



7 MAY 2025

Subject: Phase 1 Close-Out and Transition Planning – Guidance and Required Actions.

Dear MOHCCN Member,

As the Terry Fox Research Institute's (TFRI) current contribution agreement with Health Canada (HC) comes to an end, it is critical that all centres adhere to the following financial and operational requirements to ensure a compliant and orderly close-out of Phase 1 activities.

1. Key Expectations for Phase 1 Close-Out

EXECUTE Contribution Agreement End Date

The current contribution agreement between TFRI and Health Canada ends on March 31, 2026. This date marks the final day for all eligible project activities and expenditures under the Phase 1 Research Project Grant Agreement (RPGA) framework.

No Spending After March 31, 2026

No expenditures can be incurred or charged to TFRI-funded projects after March 31, 2026. Any unspent balance will need to be returned to TFRI within a two-month period.

Completion of Work for Cost Eligibility

Only work that is **fully completed by March 31**, 2026, and that is **within the original scope of your RPGA agreement and following 1:1 match ratio formula**, will be considered eligible as expenditure.

Centres must ensure that all deliverables (e.g., sequencing, clinical data curation, and data submission) are finalized and documented. Delayed or partial completion will not qualify for funding, more details in section 3 below. Any unearned balance will need to be returned to TFRI within a two-month period.

⚠ No Pre-Billing of Incomplete Work

Pre-billing is strictly prohibited for any work that is not fully completed by the deadline. This includes services such as sequencing, pathology, and other activities that are scheduled but not finalized by March 31.





2. Final Reporting Responsibilities and Deadlines

Report	Due to TFRI	Notes
Forecast of underspending	Feb 15, 2026	For TFRI's March 1 submission to HC
Final expenditure reports	April 30, 2026	For May 31 HC report
Performance metrics	April 30, 2026	For May 31 HC report
Asset inventory (>\$5,000)	April 30, 2026	For May 31 HC report
Final Progress Report	May 31, 2026	For June 30 HC report
Final Initiative Report	July 31, 2026	For October 1 HC report

3. Outstanding Case and Budget Reconciliation – applicable to funded cohorts

As we enter the final fiscal year of the current Health Canada contribution agreement, we want to take a moment to thank and congratulate all participating centres for their tremendous efforts to date. As of the end of FY2024-25, MOHCCN has successfully profiled nearly **9,000 cancer cases**. This is a remarkable milestone and a testament to the hard work and collaboration across the Network.

At the same time, we recognize that this number falls short of our annual target. Nearly 3,000 additional cases were committed for profiling in FY2024-25, and so we must continue with urgency and focus. Encouragingly, the Network reported over 600 cases in the last month alone, a pace we must sustain and exceed to achieve our final target of 15,000 fully profiled cases by March 31, 2026.





◆ Accelerating Momentum into FY2025-26

With approximately **6,000 additional cases** required this year, we are calling on all sites to:

- Maintain and increase the current pace of case sequencing and data submission.
- Avoid delays and ensure that case contributions are distributed across the year not left to the final quarter.
- Proactively address any barriers that may hinder meeting your site's targets.

We are confident that, together, we can meet our goal—but this will require a second-level acceleration and collective discipline across the Network.

🔋 Clinical Data Lag and Gold Cohort Compliance

It is essential to acknowledge a current lag in the submission of clinical data for Gold Cohort cases. This is understandable given the updates to the Clinical Data Model (CDM) and the sequential nature of clinical data collection following genomic profiling. Now that the CDM has stabilized and no immediate changes are expected, we must refocus efforts on bringing these cases to completion.

As outlined in your signed RPGA with TFRI, and reaffirmed in Section 4b of the **Gold Cohort Standards Policy (September 2024)**: "Upon successful completion of sequencing of a case, the cohort shall submit to CanDIG the complete clinical data within six months."

This applies to all fields—mandatory, conditional, and optional—as defined in the latest version of the CDM. While staggered submissions are permitted, adherence to the sixmonth timeline is required for all cases moving forward.

- Cases without complete clinical data will not be counted toward final deliverables.
- Any use of "Not Available" for mandatory fields must be supported by a documented, good faith effort to obtain the data.

Non-compliance with these terms could compromise the integrity of the Gold Cohort dataset and be subjected to refunds.





Support and Accountability

We know the demands on your teams are significant, and both the MOHCCN TFRI office and your regional consortium leadership remain fully available to support you. Please do not hesitate to reach out if you require clarification, additional resources, or help troubleshooting specific data or submission challenges.

In parallel, TFRI will be reaching out to each centre to:

- Confirm outstanding case volumes.
- Review unspent funds or potential reallocations.
- Identify any underspending risks that may impact Phase 1 reporting.

We appreciate your continued commitment and collaboration as we move into this final and most critical phase of the project. Let's finish strong—together.

4. Other MOHCCN Funded Programs – applicable to non-case contributing projects

The following projects within the MOHCC program extend beyond March 31st, 2026, but have plans already in place. Funding will continue as per the agreements, and reporting expectations are noted below.

Award	Start/End	Reporting
	Dates	Requirements
Clinician Scientist FY24	1-Jul-2023 to 30-Jun-2026	Financial: quarterly Scientific (final): 31- Jul-2026
Clinician Scientists FY25	1-Jul-2024 to 30-June- 2027	Financial: quarterly Scientific (final): 31- Jul-2027
Clinician Scientists FY26	1-Jul-2025 to 30-Jun-2028	Financial: quarterly Scientific (final): 31- Jul-2028
Health Informatics & Data Science FY26	1-Jul-2025 to 30-Jun-2026	Financial: quarterly Scientific (final): 31- Jul-2026





OICR	1-Jul-2023 to	Financial: quarterly
Investigator	30-Jun-2028	Scientific & metrics:
Award - Reznik		annually on 30-Apr
		Scientific & metrics
		(final): 30-Apr-2029

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