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What is the Virtual Care Maturity Model?

This model is a self-serve resource developed by Ontario Health to support health care organizations in the adoption, implementation, and maintenance of virtual care. Specifically, this model aims to:

Provide a framework that can be used to measure and compare the virtual care maturity of health care organizations

| Identify opportunities to adopt, implement, and maintain evidence-based virtual care to achieve objectives | Inspire the continuous improvement and growth of virtual care |
|--|---|
| Support the sudden growth of virtual care due to the pandemic | Highlight disparities between different organizations in the health care system |

Virtual Care Definition

Any interaction between patients and/or members of their circle of care, occurring remotely, using any forms of communication or information technologies, with the aim of facilitating or maximizing the quality and effectiveness of patient care. (WCH – WIHV). Refer to page 18 for definitions of other terms used in this model.

Note: This model is strictly a self-serve resource and is not associated with any funding or any reporting requirements for Ontario Health.

What is the Virtual Care Maturity Model?

Virtual care maturity is assessed using six key domains, each broken down into various criteria. This model describes maturity of these domains and criteria along three levels: **basic**, **evolving**, and **advanced**.

| Basic | | 37 ~ (o) |
|---|------------------------|---|
| Domain | Criteria | Basic |
| Virtual Care Options | Modality | One virtual care modality is available for patients and providers |
| for Patients and Providers | Patient Populations | One patient population is supported with virtual care |
| FIGHIERS | Models of Care | Virtual care modalities only have one model of care |
| | Integrated Care | Virtual care is not used to support integrated models of care |
| Patient Centered | Equity | Virtual care is not provided with considerations for reaching groups with barriers to access |
| Design and Delivery of Virtual Care | Patient Education | Virtual care program workflows do not include education for patients around the use of virtual care and how it might benefit them |
| | Service Design | Virtual care program workflows were not designed with patients |
| Commitment to Support Virtual Care | Financial Resources | Limited financial resource commitment for virtual care: one-time funding strategy |
| | Human Resources | Limited human resources to support virtual care |
| | IT Infrastructure | Limited technology and IT personnel are available to support virtual care (software, networking, hardware) |
| Internal Policy & Organization Structure | Governance | Accountability for virtual care is not represented in the organization structure. There is limited governance and departmental sponsorship |
| for Virtual Care | Vision and Plan | No vision or plan for virtual care |
| | Internal Champions | No internal champions for virtual care |
| | Policies and Standards | No virtual care policies or standards |
| Measuring Impact | Evaluation | No evaluation of virtual care outcomes |
| of Virtual Care | Quality Improvement | Evaluation has no impact on the future of virtual care program delivery |
| Utilization of | Data | Virtual care utilization data is limited or not available |
| Virtual Care | Virtual Encounters | Low number of virtual encounters (< 5%) from targeted patient populations across all virtual care modalities |
| | Provider Uptake | Low number of providers (<5%) supporting patients with virtual care, as appropriate to their practice |

The descriptions in the model are designed to be high-level and non-prescriptive to accommodate different types of health care organizations that may vary in size, patient population, and geographic location. Health care organizations can align themselves to the Virtual Care Maturity Model using the Assessment Tool on page 8.

Virtual Care Maturity Model Basic



| Domain | Criteria | Basic |
|---|------------------------|--|
| Virtual Care Options | Modality | One virtual care modality is available for patients and providers |
| for Patients and Providers | Patient Populations | One patient population is supported with virtual care |
| | Models of Care | Virtual care modalities only have one model of care |
| | Integrated Care | Virtual care is not used to support integrated models of care |
| Patient Centered | Equity | Virtual care is not provided with considerations for reaching groups with barriers to access |
| Design and Delivery of Virtual Care | Patient Education | Virtual care program workflows do not include education for patients around the use of virtual care and how it might benefit them |
| | Service Design | Virtual care program workflows were not designed with patients |
| Commitment | Financial Resources | Limited financial resource commitment for virtual care: one-time funding strategy |
| to Support Virtual Care | Human Resources | Limited human resources to support virtual care |
| | IT Infrastructure | Limited technology and IT personnel are available to support virtual care (software, networking, hardware) |
| Internal Policy & Organization Structure | Governance | Accountability for virtual care is not represented in the organization structure. There is limited governance and departmental sponsorship |
| for Virtual Care | Vision and Plan | No vision or plan for virtual care |
| | Internal Champions | No internal champions for virtual care |
| | Policies and Standards | No virtual care policies or standards |
| Measuring Impact | Evaluation | No evaluation of virtual care outcomes |
| of Virtual Care | Quality Improvement | Evaluation has no impact on the future of virtual care program delivery |
| Utilization of | Data | Virtual care utilization data is limited or not available |
| Virtual Care | Virtual Encounters | Low number of virtual encounters (< 5%) from targeted patient populations across all virtual care modalities |
| | Provider Uptake | Low number of providers (<5%) supporting patients with virtual care, as appropriate to their practice |

Virtual Care Maturity Model Evolving



| Domain | Criteria | Evolving |
|--|------------------------|--|
| Virtual Care Options | Modality | Multiple $(2 - 4)$ virtual care modalities are available for patients and providers |
| for Patients and Providers | Patient Populations | Multiple $(2 - 4)$ patient populations are supported with virtual care |
| | Models of Care | Virtual care modalities only have one model of care |
| | Integrated Care | Virtual care is used to support integrated models of care |
| Patient Centered | Equity | Virtual care is provided with considerations for reaching some groups with barriers to access |
| Design and Delivery of Virtual Care | Patient Education | Some virtual care program workflows include education for patients around the use of virtual care and how it might benefit them |
| | Service Design | Some virtual care program workflows were designed with patients and are regularly refreshed as needs are identified by patient input |
| Commitment | Financial Resources | Moderate financial resource commitment for virtual care: multi-year funding strategy |
| to Support Virtual Care | Human Resources | Human resources are available to support virtual care in some areas the organization |
| | IT Infrastructure | Technology and IT personnel are available to support virtual care in some areas of the organization |
| Internal Policy & | Governance | Accountability for virtual care is represented in the organization structure. Governance is program specific |
| Organization Structure for Virtual Care | Vision and Plan | There is a vision and plan for virtual care, but it is not aligned with overall clinical needs or business strategy |
| | Internal Champions | Internal champions for virtual care are available in some areas of the organization |
| | Policies and Standards | Virtual care policies and standards are embedded in everyday workflows and deployed in some areas of the organization |
| Measuring Impact | Evaluation | Evaluation is program-based and ad hoc |
| of Virtual Care | Quality Improvement | Evaluation leads to the execution of quality improvement initiatives for virtual care program delivery |
| Utilization of | Data | Virtual care utilization data is available across most programs and modalities |
| Virtual Care | Virtual Encounters | Moderate number of virtual encounters (< 5 $-$ 20 %) from targeted patient populations across all virtual care modalities |
| | Provider Uptake | Moderate number of providers (< 5 $-$ 20 %) supporting patients with virtual care, as appropriate to their practice |

Definitions for key terms are on page 18

Virtual Care Maturity Model Advanced



| Domain | Criteria | Advanced |
|---|------------------------|--|
| Virtual Care Options for Patients and | Modality | Many (5+) virtual care modalities are available for patients and providers |
| Providers | Patient Populations | Many (5+) patient populations are supported with virtual care |
| | Models of Care | Most virtual care modalities have many (4+) models of care |
| | Integrated Care | Virtual care is a key component of integrated models of care |
| Patient Centered Design and Delivery of | Equity | Virtual care is provided with considerations for reaching all groups with barriers to access |
| Virtual Care | Patient Education | Most virtual care program workflows include education for patients around the use of virtual care and how it might benefit them |
| | Service Design | Most virtual care program workflows were designed with patients and are regularly refreshed as needs are identified by patient input |
| Commitment to Support | Financial Resources | Significant financial resource commitment for virtual care: consistent and integrated multi-year funding strategy |
| Virtual Care | Human Resources | Human resources are available to support virtual care across the organization |
| | IT Infrastructure | Technology and IT personnel are available to support virtual care across the organization |
| Internal Policy & Organization Structure | Governance | Accountability for virtual care is represented in the organization structure, with enterprise-level governance and sponsorship |
| for Virtual Care | Vision and Plan | Vision and strategy for virtual care is closely aligned or integrated with the overarching business strategy to address critical clinical, business, and patient-centred opportunities |
| | Internal Champions | Internal champions for virtual care are available consistently across the organization |
| | Policies and Standards | Virtual care policies and standards are embedded in everyday workflows and deployed consistently and repeatably across the organization |
| Measuring Impact of Virtual Care | Evaluation | Most virtual care programs conduct scheduled evaluations that include patient measures along with critical clinical and business metrics |
| | Quality Improvement | Evaluation leads to continuous and operational cycles of quality improvement initiatives for virtual care program delivery |
| Utilization of Virtual Care | Data | Virtual care utilization data is available across all programs and modalities and is easily accessible |
| Virtual Care | Virtual Encounters | High number of virtual encounters (>20 %) from targeted patient populations across all virtual care modalities |
| | Provider Uptake | High number of providers (>20 %) supporting patients with virtual care, as appropriate to their practice |

Wirtual Care Maturity Model Assessment Tool

Virtual Care Maturity Assessment Tool

The assessment tool can be used by health care organizations to obtain a current-state outline of their virtual care maturity. This process requires an overarching knowledge of the virtual care programs across the organization and may require internal stakeholder collaboration.

How to use the assessment tool

- 1 Complete the assessment questions, on the following pages, for each of the 19 criteria found across the six maturity domains in this model.
- 2 Score each assessment question based on the scoring criteria identified for basic, evolving or advanced.
- **3** Once you answer all the questions across the six maturity domains, use the last page to total your maturity scores. Assign 1 point for Basic, 2 points for Evolving and 3 points for Advanced.
- 4 The sum of the scores from all criteria will be matched along the below scale to determine overall virtual care maturity:



1. Virtual Care Options for Patients and Providers

| Criteria | Assessment Questions | Scoring and Results (✓ score in correct category) |
|--------------------------|--|--|
| Modalities* | Which virtual care modalities are used to support your patients and providers? (Select all that apply) | BASIC Only one option selected |
| | Virtual Visit: Audio Virtual Visit: Video | EVOLVING 2 – 4 options selected |
| | Virtual Visit: Secure Messaging eConsult Digital Self-Care Remote Care Management | ADVANCED 5 or more options selected |
| Patient Populations * | How many patient populations are supported with virtual care? (Select one) | BASIC 1 selected |
| - | □ 1 □ 2 - 4 | EVOLVING 2 – 4 selected |
| | □ 5 or more | ADVANCED 5 or more selected |
| Models of Care* | Most of your modalities have: (Select one) | BASIC 1 model of care |
| | 1 model of care 2 – 4 models of care 5 or more models of care | EVOLVING 2 – 4 models of care |
| | | ADVANCED 5 or more selected |
| Integrated Care* | Are your virtual care programs used to support an integrated model of care? (Select one) | BASIC No |
| | Yes (proceed to next question) No (score basic and do not answer next question) | |
| | If yes, does the success of this integrated model rely on virtual care? (Select one) | EVOLVING No |
| | □ Yes □ No | ADVANCED Yes |

* Definitions for key terms are on page 18



2. Patient Centered Design and Delivery of Virtual Care

| Criteria | Assessment Questions | Scoring and Results (✓ score in correct category) | |
|-------------------|--|---|---|
| Equity | Does your organization provide virtual care with considerations for reaching groups with barriers to access? (Select one) | BASIC No | |
| | Yes (proceed to next question)No (score basic and do not answer next question) | | |
| | If yes, are these considerations made for all groups with barriers to access* in your patient population? (Select one) | EVOLVING No | |
| | ☐ Yes □ No | ADVANCED Yes | |
| Patient Education | Do any of your virtual care program workflows* include education for patients around the use of virtual care and how it might benefit them? (Select one) | BASIC No | |
| | Yes (proceed to next question)No (score basic and do not answer next question) | | |
| | If yes, how many virtual care programs include this? (Select one) Some virtual care program (< 50%) Most virtual care programs (> 50%) | EVOLVING Some virtual care program (< 50%) ADVANCED Most virtual care programs (> 50%) | * Definitions for key terms are on page 18 |
| Service Design | Are any of your virtual care program workflows designed with patients and are regularly refreshed as needs are identified by patient input? (Select one) | BASIC No | RESULTS: BASIC Number of ✓'s |
| | Yes (proceed to next question) No (score basic and do not answer next question) | | EVOLVING Number of ✔'s |
| | If yes, how many virtual care programs* does this represent? (Select one) | EVOLVING Some virtual care | |
| | Some virtual care program (< 50%) Most virtual care programs (> 50%) | ADVANCED Most virtual care programs (> 50%) | Number of ✓'s Total should equal 3 Maturity score tabulated on page 15. |

3. Commitment to Support Virtual Care

| Criteria | Assessment Questions | Scoring and Results (✓ score in correct category) | |
|------------------------|---|---|--|
| Financial Resources | Does your organization have financial resource commitments to support virtual care? (Select one) | BASIC No | |
| | Yes (proceed to next question) No (score basic and do not answer next question) | | |
| | If yes, select the best description of the funding strategy: (Select one) One-time funding strategy Multi-year funding strategy | BASIC One-time EVOLVING | |
| | Consistent and integrated multi-year funding strategy | ADVANCED Consistent | |
| Human Resources | Does your organization have human resources to support virtual care? (Select one) | BASIC No | |
| | No (score basic and do not answer next question) If yes, are they available to support virtual care across the organization? (Select one) | EVOLVING No | |
| | ☐ Yes ☐ No | ADVANCED Yes | |
| IT Infrastructure | Does your organization have technology and IT personnel available to support virtual care? (Select one) Yes (proceed to next question) | BASIC No | RESULTS: BASIC Number of ✓'s |
| | No (score basic and do not answer next question) If yes, are they available to support virtual care across the organization? | EVOLVING No | EVOLVING Number of ✓'s |
| | (Select one) Yes No | ADVANCED Yes | ADVANCED Number of ✓'s Total should equal 3 Maturity score |

tabulated on page 15.

4. Internal Policy & Organization Structure for Virtual Care

| Criteria | Assessment Questions | Scoring and Results |
|---------------------------|---|--|
| Governance | Does your organization have a governance structure to support the ongoing use of virtual care? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) | BASIC No |
| | If yes, please select the best description of the governance structure: (Select one) ☐ Focuses on a single service/tier within the organization ☐ Spans across the entire organization | EVOLVING Single service/tier ADVANCED Entire organization |
| Vision and Plan | Does your organization have a vision or plan for virtual care? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) | BASIC No |
| | If yes, is it aligned with the organization's overarching business strategy to address address critical clinical, business, and patient-centred opportunities? (Select one) Yes No | EVOLVING No ADVANCED Yes |
| Internal Champions | Does your organization have any internal virtual care champions? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) | BASIC No |
| | If yes, are they available to support virtual care across the organization? (Select one) Yes No | EVOLVING No ADVANCED Yes |
| Policies and Standards | Does your organization have virtual care policies and standards that are embedded in everyday workflows? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) | BASIC No |
| | If yes, are they deployed consistently and repeatably across the organization? (Select one) Yes No | EVOLVING No ADVANCED Yes |



5. Measuring Impact of Virtual Care

| Criteria | Assessment Questions | Scoring and Results (✓ score in correct category) | |
|------------------------|---|---|--|
| Evaluation | Does your organization have a process in place to evaluate the success of virtual care programs? (Select one) | BASIC No | |
| | Yes (proceed to next question)No (score basic and do not answer next question) | | |
| | Is this process consistent across most virtual care programs and scheduled throughout the timeline of the program? (Select one) Ves No Does it consider both patient and provider perspectives? (Select one) Yes No | EVOLVING No selected for one question ADVANCED Selected yes for all questions | |
| | Does it include critical clinical and business measures? (Select one) | | RESULTS: |
| Quality Improvement | Has the evaluation of your virtual care program led to any quality improvement initiatives? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) | BASIC No | BASIC Number of ✓'s EVOLVING Number of ✓'s ADVANCED |
| | If yes, is there a continuous and operational cycle for quality improvement initiatives? (Select one) Ves No | EVOLVING No ADVANCED Yes | Number of √'s Total should equal 2 Maturity score tabulated on page 15. |

6. Utilization of Virtual Care

| Criteria | Assessment Questions | Scoring and Results (✓ score in correct category) | |
|--------------------|---|---|--|
| Data | Does your organization have access to virtual care utilization data across most programs and modalities? (Select one) Yes (proceed to next question) No (score basic and do not answer next question) If yes, is this data easily accessible? (Select one) Yes No | BASIC No EVOLVING No ADVANCED | |
| Virtual Encounters | What percentage of your organization's targeted population (for virtual care) has received care virtually at least once in the last year? (Select one) < 5% 5 - 20% > 20% | Yes BASIC < 5% EVOLVING 5 - 20% ADVANCED > 20% | RESULTS: BASIC Number of ✓'s |
| Provider Uptake | What percentage of your organization's providers are supporting patients with virtual care (i.e. supported at least one patient virtually in the last year)? (Select one) < 5% 5 - 20% > 20% | BASIC < 5% EVOLVING 5 - 20% ADVANCED > 20% | Number of ✓'s ADVANCED Number of ✓'s Total should equal 3 Maturity score tabulated on page 15. |

Virtual Care Maturity Model Assessment Final Score



| | Virtual Care Maturity Model Domains | BASIC | EVOLVING | ADVANCED |
|---|---|-------|----------|----------|
| | Page 9 – Virtual Care Options for Patients and Providers | | | |
| STEP ONE: Transfer the number | Page 10 – Patient Centered Design and Delivery of Virtual Care | | | |
| of Basic, Evolving and Advanced scores for each | Page 11 – Commitment to Support Virtual Care | | | |
| of the previous domain question pages and plot | Page 12 – Internal Policy & Organization Structure for Virtual Care | | | |
| on this table | Page 13 – Measuring Impact of Virtual Care | | | |
| | Page 14 – Utilization of Virtual Care | | | |
| STEP TWO: Add up the totals for Basic, Evolving and Advanced | Total for domain questions (<u>overall</u> total should be 19) | | | |
| STEP THREE: Multiply totals by values indicated in equation | Multiply to determine value | x 1 = | x 2 = | x 3 = |
| STEP FOUR: Add Basic, Evolving and Advanced values together to determine your final virtual score to determine your overall virtual care maturity score | Add values together for final score | + | + 📃 = | |
| | | | 19 – 28 | BASIC |
| | | | 29 – 47 | EVOLVING |

ADVANCED

48 – 57

What does the overall virtual care maturity score mean for a health care organization?

BASIC

Organizations with a basic virtual care maturity are early in their virtual care journey and do not have a sustainable foundation to support their virtual care programs. These organizations tend to have limited virtual care options and limited considerations for patient centred design. Internal policies, organization structures, and financial resources do not reflect an emphasis on virtual care. Their virtual care programs are also not evaluated to improve outcomes.

EVOLVING

Organizations with an evolving virtual care maturity are further along in their virtual care journey and have taken measurable steps to ensure the sustainability of their virtual care programs. These organizations tend to have some of their virtual care options designed with a patient centred approach. Internal policies, organization structures, and financial resources reflect a moderate emphasis on virtual care. Some of their virtual care programs are also evaluated to improve outcomes.

ADVANCED

Organizations with an advanced virtual care maturity are far along in their virtual care journey and have worked towards the development of robust and sustainable virtual care programs. These organizations have many virtual care options and have made patient-centred design a priority. Internal policies, organization structures, and financial resources reflect a strong emphasis on virtual care. Most of their virtual care programs are also evaluated to improve outcomes.

WHAT'S NEXT

With the completion of the assessment, an organization has a current-state outline of their virtual care maturity. Future-state objectives can then be identified by determining the next level of maturity relative to the obtained score for each maturity model criteria.

Organizations should align their strategic priorities to work towards advancing their virtual care maturity. Enablers of success include collaborating with regional and provincial partners to identify best practices, sharing successes, and establishing integrated models for virtual care.

We welcome your feedback, please take the time to complete a short survey: surveymonkey.com/r/HBB9333



Definitions

| Term | Definition | | | |
|--------------------|---|--|--|--|
| Modality | Technology that facilitates virtual encounters and access to virtual care. | | | |
| | Virtual Visit: A digital interaction where one or more clinicians, including physicians, nurses or allied health, provide health care services to a patient or their caregiver. A virtual visit can be supported using audio, video, and secure messaging. Reference: <u>Ontario Health</u> eConsult: Occurs when a requesting provider sends a patient-specific question to a specialist using secure technology. Provider-provider clinical consults vary in the technology used. Reference: <u>Ontario eConsult Centre of Excellence</u> Digital Self-Care: The delivery of self-management support to patients via technology using tools such as education or behavior change support to promote activities which contribute to condition management, for example medication adherence or increasing physical activity. Reference: <u>Morton et al. (2016)</u> Remote Care Management: Utilize remote monitoring solutions to assess a patient's ongoing health status and utilize this data to guide care plan changes, address patient education needs, and activate interventions to proactively address emerging issues. Reference: <u>Ontario Health</u> | | | |
| Patient Population | Patient groups that are distinct by their: | | | |
| | Specialty (e.g. Mental Health, Palliative, Surgical, etc.)Acuity (e.g. low, medium, high, etc.) | | | |
| Model of Care | In a virtual care context, refers to the usage of a virtual care modality to support a specific use-case. For example, virtual care can be used to support: | | | |
| | Pre-treatment for surgical patients Waitlist management for substance use disorder programs Treatment for mental health patients Adjunct to treatment for chronic pain patients Post-Treatment and follow up for patients undergoing chemotherapy | | | |

| Term | Definition | | | |
|-----------------------------------|--|--|--|--|
| Integrated Model of Care | A model of care that is not siloed and spans the entire patient journey across multiple: | | | |
| | DepartmentsCare SettingsOrganizations | | | |
| Groups with Barriers to Access | Examples include: • Seniors • Rural / Remote • Precariously housed • Disabled • Primary language other than English | | | |
| Virtual Care Program | A service offered by a health care organization that:Uses one or more virtual care modalitiesIs offered to one of more patient populationsSupports one or more models of care | | | |
| Virtual Care Program Workflow | The steps involved in the learning, delivery, and utilization of a virtual care program for patients and providers. | | | |



Virtual Care Nomenclature

| | | • | ctronic com | | • | rices and pro nada Health | cesses to deliver Infoway | |
|--------------------------|----------------------------------|-------------------------|-------------------------------|------------------------------------|---------------------------------|------------------------------|--|--|
| Information Resources | Databases and Reporting Tools | | Electronic Medical Records | | Hospital Information Systems | | Scheduling Solutions | |
| using any fo | rms of com | munication | nd/or men or informat | tion technolo | ogies, with | | ng remotely, facilitating or <u>- WIHV</u> | |
| Virtual Visit: Audio | | Virtual Visit: Video | | Virtual Visit: Secure Messaging | | Vii | Virtual Care | |
| eCor | nsult | Digital S | elf-Care | Remote Care Management | | M | Modalities | |

Additional resources to support improving virtual care maturity

- Adopting and Integrating Virtual Visits into Care (Ontario Health)
- <u>COVID-19 Virtual Care Resources</u> (Ontario Health)
- Digital inclusion for health and social care (NHS Digital)
- <u>How to Start Using Virtual Care</u> (OntarioMD)
- Meeting Priority Population Needs Through Virtual Care (Ontario Health)
- <u>A Toolkit for Implementing Virtual Group Services</u> (Centre of Innovation in Peer Support)
- Toolkit for e-Mental Health Implementation (Mental Health Commission of Canada)
- Virtual Care for Chronic Disease Management (Centre for Effective Practice)
- Virtual Care Playbook (Canadian Medical Association)
- Virtual Care Toolkit (Accreditation Canada & Health Standards Organization)
- Virtual care equity matrix: No one is left behind (Ontario Mental Health and Addictions Virtual Care Collaborative)

Verified Virtual Visit Solutions for Providers (Ontario Health)

To assist health service providers in the selection of virtual care solutions appropriate for clinical use, Ontario Health has established a provincial standard and launched a verification process for virtual care solutions.

