

DESIGN A BIOBANKING ECOSYSTEM

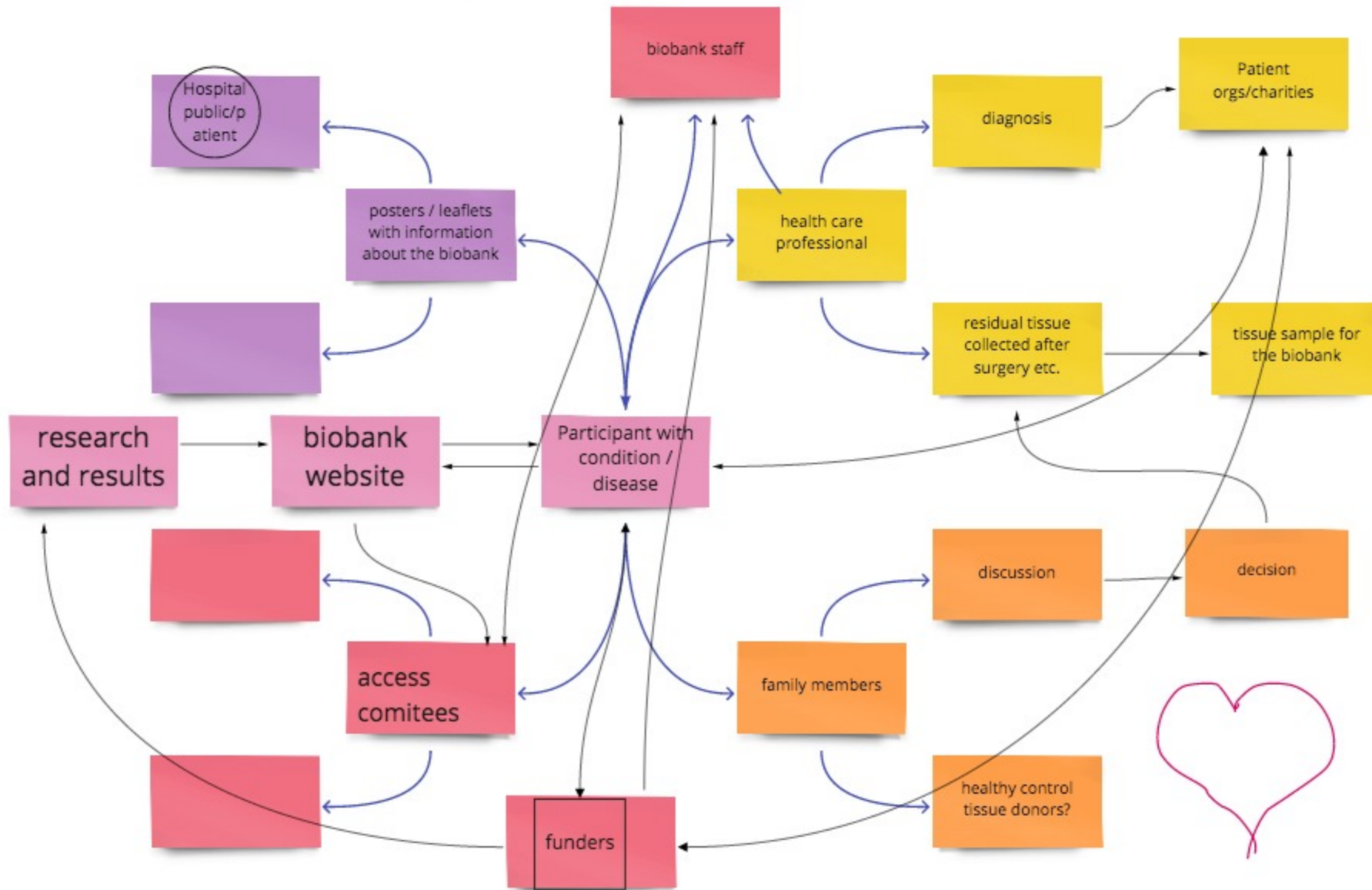
If we were starting from a blank canvas, how would we design the biobanking ecosystem in the UK? What features would we want to allow fair access for all? How would the landscape work for patients, biobanks and researchers? What would sample collection, consent and access look like if redesigned? Who collects and how? How do we decide who gets the samples?

In this exercise, breakout groups decided how the ecosystem would be organised from the point of view of a given actor:

- sample donor
- academic researcher
- biobank
- commercial researcher
- funder



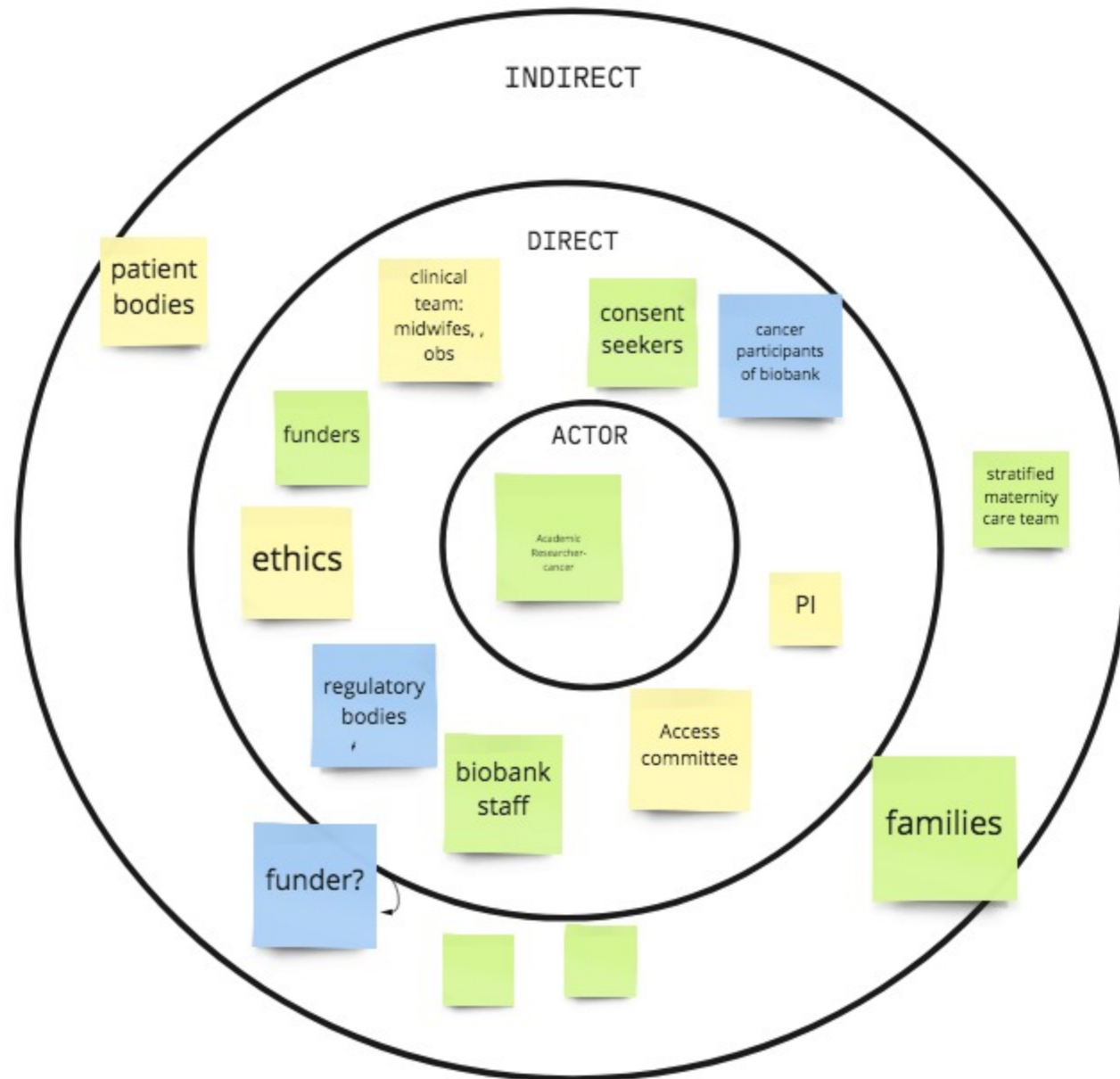
DONOR



What do we think?

- Good that they have key points of communication
- Good that the healthcare staff and biobank are independent from each other
- Seems messy but they are mostly interacting with a few actors

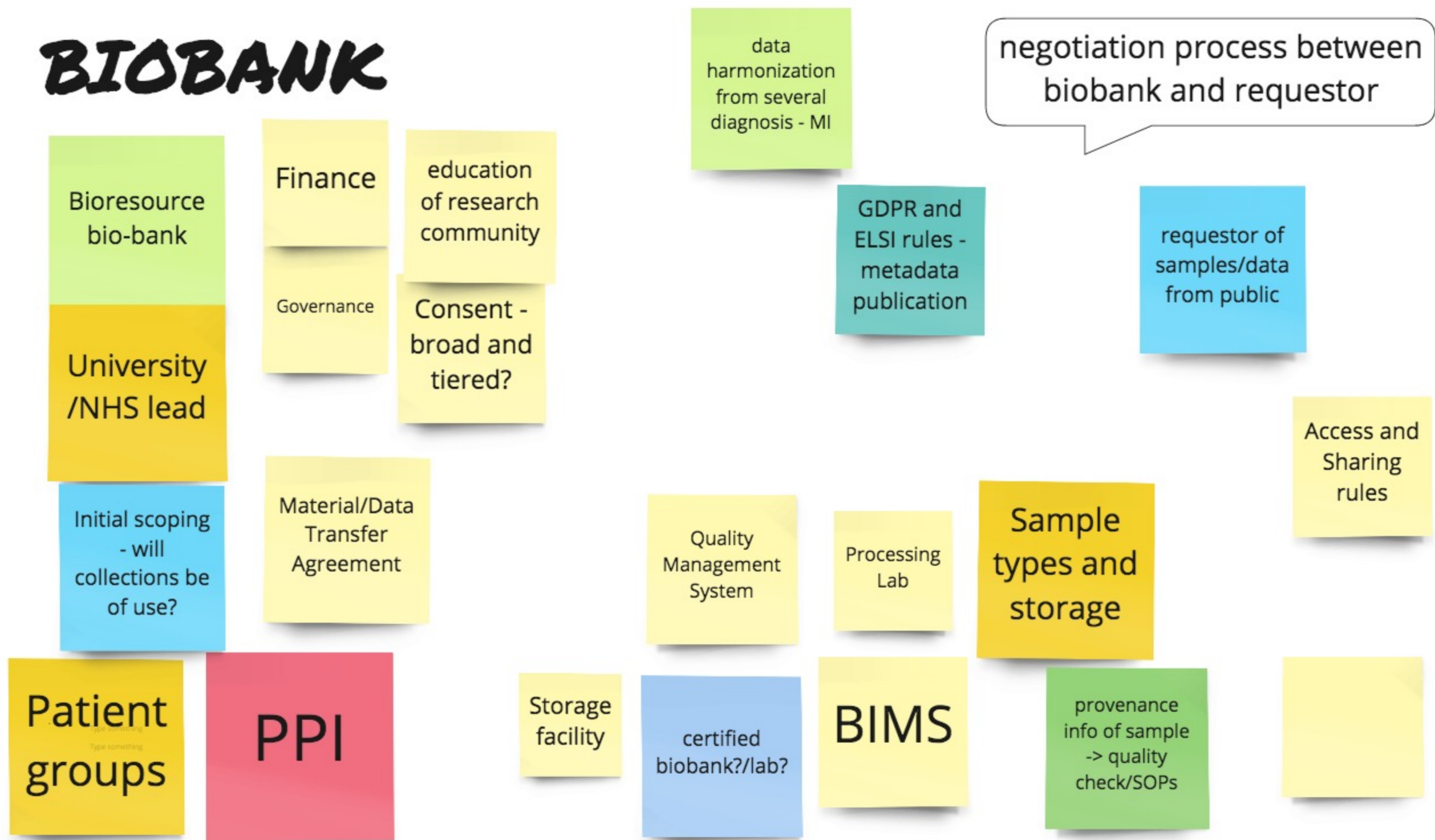
ACADEMIC RESEARCHER



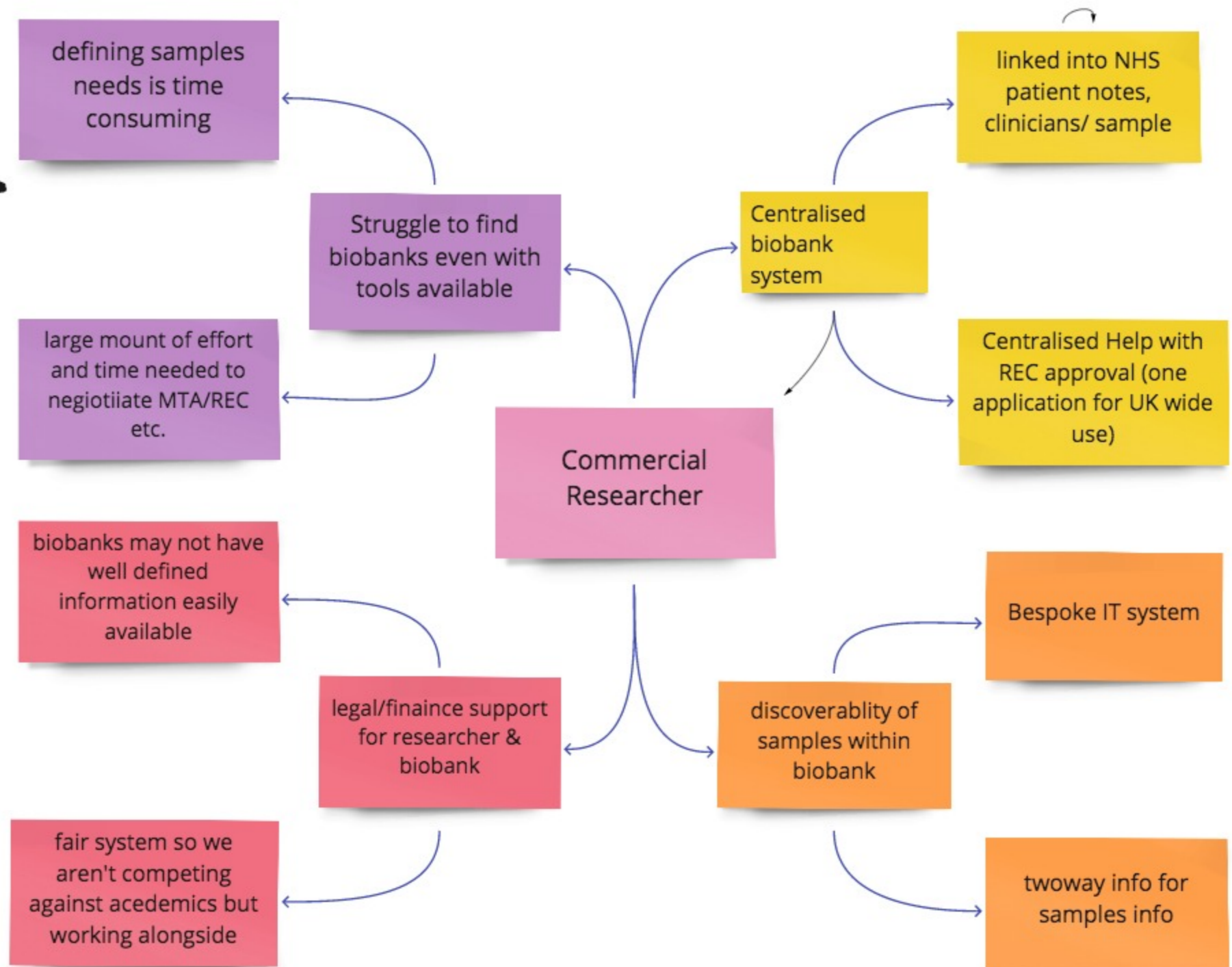
Academic researcher: cancer

- quality and reproducible research- fitness for intended purpose
- Funding
- sourcing
- lack of harmonised systems
- lack of harmonised pricing
- affect on quality Vs. value for money
- Customer relations and understanding the market that the BB serves.
- Issues with agreements/contractual requirements/IP ownership
- funders requirements introduced early on may encourage best practise, enable equality of use.
- funders enabling formal networks for better use, better expenditure
- post- funding-where will the samples be located? business plans?
- access to smaller disease groups: -visibility
- 'hogging' of material locally?

BIOBANK



COMMERCIAL RESEARCHER



FUNDER

