

Virtual Urgent Care Services

FY2022/23 Funding Guidelines

1. Introduction

The Ministry of Health is providing one-time funding to Ontario Health Teams (OHT)s, In-development OHTs and other eligible health care provider organizations to support the ongoing regionally coordinated virtual urgent care (VUC) initiatives.

Virtual urgent care is a novel care model used in many jurisdictions to improve the patient experience and divert lower acuity patients with urgent health issues from emergency departments (ED). These programs have also provided patients with more options to receive care when they otherwise cannot. As virtual urgent care models have evolved over the past few years, there is a need to review and evaluate these current models to determine the future vision of virtual urgent care in Ontario.

To decrease disruption during the design time Ontario Health (OH) is proposing the following:

- Existing sites are to collaborate with their OH Region to submit budgets required to sustain their current VUC model for 6 months (April 1st, 2022 to September 30, 2022) while engaging in a co-design planning process with the region to provide recommendations to the province on a provincial framework and regional model.
- Proposals for a limited number of new virtual urgent care initiatives that would be part of the regional VUC vision and align with the funding objectives and requirements below will also be considered.

2. Objectives

The objectives of this sustainment funding are to:

- Continue to enable patients to access urgent care virtually for appropriate lower acuity health issues or concerns within a specific time period to avoid unnecessary in-person ED visits.
- Provide care in the most appropriate setting utilizing regional triage models (ie. leveraging the provincial health care navigation service, Health Connect Ontario (HCO); to facilitate in-person primary care or ED visit/ transfer for urgent health issues.)
- Provide planning time between the OH Regions and stakeholders to co-design a virtual urgent care model to provide recommendations that build and improves on collaboration between OHTs, primary care, EDs, long-term care and retirement homes and other community partners to enhance continuity of care.

3. Project Requirements

To be considered, all successful requests **must**:

- Be led by one or more OHTs in development OHTs and other eligible health care provider organizations with the capacity to provide cost-effective virtual urgent care services across regional or OHT catchment area.
- Propose a sustainable 6-month operating budget with significant in-kind (minimum 50%) resourcing support that is appropriate for anticipated patient volumes. **Note: physician remuneration for clinical work is not an eligible expense.**
- Commit to co-designing and submitting recommendations for a provincial framework and regional virtual urgent care model with their respective OH Region.
- Agree to continue to provide virtual urgent care services with minimum weekly operating hours (30 hrs/week) up to September 30, 2022.
- Submissions should include information on the number of patients that will be supported by the program up to September 30, 2022.
- Agree to continue to deliver services that are consistent with the clinical model outlined in Section 5, including patient screening, access to an appropriate secure video or audio visit (if required) and facilitating an in-person visit or transfer to an ED where necessary.
- Commit to participating in an evaluation aimed at assessing options for a sustainable regionally coordinated operating model.
- Have a designated OHT or health service provider organization who agrees to signing a funding agreement with Ontario Health that would include performance targets, and monthly reporting requirements.
- Agree to include virtual urgent care pathway into HCO phone and web services and participate in ongoing enhancements.
- Be submitted and endorsed by the OHT and OH Region.

4. Funding Guidelines

All proposals must include in-kind resources as well as a detailed funding request for a specific operating period up to September 30, 2022.

The funding request can include the following eligible expenses:

- Operational costs (I.e., nursing resources, registration clerks, IT licenses)
- Communication costs (I.e., web development, social media)
- One-time IT infrastructure costs. Requests for infrastructure investments must be supported by a sustainability plan

Note: physician remuneration for clinical work is not an eligible expense

5. Additional Project Guidelines

Projects will continue to meet the following criteria:

Clinical Model

The following clinical model includes requirements for services aimed at patients (adult or pediatric) in the community.

- Provide patients, caregivers and community providers with web-based information about the appropriateness of the service and alternative options, including diversion to an in-person ED visit for high acuity concerns or primary care for non-urgent health issues.
- Screen patients, through digital self-screening, virtual nurse triaging or both, to collect basic patient and clinical information and ensure a virtual visit is appropriate. As part of this screening, attached patients with non-urgent health issues should be encouraged to seek care from their primary care provider first. **Note: proposals should include a plan for collecting patient acuity level.**
- Enable a virtual visit (video preferable with audio back up) with the most appropriate level of care determined. Consider staffing model of nurse/NP triage first with escalation to primary care MD or ED MD. Provide an escalation pathway for patients who require immediate access to emergency care, including diagnostics.
- Facilitate and track patients who are referred for an in-person ED visit or transfer. Support continuity of care through a “warm hand-off” to the patient’s primary care provider or most responsible provider that includes a discharge summary report of the virtual visits back to the provider.

Technology

- Technology should be in place for patient navigation/screening, virtual visits and tracking referrals to in-person emergency departments. Where appropriate, existing secure technologies should be leveraged.
- Where proposals include requests for technology licenses or services for virtual care solutions using video or secure messaging, successful proposals will be required to use a verified solution (<https://www.ontariohealth.ca/verified-vendor-list>). Vendor must be on the OH verified vendor list by September 30, 2022.

6. Submission and Approval Process

Interested health service providers should contact their Ontario Health Region to discuss whether a potential initiative meets the criteria and the needs of their community. Ontario Health Regions are responsible for facilitating submission development and determining which should be submitted for funding approval.

Ontario Health (Population Health & Value-Based Health Systems) team can also be engaged during proposal development as a subject matter expert on virtual clinical workflows and technology solutions.

Submissions must be documented using the approved Virtual Urgent Care Submission Template and sent to their Regional Contact (emails below). Proposals will be submitted to Ontario Health Virtual Care Secretariat for funding review and approval. The Secretariat will oversee the allocation of funding to eligible submissions according to a criteria-driven process.

Central	OH-Central_DigitalVirtual@ontariohealth.ca
East	OH-East_DigitalVirtual@ontariohealth.ca
North	OH-North_DigitalVirtual@ontariohealth.ca
Toronto	OH-Toronto_DigitalVirtual@ontariohealth.ca
West	OH-West_DigitalVirtual@ontariohealth.ca