPTV, configurable touch screens
- Multiple search pathways –
 Taxonomy of health issues (scholars, practitioners, teachers, ...)
 Relevant health risks for the current season (journalists, practical people, ...)

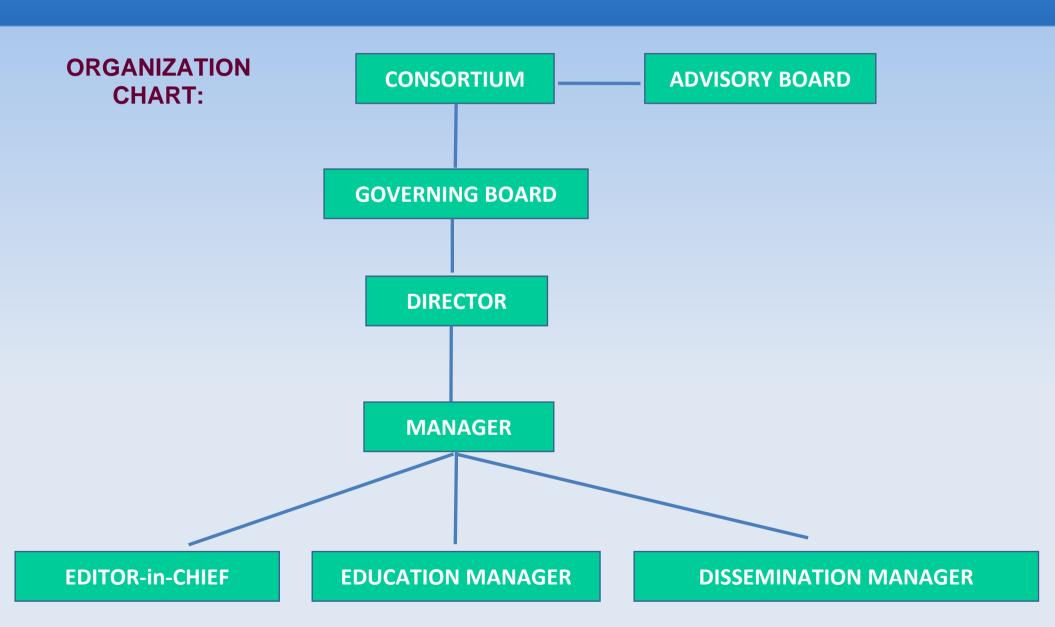
 Particular health conditions (patients and their families, ...)

. . .

DISTINGUISHING CHARACTERISTICS (engagement):

- Online "ask a scientist" service acceptance of questions from people (a small number to be regularly answered)
- Discussion fora of health professionals and researchers exchange knowledge and information with colleagues on topics of their choice (not available to the public at general)
- Publicly available blogs brief expert remark into a public moderated blog on a relevant topic for the public at large, followed by users comments





STEERING COMMITTEE INITIAL TASKS:

- Definition of priorities and goals (themes of special interest for a quick start or with content already available)
- Definition of metrics of success, clear targets, milestones
- Pilot projects
- Identification and organization of content providers
- Organization of the content validation process (refereeing)
- Means of dissemination (web, phone, brochures, public events, ...)
- Possible other funding sources

EVALUATION AND RESEARCH:

- International benchmarking
- External evaluation
- Research on health public content systems (usability, communities of practice, final impact on the public, education and healthcare system, ...)
- Feedback on the overall improvement of the system

Health Services, Policy and Clinical Management

1. Overview:

- a. Uncoordinated set of programs on health management and health policy
 - i. Currently there are several levels of training in place;
- b. There are needs for:
 - i. People at the decision-making level trained and educated on policies and services development;
 - ii. Need to motivate physicians on healthcare policy and management;
 - iii. Training more healthcare professionals on policy and healthcare management;
 - iv. Establish collaboration between multiple institutions in a variety of programs in an informal network.

2. Suggestions on what should be done

- a. Mechanism:
 - i. Creation of a steering committee:
 - 1. Representing all of the major stakeholders;
 - 2. Guaranteeing that there is a strategy on healthcare training in place;
 - 3. Guaranteeing that there is a research program in place;
 - 4. Make sure that the committee has appropriate administrative support;
 - 5. Taking into consideration the views of the Ministry of Health, the Ministry of Science and Technology, and other entities such as public and private hospitals, medical schools, etc.

b. Goals:

- i. Education at all levels:
 - 1. Creating a continuum program on Health Services, Policy and Clinical Management that will include from medical students, through post-graduate and continuing professional education and would also include attention to degree programs at the Masters and Ph.D. levels:
 - a. Teaching in medical schools and other health sciences schools;
 - i. Training in healthcare policy and management to be included in all the curricula of all medical schools and other health sciences schools at appropriate levels.
 - b. Continuing education programs.

There is a recognized need for on-the-job training programs, such as Advanced Courses.

- c. Specific programs:
 - Plan a National Conference on the current status of Health Services, Policies and Clinical Management;
 - ii. Perform an evaluation of existing programs;
 - iii. Identify the programs to be conducted.
- d. Develop graduate programs at the Masters and Ph.D. levels.

ii. Research:

- 1. Develop capacities on health services research through:
 - a. Designating a review committee for the evaluation of health services research grants;
 - b. Creating a fund for 5 competitive grants on health services research to be awarded by January 1, 2008;
 - c. Assessing the potential for improving capacity for health services research;
 - d. Creating fellowships for Ph.Ds in health services research.
- 2. Create conditions for the development for health services research, including funds for institutions, operational conditions for clinical research, compensation for health care professionals engaged in clinical research, and others.

iii. Implementation:

1. 5-year plan formulation as of December 31, 2007.

3. Project Plan:

- a. Timeframe:
 - i. Plan a National Conference on the current status of Health Services, Policies and Clinical Management by October 31, 2007;
 - ii. Award 5 competitive grants on health services research by January 1, 2008.
 - iii. Present a 5-year plan on Health Services, Policies and Clinical Management by December 31, 2007.
 - iv. Present a plan for Ph.D. programs by April 1, 2008.

4. Budget:

- a. This will be discussed between the spoke persons and HMS.
- 5. Spoke persons before HMS:
 - a. Professor J. M. Caldas de Almeida:
 - b. Professor A. Martins da Silva.
 - c. Dr. Rui Portugal.