

# HTA and Innovative Technologies Forum

Report

February 2014

Produced by the Institut national d'excellence en santé et en services sociaux

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This publication was written and edited by the Institut national d'excellence en santé et en services sociaux (INESSS).

An electronic version of this document is available on the INESSS website in the *Networks and Partnerships* section.

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# TABLE OF CONTENTS

1	A COMMITTEE AND FORUM TO ADDRESS A CONTEMPORARY ISSUE.....	1
2	A DYNAMIC FORMAT .....	2
3	AN INCLUSIVE EVENT .....	3
4	SATISFIED PARTICIPANTS .....	4
5	DIFFERENT PERSPECTIVES, ONE FORUM .....	5
6	CHALLENGES: SHARED, ORGANIZED AND PRIORITIZED.....	7
6.1	THE VISION UNDERLYING HTA: CHALLENGES .....	7
6.2	APPRECIATING INNOVATIVE TECHNOLOGIES IN THEIR APPROPRIATE CONTEXTS: CHALLENGES	7
6.3	THE HEALTH AND SOCIAL CARE NETWORK'S CAPACITY TO ADOPT INNOVATIVE TECHNOLOGIES: CHALLENGES .....	8
7	POTENTIAL SOLUTIONS: PROPOSED, DEBATED AND INNOVATIVE .....	9
7.1	THE VISION UNDERLYING HTA: POTENTIAL SOLUTIONS.....	9
7.2	APPRECIATING INNOVATIVE TECHNOLOGIES IN THEIR APPROPRIATE CONTEXTS: POTENTIAL SOLUTIONS .....	9
7.3	THE HEALTH AND SOCIAL CARE NETWORK'S CAPACITY TO ADOPT INNOVATIVE TECHNOLOGIES: POTENTIAL SOLUTIONS.....	10
8	SETTING THE STAGE FOR ACTION .....	11
APPENDIX 1		
	Program.....	15



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# 1 A COMMITTEE AND FORUM TO ADDRESS A CONTEMPORARY ISSUE

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A source of hope for many Quebecers, health innovation is an emerging topic that many people are passionate about and that presents a challenge to the sustainability of the health system and the principle of fairness the system is based on. Through its mission, INESSS is directly involved in innovative technologies, but it cannot fulfill its role without the contribution of concerned stakeholders. It is with this in mind that the Institut assembled an advisory committee on HTA and innovative technologies. Over the past year, committee members have worked together to promote a common understanding of the challenges of introducing innovative technologies and identify possible solutions to optimize innovation assessment strategies. This work has led to the inaugural HTA and Innovative Technologies Forum – *Better Innovation Through Assessment*, held December 3, 2013, in Quebec City. The event invited patients, technology users, government actors, clinicians, researchers, healthcare managers, and representatives from the pharmaceutical, biomedical and information technology industries to join the discussion.

Working closely with its partners, INESSS set a number of specific objectives with the day's agenda:

- Present the work of the advisory committee on HTA and innovative technologies.
- Discuss the various challenges addressed by the advisory committee with a larger audience and encourage greater dialogue with the various stakeholders.
- Discuss the challenges associated with assessment and the role of assessment throughout the lifecycle of a technology.
- Find, together, potential solutions to better assess innovative technologies and use assessment to better integrate them.
- Explain the concepts and processes related to assessment and increase dialogue about them.
- Identify new challenges to be addressed by the advisory committee.
- Create a summary of guiding principles to be used to assess initiatives presented at the Québec International forum the next day. These guiding principles will pertain to the demonstration of added value and key stages of assessment.

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## 2 A DYNAMIC FORMAT

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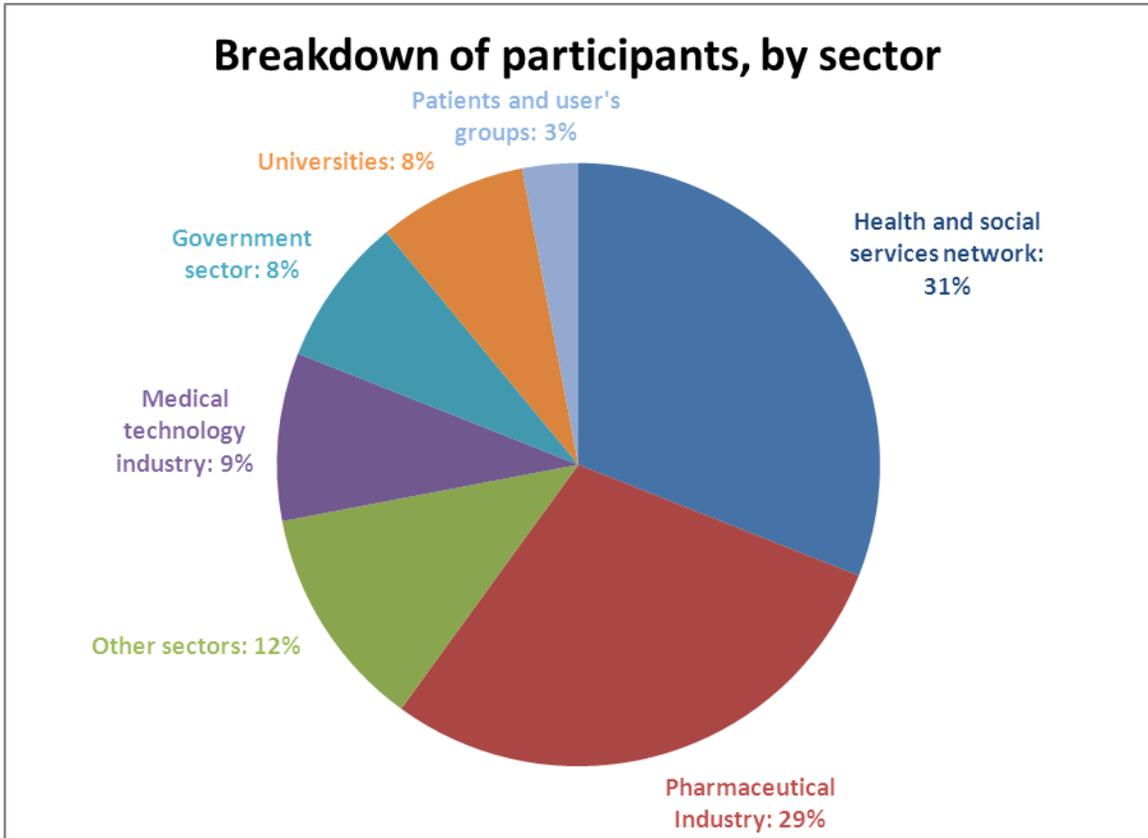
The Forum's objectives could not have been achieved without first establishing a common language to describe HTA and innovative technologies and ensuring the active participation of the stakeholders in attendance. To this end, the day's agenda included presenting the scientific and conceptual evidence behind health technology assessment as well as maximizing high-quality discussions among participants. Accordingly, conferences, panels and workshops alternated throughout the day. The complete schedule can be found in the appendix. Finally, innovation was not only the central theme of the day, it was also employed in the form of an interactive tool used to collect comments and survey those in attendance on specific questions.

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### 3 AN INCLUSIVE EVENT

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INESSS attracted 242 participants from the worlds of HTA and innovative technologies to this inaugural forum. By drawing 31% of participants from the health and social services network, 29% from the pharmaceutical industry, 9% from the medical technology industry, 8% from government sectors, 8% from universities, 3% from patient and user associations and 12% from other sectors, INESSS clearly demonstrated its role as a catalyst.



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## 4 SATISFIED PARTICIPANTS

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The results of a participant survey indicated a very high level of satisfaction with the event. Some of the most highly rated elements were the opening and closing conferences, the first panel, the group leadership (animation) and the participant guide. Participants also liked the workshop format and many praised the Forum for providing an opportunity for open discussion and shared perspectives.

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## 5 DIFFERENT PERSPECTIVES, ONE FORUM

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The inaugural HTA and Innovative Technologies Forum gathered the perspectives of various stakeholder groups to produce a day of high-quality discussions. This report summarizes these discussions and highlights the primary topics discussed in relation to the challenges and potential solutions associated with HTA and innovative technologies.

As a complement to the periods of open discussion, conferences helped establish the context, present HTA initiatives and summarize what was said over the course of the day:

- Opening speech: [Le positionnement institutionnel de l'INESSS sur l'évaluation des innovations](#), Dr. Juan Roberto Iglesias, President and CEO, INESSS
- Opening conference: [Évaluer pour mieux innover, l'INESSS et son écosystème](#), Dr. Reiner Banken, Advisor to the President and CEO, Alliances and Networks, INESSS
- Lunch conference: [Revue d'initiatives d'avant-garde internationales](#), Dr. François Meyer, Advisor to the President, International Affairs, Haute Autorité de Santé, France
- Closing conference: [Évaluer pour mieux innover : place à l'action](#), Dr. Véronique Déry, Chief Scientist, INESSS

The discussions held throughout the day helped identify and prioritize the challenges and potential solutions for HTA and innovative technologies and, despite their different perspectives on the subject, all participants highlighted one element in particular: **the crucial role patients must play in every step of the innovation and assessment process.**

In addition to providing an opportunity for discussion and debate, the Forum aimed to be a catalyst for change in the world of HTA and innovative technologies. With this in mind, at the end of the day, influential stakeholders from the field were invited to present their organization's commitment to taking concrete action on the topics discussed throughout the day:

- Luc Castonguay, Assistant Deputy Minister, Direction générale de la planification, de la performance et de la qualité, MSSS
- Juan Roberto Iglesias, President and CEO, INESSS
- Paul Lirette, President, GlaxoSmithKline Canada
- Teresa Mattarelli, Vice President and General Manager, Covidien Canada

## **Commitments**

### **MSSS:**

- Take an active role in government innovation initiatives
- Get involved in innovative technology demonstration projects to facilitate their implementation
- Take advantage of current MSSS initiatives to facilitate access to data and health technology assessment:
  - Combine databases to facilitate the evaluation of health and social service findings and the chronological follow-up of the continuum of care
  - Present challenges to the *Table de concertation sur la performance*

### **GlaxoSmithKline:**

- Explore strategies involving targeted therapeutic agents (in the field)
- Commit to value-added life-saving medicines in partnership with local payers
- Pursue a pilot project on the Living Labs initiative for targeted groups of oncology patients, etc.

### **Covidien:**

- Interact proactively with the needs of local, provincial and national sectors
- Respond to demands from local, provincial and national authorities to generate evidence
- Take an active role in global committees to develop clinical trial strategies
- Within MEDEC, have the Value of Technology Committee of the Board of Directors examine the conclusions of the HTA and Innovative Technologies Forum

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## 6 CHALLENGES: SHARED, ORGANIZED AND PRIORITIZED

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### **The audience speaks**

According to the first surveys of the day conducted with the interactive tool, the most important challenges for most respondents were demonstrating the added value of innovative technologies (44%), the economic challenges of implementing innovative technologies (24%), and the quality and availability of evidence (15%). Interestingly, respondents also felt that these three challenges were the most difficult to deal with (as rated by 13%, 11% and 10% of respondents, respectively), proof of the major challenge facing HTA and innovative technologies.

The discussions helped identify a number of the participants' priority issues, which can be organized into three areas: the vision underlying HTA, appreciating innovative technologies in their appropriate contexts and the health and social care network's capacity to adopt innovative technologies.

### 6.1 THE VISION UNDERLYING HTA: CHALLENGES

Health technology assessment is a decision-making tool founded on scientific evidence obtained during the research and development process.

- Some aspects of HTA are not measurable with empirical data, so experiential data, including expert opinions and patient and user experiences, are another key source of information.
- Given the complexity of the aspects to be evaluated, those conducting HTA must be equipped with mechanisms for integrating different perspectives.

### 6.2 APPRECIATING INNOVATIVE TECHNOLOGIES IN THEIR APPROPRIATE CONTEXTS: CHALLENGES

Innovative technologies are characterized by the added value they offer the system. This added value depends on the context, as well as the elements needed for a proper assessment.

- The lifecycle of innovative technologies has a strong influence on what is expected of a given technology, the quantity of evidence available, and methods of assessment.
- Innovative technologies must be assessed in a particular context that includes, among other things, adaptation to change and tolerance for uncertainty, two aspects that are, by definition, closely tied to the innovation process.
- Primary clinical research data obtained during the research and development phase generally provide the basis for recognizing the innovative potential of technologies. This creates a problem when findings obtained under experimental conditions are extrapolated to the

general population targeted by the technology. At the same time, the system currently has a limited capacity to record clinical data in real conditions of practice.

- To be useful in the evaluation process, evidence must line up with evaluation objectives.

### 6.3 THE HEALTH AND SOCIAL CARE NETWORK'S CAPACITY TO ADOPT INNOVATIVE TECHNOLOGIES: CHALLENGES

Innovative technologies may only reach their full potential when they are adopted by the health and social services network and used by clinicians and professionals. Challenges specific to this adoption, some of which are unrelated to assessment challenges, have been identified.

- The network's propensity to adopt innovative technologies, in terms of human, financial and organizational resources, can vary depending on the setting and is a key element in the successful implementation of technologies. Since technologies generate change, it is critical that organizations and the network be able to implement and support change.
- Individual needs are constantly weighed against collective needs, highlighting the importance of fairness in the efficient and optimal use of resources within the population. There is a dynamic balance between access to innovative technologies and benefits to patients and the system.
- Even when innovative technologies have recognized value, economic issues can slow their integration into the healthcare system, with high cost the most commonly cited example. Furthermore, identifying the true cost of care and services is a complex exercise so it is difficult to accurately determine the opportunity costs and benefits of using an innovative technology.
- The healthcare system's current organization and funding scheme make it somewhat challenging to develop technology and adopt and integrate innovative technologies into the system.

#### **The audience speaks**

After discussing the various challenges, participants were once again asked to use the interactive tool to vote on which proposed actions would most likely further the discussion. Two challenges were thus identified as priorities: 1) A definition of assessment and integration processes and criteria that is adapted to innovative technologies, including adaptability to change (30%) and 2) The establishment of a dynamic balance between access to innovative technologies and benefits to the system (opportunity costs, follow-up tools) (30%).

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## 7 POTENTIAL SOLUTIONS: PROPOSED, DEBATED AND INNOVATIVE

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### **The audience speaks**

As they were for challenges, before the discussion on potential solutions began, participants were surveyed on which ones they thought were most important and easiest to implement. The development of partnerships appeared to be the most important solution (27%) as well as the easiest to implement (35%), while the establishment of more flexible and more suitable evaluation mechanisms was identified as an important potential solution (25%) that respondents felt was more difficult to realize (15%).

In the afternoon, participants were asked to discuss potential solutions; these were grouped under the same headings as the challenges presented in the morning.

### 7.1 THE VISION UNDERLYING HTA: POTENTIAL SOLUTIONS

HTA: a dynamic process of co-construction developed with input from all involved stakeholders.

- Patients are central to every step of the HTA process and the use of deliberative approaches would help them get more involved.
- A collaborative assessment process is founded on early dialogue between the various stakeholders and partnerships as a platform for integrating different perspectives.
- This definition requires changes in culture and practices in all settings and it is vital that HTA be seen as a tool for promoting innovative technologies.

### 7.2 APPRECIATING INNOVATIVE TECHNOLOGIES IN THEIR APPROPRIATE CONTEXTS: POTENTIAL SOLUTIONS

Innovative technologies are promoted when the various stakeholders involved recognize the added value of technologies.

- To establish a common foundation for the assessment and adoption of innovative technologies, there must be a consensus on the definition of the elements of value.
- Given that the added value of innovative technologies can change over time and that uncertainty is inherent to innovation, it is suggested that assessment and integration processes and criteria be adaptable.
- To be truly useful, evidence needed for evaluation must line up with clear, predefined objectives; the partnerships mentioned above are key drivers of this exercise.
- There comes a time in the lifecycle of a technology when it no longer demonstrates added value; therefore, there should be obsolescence management mechanisms for these technologies to encourage promising innovations.

- Innovative technology use could be tracked with the help of information systems, increasing the quality and availability of evidence.
- Consulting the work of other HTA agencies and data generated elsewhere could increase the pool of information for assessment and decision-making.

### 7.3 THE HEALTH AND SOCIAL CARE NETWORK'S CAPACITY TO ADOPT INNOVATIVE TECHNOLOGIES: POTENTIAL SOLUTIONS

For network stakeholders to make widespread use of an innovation, the technology must be capable of meeting the needs identified and there must be specific measures encouraging its adoption and integration.

- There must be mechanisms in place to identify network needs; calls for tender were mentioned as a tool for pinpointing them and encouraging the development of technologies more likely to be used. At the same time, there should be greater awareness of the population's health needs and preferences.
- The role of agreements was discussed because the introduction of innovative technologies involves sharing benefits as well as risk among manufacturers, patients and the health system. Some stakeholders favoured this avenue as an incentive to implement technologies with a high degree of uncertainty.

#### **The audience speaks**

Working with the potential solutions identified during workshops and shared during plenary sessions, participants discussed which ones seemed most likely to change the status quo. For their top choice, respondents unreservedly identified the production of clear evaluation guidelines and the use of early dialogue and multiple meetings (46%). The second most popular solution was to establish a dynamic evaluation process and augment dossiers with data and experience generated in Quebec (28%).

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## 8 SETTING THE STAGE FOR ACTION

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Although it was the culmination of the first year of the advisory committee on HTA and innovative technologies, the Forum was not an end unto itself, but a springboard for continued discussion and concrete follow-up actions. Certain elements from the December 3 event have thus emerged to provide a basis for the next steps to be taken. The role of patients as key stakeholders in every phase of the evaluation and innovation process is definitely a core element; others are the development of stable partnerships for integrating various perspectives and the establishment of specific methods for ensuring the quality and availability of evidence. Overall, the discussions and proposals from this inaugural forum focussed on implementing a more dynamic assessment process better suited to the particularities of innovative technologies. This will guide the work plan of the committee on HTA and innovative technologies for the coming year and, together, the members will select a collaborative project for bringing these ideas to fruition.

INESSS has made some firm commitments and set a December 2014 deadline for realizing them. Firstly, INESSS plans to adapt its HTA practices to the innovation context by reviewing the assessment process for adding drugs to the lists of medications and organizing pre-consultations on the process to gain a better understanding of major therapeutic advances. It will also activate and start using an assessment framework for interdependent technologies, a framework to consult patients, users and citizens, and finally a framework to consult manufacturers on the production of notices and guides.

INESSS hopes that these actions, along with those undertaken by the committee, will help solve the challenges of HTA and innovative technologies.

# ACKNOWLEDGMENTS

The inaugural HTA and Innovative Technologies Forum – *Better Innovation Through Assessment* was made possible through the involvement of many people. INESSS sincerely thanks all contributors, near and far.

## **The members of the advisory committee on HTA and innovative technologies for their significant contribution to current discussions:**

Frédéric Alberro*, Rx&D	Michèle Houpert*, Ministère des Finances et de l'Économie
Gaétan Barrette, Fédération des médecins spécialistes du Québec	Nicolas Hoffman, Fonds de recherche du Québec
Reiner Banken, INESSS	Martin Labelle, Fédération des médecins omnipraticiens du Québec
Renaldo Batista, Fonds de recherche du Québec	Gaétan Lamy, Agences de la santé et des services sociaux
Denis Bélanger, Canadian Agency for Drugs and Technologies in Health	Benoit Larose, MEDEC
Jean Belzile, Ministère de l'Enseignement supérieur, de la Recherche, de la Science et de la Technologie	Richard Lavoie, INESSS
Pierre Blain, Regroupement provincial des comités des usagers	Luigi Lepanto*, Association québécoise d'établissements de santé et de services sociaux
Luc Bouchard, Association québécoise d'établissements de santé et de services sociaux	Carole Marcotte, INESSS
Sylvie Bouchard, INESSS	Mireille Mathieu, INESSS
Patrick Boudreault, Association des pharmaciens des établissements de santé du Québec	France Mignault, Rx&D
Diane Côté*, MEDTEQ	André Néron, Bureau facultaire de l'expertise patient partenaire, Université de Montréal
Pierre Dagenais, INESSS	Nathalie Ouimet*, Montréal InVivo
Lise-Ann Davignon, INESSS	Daniel Paquet, Fédération des médecins omnipraticiens du Québec
Paule DeBlois, Regroupement en soins de santé personnalisés au Québec	Geneviève Plamondon, INESSS
Véronique Déry, INESSS	Jean Rousseau, MEDEC
Jean-Pierre Duplantie, INESSS	Dima Samaha, INESSS
Diane Guilbault, INESSS	Michelle Savoie, Montréal InVivo
Claude Guimond, Fédération des médecins omnipraticiens du Québec	Éric St-Gelais, Ministère de la Santé et des Services sociaux
Martin Houle, Ministère de l'Enseignement supérieur, de la Recherche, de la Science et de la Technologie	

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\* Members of the program committee of the HTA and Innovative Technologies Forum – *Better Innovation Through Assessment*

**Forum speakers, panelists and presenters**

Gaétan Barrette, Fédération des médecins spécialistes du Québec  
Reiner Banken, INESSS  
François Bastien, TELUS  
Christian Bellemare, CHUS Hôtel-Dieu  
Alain Boisvert, Bristol-Myers Squibb  
Sylvie Bouchard, INESSS  
Luc Castonguay, Ministère de la Santé et des Services Sociaux  
Diane Côté, MEDTEQ  
Dan Cooper, INESSS  
Pierre Dagenais, INESSS  
Véronique Déry, INESSS  
Vincent Dumez, Bureau de l'expertise patient partenaire, Université de Montréal  
Kim Furlong, Amgen  
Juan Roberto Iglesias, INESSS  
Michelle Laflamme, EMOVI  
Benoit Larose, MEDEC  
Louise Lavergne, Institut de réadaptation en déficience physique de Québec  
Paul Lirette, GlaxoSmithKline Canada  
Luigi Lepanto, Association québécoise d'établissements de santé et de services sociaux  
Carole Marcotte, INESSS  
Teresa Mattarelli, Covidien Canada  
François Meyer, Haute Autorité de Santé, France  
France Mignault, Rx&D  
Marc Osborne, Hoffmann-La Roche  
Gilles Pineau, INESSS  
Marc Rhainds, CHU de Québec  
Sophie Rochon, Pfizer  
Jean Rousseau, MEDEC  
Éric St-Gelais, Ministère de la Santé et des Services Sociaux

**CapCOGITO for its help with the organization, facilitation and logistics of the day**

Paul L'Archevêque  
Carole Jabet  
Myriam Costa

**Quebec International for its help with the organization and logistics of the day**

Éric Beauregard  
Yves Lemeteyer  
Pierre Quirion

**360 Medlink for the interactive communication tool**

Claire Kamoun

Alberto Navas

Manasse Theagene

**INESSS for its help with the preparation and running of the day**

Carole Chamberland

Jayson Gallant

Lolita Haddad

André Jean

Jonathan Moreau

Catherine Safianyk

Hélène St-Hilaire

# APPENDIX 1

## PROGRAM

7:00

**Reception and registration**

8:30

**Opening speech**

INESSS's position on technological innovation  
Dr. Juan Roberto Iglesias, President and CEO, INESSS

8:45

**Presentation of the day's agenda**

Paul L'Archevêque, Senior Partner, CapCOGITO

9:h

**Speech by Québec International**

Health Innovation Week partner  
Carl Viel, President and CEO, Québec International

9:10

**Opening conference**

"Évaluer pour mieux innover : l'INESSS et son écosystème"  
(Better innovation through assessment: INESSS and its ecosystem)  
Reiner Banken, Advisor to the President and CEO, Alliances and Networks, INESSS

9:35

**Panel 1 – Différents acteurs, différentes perspectives... des enjeux communs ?  
(Different stakeholders, different perspectives... common challenges?)**

Gaétan Barrette, President, Fédération des médecins spécialistes du Québec  
Alain Boisvert, Vice-President, Market Access and Public Affairs, Bristol-Myers Squibb (BMS)  
Diane Côté, President and CEO, MEDTEQ, a consortium for industrial research  
Vincent Dumez, Director, Bureau de l'expertise patient partenaire, Université de Montréal  
Louise Lavergne, President and CEO, Institut de réadaptation en déficience physique de Québec  
Marc Rhains, Medical and Scientific Co-Manager of Health technology Assessment (ETMIS) activities, CHU de Québec

10:35

**Refreshment break**

10:55

**Workshop 1 – Les enjeux : Débattons, organisons et priorisons  
(Debating, organizing and prioritizing)**

François Bastien, General Manager, Health, Public and Parapublic Markets, TELUS, and member of the Quebec Network for Personalized Health Care External Advisory Board  
Christian Bellemare, Coordinator, Health Technology Assessment Unit, CHUS Hôtel-Dieu  
Sylvie Bouchard, Director, Follow-up and optimal use, INESSS  
Pierre Dagenais, Director, Quality and Method Support, INESSS  
Kim Furlong, Director, Federal Government Affairs, Amgen  
Benoit Larose, Vice President, MEDEC, Québec  
France Mignault, Director, Government Affairs, Janssen, Québec  
Gilles Pineau, Coordinator, Oncology Assessment Unit, INESSS

12:05

Plenary session revisiting workshop 1

12:35

Lunch conference: “Revue d’initiatives d’avant-garde internationales”  
(A review of international innovative initiatives)

François Meyer, Advisor to the President, International Affairs, Haute Autorité de Santé, France

14:05

Workshop 2 – Les pistes de solution : Débattons, proposons et innovons  
(Debating, proposing and innovating)

Dan Cooper, Senior Scientific Advisor, Pharmacoeconomics, Direction de l’évaluation des médicaments aux fins d’inscription, INESSS

Michelle Laflamme, President and CEO, Emovi

Luigi Lepanto, Director, Health Technology Assessment Unit, CHUM

Carole Marcotte, Director, Direction de l’évaluation des médicaments aux fins d’inscription, INESSS

Marc Osborne, Director, Government Relations and Health Policy, Oncology, Hoffmann-La Roche

Sophie Rochon, Senior Manager, Patient Access and Health Policy, Québec, Pfizer

Jean Rousseau, Director, Health System Solutions business unit, Covidien

Éric St-Gelais, Research and Innovation Coordination and Orientation Advisor, Ministère de la Santé et des Services sociaux (MSSS)

15:15

Plenary session revisiting workshop 2

15:45

Refreshment break

16:00

Panel 2 – Différents acteurs, différentes perspectives... des solutions en synergie ?  
(Different stakeholders, different perspectives... finding solutions in synergy?)

Luc Castonguay, Assistant Deputy Minister, Direction générale de la planification, de la performance et de la qualité, MSSS

Paul Lirette, President, GlaxoSmithKline Canada

Teresa Mattarelli, Vice-President and General Manager, Covidien Canada

Juan Roberto Iglesias, President and CEO, INESSS

16:45

Closing conference: “Évaluer pour mieux innover... place à l’action”  
(Better innovation through assessment... setting the stage for action)

Véronique Déry, Chief Scientist, INESSS

17:05

Speech by Dr. Réjean Hébert, Québec Minister of Health and Social Services and Minister responsible for Seniors

17:30

Cocktail