PCHRD Administrative Order No. 22-001

Series of 2022

Subject: Guidelines on the Implementation of PCHRD's Intellectual Property Protection and Management of Health Research Outputs Program (IPROTECH Program)

I. Rationale

As a government funding agency and sectoral planning unit under the Department of Science and Technology (DOST), the Philippine Council for Health Research and Development (PCHRD) primarily functions to coordinate and monitor health research activities in the country. The Council also monitors the outputs or intellectual properties (IPs) generated from these health researches and ensures that these outputs are properly utilized and made available to intended users both locally and internationally.

PCHRD has established consortia in all regions of the country. The Regional Health Research and Development Consortia (RHRDC) has a total of 439 research and development institutions (RDIs) or consortia members to date. Despite this, only a few member institutions are filing for IP applications. To identify gaps in the IP management system of the consortia, PCHRD through its Intellectual Property and Technology Management (IPTM) unit conducted an IP survey in 2019. Among the 133 (30.30%) respondents, only 66 (15.03%) RDIs have an existing IP policy. A total of 77 (17.54%) RDIs responded that they need assistance in drafting and refining their IP Policies and 74 (16.76%) RDIs are planning to draft their own IP Policies. In addition, only 42 (9.57%) RDIs have technology transfer offices in place and only 24 (5.47%) RDIs have technology business incubators (TBIs).

To address these gaps and to strengthen the country's IP portfolio in the field of health, PCHRD created the Intellectual Property Protection and Management of Health Research Outputs Program or **IPROTECH Program**. This program aims to provide IP-related services to PCHRD RHRDC members that have successfully generated IPs in the field of health. Services under the program range from development of institutional IP policies to IP protection and technology licensing assistance.

II. Objectives

Generally, the IPROTECH Program aims to provide IP-related services and assistance to PCHRD RHRDC members to help them protect, commercialize, and manage their health innovations. Specifically, the program aims to assist eligible RDIs in:

(a) Developing their own institutional IP Policies in accordance with RA 10055 and the DOST IP Policy;

(b) Securing protection for their health IPs;

(c) Establishing institutional technology transfer processes;

(d) Securing valuation and freedom-to-operate (FTO) reports; and

(e) Drafting licensing agreements.

III. Services/assistance offered

Under the IPROTECH Program, the following assistance may be requested:

(1) Development of an institutional IP policy – Proposals under this category may include capacity-building activities aimed at improving the institution's awareness and appreciation of the Philippine Technology Transfer Act of 2009 (RA 10055) and DOST IP Policy. RDIs may invite their own resource speakers. PCHRD may also suggest potential resource speakers upon request of RDIs. Expected output is a drafted institutional IP Policy or an improved institutional IP Policy that is aligned with RA 10055 and DOST IP Policy.

(2) Establishment of institutional technology transfer processes – Assistance in establishing institutional technology transfer protocols is also provided under the program. RDIs may select their own mentors or request for recommendations from PCHRD. Expected output is a drafted institutional technology transfer protocol.

(3) Securing IP protection – RDIs belonging to PCHRD's RHRDC with health innovations may apply for IP protection assistance. PCHRD may provide assistance in the filing of patent, utility model, PCT, NPE, trademark, industrial design, and copyright applications. Duly signed and notarized MOA with corresponding LIB, Research Agreements and Research Collaboration Agreements will be required.

(4) Securing IP valuation and FTO reports – PCHRD may also assist RHRDC members in obtaining valuation and FTO reports for their health innovations prior to commercialization. RDIs may seek recommendations for firms from PCHRD.

(5) Drafting licensing agreements – Proposals under this category may include payment for legal services pertaining to the review and drafting of licensing agreements.

IV. Program guidelines

Approval of proposals and project implementation shall be based on the following guidelines:

(1) Only health innovations generated by PCHRD RHRDC members may be protected/applied under the program. Project funds cannot be used to pay

for application fees of non-health technologies and technologies that were **NOT** generated through DOST and PCHRD funds.

(2) Proposals may include requests for two or more IP-related services as described in Section III.

(3) Project duration is limited to 12 months. Extension may be requested and approved provided that the reason for extension is justified/acceptable. Projects may only be extended twice and the total extension period must not be more than 12 months.

(4) Project funding is capped at PhP 3M. Fund requests above PhP 3M but less than PhP 5M may be requested but approval is subject to further evaluation by the Council. Proposals with fund requests amounting to PhP 5M and above are subject to the approval of the PCHRD Governing Council and DOST EXECOM.

(5) Line-Item Budgets (LIBs) may only be realigned thrice. Requests for additional funding, creation of new expense items, and other changes to the LIB are subject to PCHRD's approval.

(6) Project reports and deliverables should be submitted according to the timelines stipulated in the Memorandum of Agreement to be executed upon approval of the proposal.

(7) Charging of expense items under equipment outlay is not allowed.

V. Application guidelines and requirements

To avail of grants/assistance under the program, interested applicants are advised to observe the guidelines and submit the requirements listed below:

1) Submission of a non-R&D proposal using **DOST Form 3** with a corresponding Line Item Budget using **DOST Form 4**.

The proposal should be accompanied with the following attachments:

- Letter of intent (signed by the agency head);
- Workplan (**DOST Form 5**)
- Curriculum vitae of project leader;
- Brief description of team composition and each project staff's role in the project implementation.

- <u>For IP protection requests:</u>

  1) Photocopy of duly signed and notarized project MOA (where the technology was generated) with corresponding terminal audited LIB;

  2) Photocopy of duly signed and notarized research agreement;

3) Photocopy of duly signed and notarized research collaboration agreement (if any);

4) Accomplished invention disclosure form and/or PCT/NPE questionnaire (whichever is applicable);

5) Technology commercialization plan/roadmap;

6) Publications or any public disclosure made pertaining to the technology;

7) Terminal reports;

8) List of technologies that will be protected with corresponding project titles where the technology was generated and their respective funding agencies;

- For local/international FTO requests:

1) IP applications;

2) Photocopy of duly signed and notarized research agreement;

3) Photocopy of duly signed and notarized research collaboration agreement (if any);

4) Photocopy of duly signed and notarized project MOA (where the technology was generated) with corresponding terminal audited LIB;

5) Technology commercialization plan/roadmap;

6) Terminal reports;

7) List of technologies with corresponding project titles where the technology was generated and their respective funding agencies.

- For valuation requests:

1) IP applications;

2) Photocopy of duly signed and notarized research agreement;

3) Photocopy of duly signed and notarized research collaboration agreement (if any);

4) Photocopy of duly signed and notarized project MOA (where the technology was generated) with corresponding terminal audited LIB;

5) Technology commercialization plan/roadmap;

6) Terminal reports;

7) List of technologies with corresponding project titles where the technology was generated and their respective funding agencies;

8) Commercialization-related documents (term sheets, sales reports, etc.)

2) All proposals should be submitted through PCHRD's Project Management System (PMS) portal with the IPROTECH Program as Grant type. All required attachments should also be uploaded to the PMS portal.

VI. Expected Outputs

Services or assistance described under Section III shall have the following expected outputs:

1) Development of an institutional IP policy - drafted institutional IP Policy or an improved institutional IP Policy that is aligned with RA 10055 and DOST IP Policy

2) Establishment of institutional technology transfer processes - drafted institutional technology transfer protocol

3) Securing IP protection – filed patent, utility model, PCT, NPE, trademark, industrial design and copyright applications; filing particulars with application numbers

4) Securing IP valuation and FTO reports – valuation reports with final weighted values; FTO reports

5) Drafting licensing agreements – drafted licensing agreements

VII. Other provisions

All pertinent forms stated herein are hereby attached and made part of this Administrative Order (AO).

Guidelines in hiring project personnel shall follow Section XI. Hiring of Project Personnel/Nature of Appointment of the Revised DOST-GIA guidelines.

PCHRD shall be properly acknowledged in all promotional materials that will be made and released concerning the outputs of the projects supported under this program.

Other pertinent guidelines related to grant application, project monitoring, grant administration and discontinuance not mentioned above must also be in accordance with the revised DOST-GIA guidelines.

All pertinent forms stated herein are hereby attached and made part of this Administrative Order (AO).

VIII. Effectivity

This Administrative Order shall take effect immediately.

Approved by:

JAIME C. MONTOYA, MD, MSc, PhD, CESO II
Executive Director III, PCHRD

All pertinent forms stated herein are hereby attached and made part of this Administrative Order (AO).

VIII. Effectivity

This Administrative Order shall take effect immediately.

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JAIME C. MONTOYA, MD, MSc, PhD, CESO II
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