Window of Opportunity Network

2023 Portfolio Trials

Call for Concepts

1. OVERVIEW

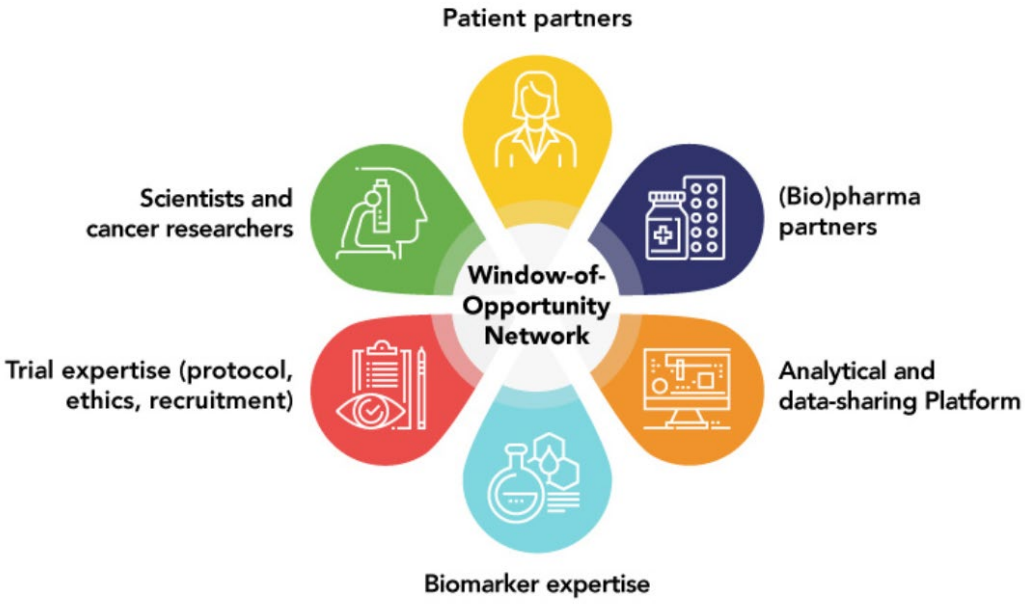
This document is intended to guide investigators applying to OICR's Window-of-Opportunity (WOO) Network for funding support for presurgical window trials in treatment-naïve or early recurrent cancer patients.

Window-of-Opportunity Network

The WOO Network, co-led by Drs. Angel Arnaout (Surgical Oncologist, The Ottawa Hospital Cancer Center) and Melanie Spears (Co-Director of Diagnostic Development and Principal Research Scientist, OICR), is a provincial collaboration between clinicians, scientists, patient and industry partners to deliver multicenter, high efficiency presurgical window trials and drive a pan-cancer clinical-translational research program where novel therapies are quickly tested in cancer patients prior to surgery.

The WOO study design has increasingly become part of drug development. WOO trials exploit the 'window' of time after cancer diagnosis, typically prior to initiation of cancer therapy (usually surgery with curative intent). In presurgical WOO trials, patients with treatment naïve or early-stage disease are treated for a brief "window" period with a novel therapy followed by surgical resection. Unlike neoadjuvant trials, the "window" period is kept short (a few weeks) to ensure that surgery is not delayed.

Figure 1: Collaborative Elements in the WOO Network



Benefits of the Network to the provincial cancer research community include:

- Collaboration with experts in translational science and leading-edge technologies.
- Guidance to promote efficient implementation, data collection, and translational analysis.
- Consultation with patient partners and experienced WOO trialists throughout the study process.
- Support in profiling the tumour and the immune environment using multi-omic technologies.

More information on WOO trials and the WOO Network is available through our website and summary for researchers.

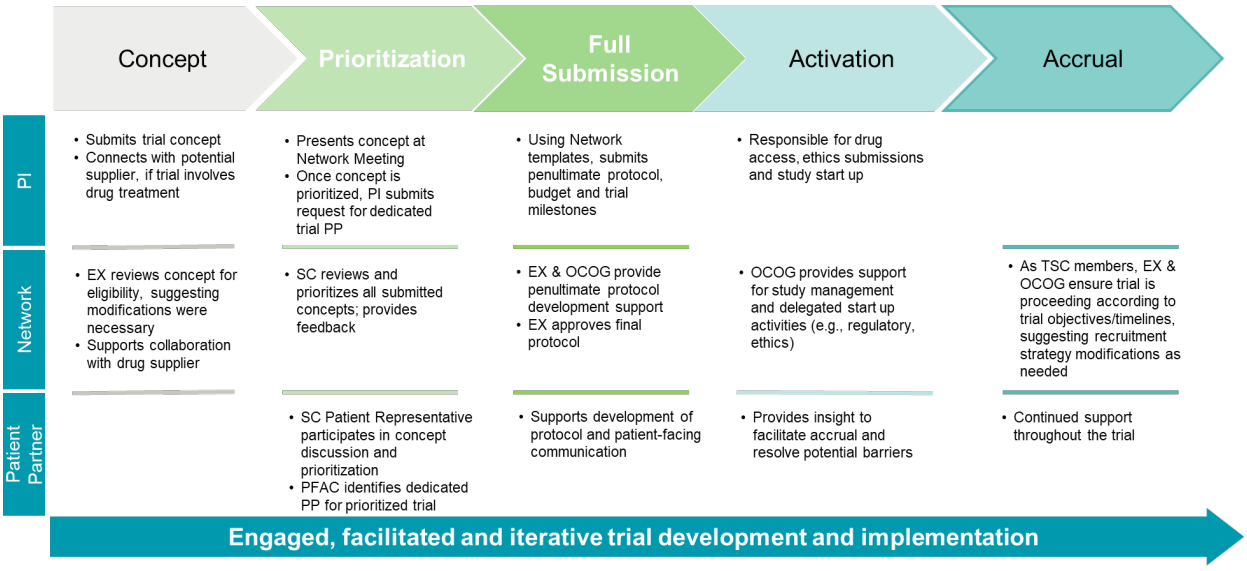
Network trial support
Funding support is provided to prioritized trials that meet funding criteria. Trial development is engaged, facilitated and iterative (see Figure 2).

Concepts undergo review by the Executive (EX) of the WOO Steering Committee for fit against key criteria. Eligible concepts are discussed and prioritized by the WOO Steering Committee (SC) during Network Meetings. Together with the EX and the Ontario Clinical Oncology Group (OCOG), an academic clinical trials coordination organization within McMaster University and a strategic partner of the Network, prioritized concepts are developed for full submissions. Standardized templates (e.g., WOO trial protocol) and documents (e.g., Informed Consent Form) have been developed to expedite trial development and activation.

Integrating patient perspectives and insight can be transformative to research planning and successful execution. The WOO Network, together with OICR's Patient and Family Advisory Council (PFAC), ensures that patients are engaged throughout the life cycle of a WOO trial. Once a concept is prioritized for full submission, a dedicated Patient Partner (PP) is engaged. The PP works with the trial team to support (i) protocol development (e.g., feasibility and patient acceptability of trial design, patient-centered endpoints) and patient facing materials, including the Informed Consent Form, (ii) trial implementation (e.g., identifying solutions to potential recruitment barriers, and (iii) sharing results (e.g., lay language communication material, disseminating results to patient networks).

Contact the WOO Network (WOONetwork@oicr.on.ca) if support is needed to identify a PP.

Figure 2. Trial development and implementation: engaged, facilitated and iterative



Key criteria for WOO Network trials:
- Design: multi-centre, presurgical randomized window trial with less than 100 patients
- Disease: early-stage disease (newly diagnosed treatment naive or early recurrent cancer)

- Drug: If drug intervention is considered, demonstrated drug safety profile is available, along with evidence of strong support of the trial concept and timely drug availability by industry partners
- Feasibility: for patient accrual completion within two years, with ethics approval and study start-up within six months after funding approval
- Focus: immunomodulation with identification of novel biomarkers of immune response

The current scientific focus of the Network is immunomodulation. Understanding the biology of how therapeutics can elicit an immune response and alter the immune environment in tumours is critical to ensuring immunotherapy is more effective, less toxic and more durable. The Network will examine novel immunomodulatory agents across a portfolio of trials and integrate results from comprehensive molecular screening and multi-omic biomarker analysis. Single agents or drug combinations targeting pathways that trigger antigen release and presentation, T-cell priming and activation, TIL recruitment and function are the focus of the current Network approach to optimizing novel immuno-oncology therapies. Importantly, the Network will provide a unique opportunity to generate data across multiple tumour types and targeted interventions and build a framework for powerful approaches for novel neoadjuvant therapies for primary-diagnosed invasive cancers. This platform provides the ability to quickly and efficiently test new drugs and/or combinations and their effects in the primary presurgical setting.

The following are out of the scope for support from the WOO Network:
- Perioperative trial designs (treatment is delivered before and after surgery)
- Traditional neoadjuvant trial designs (where surgery is delayed significantly, and therapeutic benefit is envisaged with the neoadjuvant therapy). Given the short presurgical period of WOO trials, it is unexpected that clinical benefit will be observed.

1.1 Eligibility

The WOO Network invites trial concepts from investigators at Ontario academic centres and hospital research institutes. Funding is only tenable in Ontario. For profit entities are not eligible to receive OICR funding.

The Network is focused on building WOO study capacity in Ontario, and strongly encourages including early career investigators/clinicians as part of the study team.

1.2 Term

Full submissions selected for funding will be provided with a funding term of 2.5 years, up to two years for trial accrual and six months for translational analyses.

1.3 Funding available

Successful WOO trials will be funded to a **maximum of $400,000 CAD.** Note that OICR does not provide overhead for clinical trials. Funding is contingent upon available funding from the Government of Ontario via the Ministry of Colleges and Universities.

1.4 Key dates

Optional information session (click to register):	October 18, 2022, 9 a.m. – 10 a.m. ET
Concept deadline:	November 7, 2022, 5 p.m. ET
Concept feedback communicated:	November 18, 2022
Updated concept deadline:	December 12, 2022, 5 p.m. ET
Concept presentation at Network Meeting	February 9, 2023, 9 a.m. – 12 p.m. ET
Concept prioritization results communicated:	Early March 2023
Full Submission deadline:	April 28, 2023, 5 p.m. ET
Planned funding start:	July 1, 2023

1.5 Concepts

Concepts are to be submitted to WOONetwork@oicr.on.ca using the **WOO_2023 Portfolio_Concept Form** which collects administrative information (title, Principal Investigator/PI and Co-Investigators), along with:

- Study description:
  - Background and rationale, including specific immunomodulation hypothesis.
  - Synopsis and schema, including information on disease, objectives, patient population, patient accrual and justification and endpoints (biological, immune endpoints, and if available at concept stage, patient centred)
  - Details on preliminary correlative/biomarker investigations
    - Indicate which investigations will/can be conducted together with the Network's core biomarker analyses platform https://oicr.on.ca/programs/diagnostic-development/ which include:
      i. Genomic profiling: to detect changes in SNVs, CNVs, gene fusions and insertions/deletions
      ii. RNA-sequencing: to measure changes in gene express
      iii. TCR sequencing
      iv. NanoString GeoMx DSP: to measure changes in proteomic express
- Feasibility details:
  - Engaged sites and patient recruitment
  - Preliminary study timelines
  - Pharma engagement and drug safety profile
- Patient Partnership:
  - Plan summarizing how PP(s) will be involved in the design and execution of the trial. Resources for best practices in involving patients in research are provided by the Canadian Cancer Clinical Trials Network (https://3ctn.ca/for-researchers/patient-public-involvement/).
  - If necessary, assistance with patient engagement is available through the WOO Network (WOONetwork@oicr.on.ca)

1.6 Full Submissions

Full Submissions are to be submitted to WOONetwork@oicr.on.ca using the below listed documents. Documents will be provided once concepts are prioritized.

- **WOO_2023 Portfolio_FA_Form I_Summary**
- **WOO_2023 Portfolio Trials_FA_Form II_D/M**
- **WOO_2023 Portfolio Trials_FA_Form III_Budget**
- **WOO_Protocol_Template**

Executive summary: Using **Form I**, provide an executive summary of the WOO trial, including the information below. Form I will become a schedule to the award agreement. It may also be used for communication to OICR's administrative, scientific and patient stakeholders.

- *Lay summary:* Using simple terms and plain language, develop a lay summary that can be used for communications to public audiences. The lay summary should outline the research question, what the trial will do to answer the question, what will be measured, why the findings matter, and how the findings will be used. The summary should outline the potential benefit to patients/impact on the field.
- *Background and rationale*: Describe the study background, rationale, and specific hypothesis. Include information of the agent and its safety profile. Outline how the study fits into the goals and focus of the WOO Network. Explain the study's "path to clinical impact"

(e.g., what are the potential future neoadjuvant or adjuvant studies if the WOO study is positive)

- *Study synopsis*: Provide a brief study synopsis which includes study design, objectives, endpoints (biological: primary, secondary), patient population, and sample size. Note that a penultimate protocol (created together with partner site co-investigators, patient partners, and reviewed by industry farmers must be submitted as part of the Full Submission. The WOO Network protocol template must be used.
- *Translational biomarker investigations*: Summarize the biomarker analyses and their significance to the study.
- *Patient partnership plan*: By the full submission, a dedicated PP should be identified, have met with the trial team, and provided feedback on the trial protocol. For the full submission, summarize progress to date, and outline the patient partnership plan throughout the trial implementation. This would include the planned process for work on any patient-facing communications. Note that progress against the patient partnership plan will be part of biannual reporting.
- *Study drug plan:* Outline a clear study drug plan, including access to study drug, its storage, labelling (e.g., by industry partner, pharmacy of PI institution, or third-party service provider), and distribution to study sites. This must be reinforced through a Letter of Support from industry partner including availability timeline and confirmation of timeline. Where applicable, the letter should confirm timely provision of a Letter of Cross Reference.

Deliverables and milestones (D/M): using **Form II**, include D/M which will allow tracking of trial timelines and progress. In situations where trials are not progressing towards achievement of deliverable or accruing on target, PI will be expected to meet with the Network Co-leads to outline a remediation plan that supports study success.

D/Ms must include but are not limited to:

- Executed agreement with industry partner
- Ethics submission and approval
- Study activation (lead site)
- First patient accrued (lead site)
- Site activation (participating sites)
- First patient accrued (partner sites)
- Interim analysis (if applicable)
- Meetings of the Data Safety Monitoring Board
- meetings of the Trial Steering Committee
- Last patient accrued (lead site)
- Last patient accrued (participating sites)
- Correlative sample collection (start)
- Correlative sample collection (end)
- Correlative sample analysis
- Study lock
- Clinical data analysis

Budget: Use **Form III** to complete the budget request details. Submit in Excel format.

Successful WOO trials will be funded to a **maximum of $400,000 CAD.** The total budget should represent the OICR contribution. Additional contributions committed from other funding sources or collaborators should be included as co-funding (use Co-funding Worksheet). Line-item descriptions must be brief. Line-item justifications are required and should provide a high-level explanation of the expenses and how they are calculated. Note that through a partnership

between OICR and OCOG, $50,000 will be provided to OCOG for trial oversight and management.

Attachments: The following documents should be attached to the submission:
- *Figures and tables*: in PDF format
- *References*: in PDF format.
- *Protocol:* attach penultimate protocol, in word format, that has been reviewed and approved by all partner site co-investigators, patient partners and industry partner
- *Letters of Support:* submitted as one PDF

2. REVIEW

2.1 Concept review

Information collected in the Concept Form, will allow the WOO EX to review it for fit against key criteria and readiness to present at the upcoming WOO Network meeting. Where necessary, concept PI's will be provided with feedback to support concept improvement and prioritization success.

During the Network Meeting, lead investigators will present their concept. This will be followed by a discussion period with the aim of identifying potential improvements or the involvement of additional provincial cancer centres.

At the end of the Network Meeting, during a closed session, the WOO SC will prioritize concepts based on the criteria below.

Programmatic:
- Relevant question being addressed
- Appropriate study design (early-stage treatment-naïve or early recurrent disease; presurgical study with biological focus) that will not impact surgical wait times or standard of care treatment
- Aligned with Network's focus
- Primary goal is to investigate agent mechanism of action and associated tumour and immune response biomarkers and not clinical focus on efficacy

Feasibility:
- Study is brief in nature and can complete patient accrual within two years
- Available patient population to support accrual with minimal impact from competing trials
- Industry-partner commitment for study agent with an established drug safety profile

Capacity building:
- Study is multi-site to support timely patient accrual
- Has strong, engaged leadership (surgeon led or co-led together with oncologist)
- Has a sound patient partnership plan (or is willing to work on one together with OICR's PFAC)

Following the meeting, results will be communicated to applicants. Concepts prioritized for protocol development and full submission will be provided with a summary of details discussed during the closed session.

During the period of protocol development, prior to Full Submission, members of the WOO EX will meet with the PI and team to support protocol development, including aspects of the correlative/biomarker investigation, and statistical development. The PI will also meet with the identified PP who will review and provide guidance regarding patient acceptability and feasibility, and patient-facing communications.

2.2 Full Submission review

The PI will receive the SC feedback on their concept, for incorporation into their Full Submission, which will be reviewed by the EX and PP, with constructive feedback provided to the PI through a collaborative process.

3. NOTIFICATION OF AWARDS

Submissions recommended for funding will receive a Notice of Award outlining necessary steps to accept the award and establish a funding agreement.

4. ESTABLISHMENT OF AGREEMENTS

OICR will establish a funding agreement with the institution of the PI (Lead Institution). The agreement will cover the general principles regarding terms and conditions for disbursement of funds, agreements with third-party funders, financial and progress reporting, and intellectual property ownership.

5. REPORTING REQUIREMENTS

5.1 Financial and operational status reporting

The following schedule (Table 1) will be used for financial and operational status reporting. Note that the deadlines indicated are moved to the next business day if they fall on a non-working day. A quarterly reporting template and instructions will be available on the OICR online financial reporting system, CaAwardNet.

Financial Officers will be required to provide quarterly updates on budget versus actual expenditures as per the table below.

Table 1: Financial and operational status reporting

Period covered	Responsible party and action	
	Financial Officer	PI (or designate)
Q1 Apr-Jun	Quarterly financial report: ***Due Jul 31***	Review and submit quarterly financial operational/narrative report: ***Due Jul 31***
Q2 Jul-Sep	Quarterly financial report: ***Due Oct 31***	Review and submit quarterly financial operational/narrative report: ***Due Oct 31***
Q3 Oct-Dec	Quarterly financial report: ***Due Jan 31***	Review and submit quarterly financial operational/narrative report: ***Due Jan 31***
Q4 Jan-Mar	Quarterly financial report: ***Due Apr 30***	Review and submit quarterly financial operational/narrative report: ***Due Apr 30***
Q1-Q4 Apr-Mar	Annual fiscal year financial report: ***Due May 31***	Review and submit fiscal year financial report: ***Due May 31***

5.2 Progress/Key Performance Indicator (KPI) reporting

All OICR supported studies are included in the reporting process as required by the Government of Ontario according to the schedule below (Table 2). Note that the deadlines indicated are moved to the next business day if they fall on a non-working day.

Table 2: Progress/KPI Reporting

Period covered	Responsible party and action
Q1 - Q2 (Apr - Sept)	PI (or delegate) completes and submits a Biannual Progress Report, including status updates on patient accrual and D/Ms: ***Due Nov 15***
Q3 - Q4 (Oct - Mar)	PI (or delegate) completes and submits Biannual Progress Report, including status updates on patient accrual and D/Ms: ***Due May 15***
Q1 - Q4 (Apr - Mar)	PI (or delegate) completes quantitative KPI report using ReportNet (OICR's online KPI reporting system): ***Due Apr 30***

6. ACKNOWLEDGEMENT AND RECOGNITION OF SUPPORT

All investigators must acknowledge and credit the contribution/support, in whole or part, of OICR and the Government of Ontario to the projects in any promotional material, including, without limitation, scientific publications of whatever nature or kind, and in any communication materials or publications supported by OICR funding by referencing the projects with the following statement: "This study was conducted with the support of the Ontario Institute for Cancer Research through funding provided by the Government of Ontario. The views expressed in the publication are the views of the authors and do not necessarily reflect those of the Government of Ontario."

7. CONTACT INFORMATION

WOONetwork@oicr.on.ca