Models of Care Innovation Fund Guideline
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1.0 INTRODUCTION

This Models of Care Innovation Fund Guideline provides information on the purpose, application process, eligibility criteria, review process and other important information about the Models of Care Innovation Fund. For a glossary of terms used in the Guideline, please see Appendix 1.

2.0 OVERVIEW

The Ontario government is looking to enable forward-looking, collaborative, and responsive solutions to the healthcare needs of every Ontarian.

As announced in Your Health: A Plan for Connected and Convenient Care, Ontario is building on the success of 9-1-1 models of care that are providing Ontarians better access to services by creating a Models of Care Innovation Fund. Eligible organizations can apply for funding to help their organization implement innovative ways of maximizing the skills and expertise of their current health care workers.

The Models of Care Innovation Fund will support innovative projects that optimize health human resources (HHR) in Ontario. In total, $40M ($20M in 2023/24 and $20M in 2024/25) is available.

The Innovation Fund will support:
- projects that will allow for the right care in the right places;
- projects that will allow faster access to care; and
- projects that will maximize the capacity and expertise of healthcare workers.

Ontario Health will receive proposals. An Evaluation Team made up of representatives from Ontario Health and the Ministry of Health (MOH) will review and rank all proposals using a standardized scoring methodology. MOH retains final decision-making authority on which proposals will be supported. Ontario Health will directly fund and oversee project administration and reporting. Note: In certain cases, funding agreements may be with the ministry. In these situations, the ministry will oversee the project.

2.1 Objectives

The Models of Care Innovation Fund will support project-based solutions that offer partnership-driven, sustainable approaches to address healthcare challenges in Ontario.
The main objectives are to:

- **Support and help develop a resilient health workforce through capacity building and retention.** This includes maximizing the skills and expertise of healthcare workers, reducing administrative burden, and empowering healthcare workers through tailored supports and new technologies. Optimizing health workforce capacity can include having the right number, type and distribution of healthcare professionals working in new models of care.

- **Encourage partnerships that will allow for the right care in the right places,** including those that will support more care in the community, leverage virtual care, reduce emergency department (ED) pressures and support targeted care needs with specialized supports.

- **Allow faster and more accessible access to care** by improving on existing infrastructure to reduce wait times and get Ontarians appropriate care in a timely manner. By enhancing pathways to appropriate care, healthcare needs should be responded to in the most safe, convenient and flexible way.

### 2.2 Eligible Organizations

Leading eligible organizations are:

- **Health Care Facilities:** e.g., hospitals, long-term care homes, home care providers
- **Health Provider Groups:** e.g., family health teams, nurse practitioner-led clinics, etc.
- **Ontario Health Teams**
- **Other Health Organizations and Providers** (e.g., public health units, mental health service providers, etc.).

The following organizations are eligible to be co-applicants with one or more of the primary applicants above:

- publicly assisted colleges, universities or Indigenous Institutes in Ontario
- private career colleges registered under the *Private Career Colleges Act, 2005*
- employers with a presence in Ontario
- non-profit organizations with a physical presence in Ontario
- professional, industry, employer or sector associations
- unions or union-affiliated organizations
• municipalities, District Social Services Administration Boards, Consolidated Municipal Service Managers

**Note:** Leading eligible organizations may partner with other organizations (listed above) on eligible projects, but as the primary applicant, they remain solely accountable for project execution. Organizations may collaborate on multiple projects.

### 2.3 Eligible Project Categories

Submitted projects must focus on in-demand and key growth target sectors linked to future oriented healthcare needs, to address and be responsive to regional demands.

Projects must fall under **one or more** of the following categories (in bold):

**A. System and occupational integration of HHR**
- e.g., projects aimed at innovative use of team-based care, maximizing the scope of practice of HHR, and unconventional use of providers while establishing sustainable healthcare delivery methods

**B. Projects based on partnerships between healthcare providers in sharing HHR:**
- **within a sector** (e.g., hospitals working together on a staffing pool concept)
- **across sectors** (e.g., sharing HHR between primary care, home care, and acute care within a demographic region, encouraging healthcare partnerships and innovation)

**C. Projects introducing support for existing HHR**
- e.g., formalizing roles for patient caregivers and empowering healthcare workers and providers, including students

**D. Redesigning and implementing various methods of delivering healthcare services for a specific population or geography**
- e.g., for northern/rural/remote, improving patient access and convenience

**E. Redesigning and implementing new ways of healthcare delivery by integrating technology to reduce the HHR burden**
• e.g., remote monitoring and virtual care, demonstrating innovative approaches, roles, and tools to maximize HHR and retention

2.4 Other Project Requirements

Applications must be submitted by an eligible primary applicant.

Projects must focus on **all** of the following **five requirements**:

1. Supports one of the three pillars of *Your Health: A Plan for Connected and Convenient Care*: the right care in the right place, faster access to care, and hiring more health care workers
2. Must have a Sustainability Plan (i.e., does not require further funding)
3. Maximizes Health Human Resources (e.g., optimizes staffing)
4. Exhibits Innovation (i.e., new HHR configurations, roles, tools)
5. Measurable (i.e., can demonstrate results achieved)

3.0 PROJECT DELIVERY

3.1 Roles and Responsibilities

3.1.1 Primary Applicant’s Role

The primary applicant, if the proposal is accepted, is required to adhere to the terms and conditions of the written agreement with Ontario Health. Primary applicants are accountable to Ontario Health for managing and executing the development and delivery of the project, including resource management and satisfaction of performance and financial obligations established by Ontario Health in the written agreement.

The primary applicant is not expected to perform all the specific tasks related to the project, but is expected to ensure that tasks are completed by themselves or partner organizations.

The primary applicant is responsible for:

• articulating and developing the project framework (including partnership agreements);
• developing and implementing operational plans (including performance metrics to measure progress);
• facilitating communication with partner organizations and stakeholders; and
• reporting to Ontario Health.

The primary applicant is required to:

• ensure there is no duplication of funding from other sources during the project;
• provide a projected budget for each of the components and sub-components and complete the project within budget;
• ensure goals are defined and milestones are met and reported to Ontario Health using the mechanism outlined in the written agreement;
• ensure the delivery of the project is within the scope, according to the written agreement with Ontario Health;
• meet reporting requirements (both activity and financial) outlined in the written agreement with Ontario Health;
• establish and maintain formal arrangements with partner organizations; and
• adhere to the terms and conditions of the written agreement with Ontario Health.

3.1.2 MOH and Ontario Health

a. MOH issues instructions and eligibility criteria to Ontario Health in preparation for regional calls for proposals.
b. Ontario Health publishes calls for proposals.
c. Primary applicants submit proposals to Ontario Health Regions.
d. Ontario Health Regions evaluate proposals received and make recommendations to MOH/Ontario Health Innovation Fund Table.
e. Innovation Fund Table validates recommendations (with necessary modifications).
f. MOH reviews/approves recommendations and flows funds to Ontario Health.

3.1.3 Evaluation Team

Evaluation of proposals will be based on the following criteria:
1. Demonstrates Alignment with one or more of the Project Categories
2. Demonstrates **all** the Other Project Requirements
3. Demonstrates Organizational Capacity to Lead and Successfully Complete the Project
4. Provides a Creditable and Achievable Project Delivery Plan, including Key Performance Indicators (KPIs)
5. Provides a Comprehensive and Reasonable Budget

Notwithstanding the eligibility criteria, MOH retains absolute and sole discretion when deciding which projects are funded.

### 3.2 Performance Management

#### 3.2.1 Performance Management Requirements

Primary applicants who enter into a written agreement with Ontario Health are expected to meet the specified reporting requirements throughout the life cycle of the written agreement. Note: MOH and/or Ontario Health may change reporting requirements at their discretion.

#### 3.2.2 Project Monitoring

MOH will receive and review quarterly reports from each Ontario Health Region.

MOH/Ontario Health Innovation Fund Table will perform a review at the end of Year 1 (2023/24) and end of Q2-Year 2 (2024-25) of each group of projects, based on quarterly reports submitted. Considerations may include:

- Performance against metrics
- Performance against other projects in Ontario Health Region
- Identification of leading practices/projects for scope and scale
- Project run-rate (spending)

As a result of the review, the Innovation Fund Table may recommend:

- the scaling down/discontinuation of underperforming projects
- re-alignment of funds for high performing projects within a region
3.2.3 Activity Reports

Primary applicants will be required to provide activity reports to Ontario Health on the progress they have achieved, and the expenditures incurred in relation to the objectives, project timeline, and budget outlined in the written agreement. It is expected that, where feasible, primary applicants will provide status updates on project-specific performance indicators.

3.2.4 Final Report

Primary applicants must submit a final report outlining the progress achieved towards fulfilling the objectives as specified in the written agreement with Ontario Health.

3.2.5 Financial Reports

Financial monitoring verifies that project funds are spent as intended and articulated in the written agreement with Ontario Health, and that accounting practices are in place to manage the funds. Unspent funds must be explained. Ontario Health will pursue the collection of any unspent or unaccounted for funds.

4.0 FUNDING

Applications must include a detailed budget which clearly itemizes expenses planned for project activities.

All goods and services must be acquired through a fair and transparent process that promotes best value for money.

Funds obtained from the Models of Care Innovation Fund cannot be used for expenses or activities already being funded by other sources, including the provincial or federal governments. However, the fund can be used to supplement funding for costs of the project not covered by other public sources, and the primary applicant.

Priority will be given to projects that are submitted with in-kind contributions and that focus on sustainability as a key part of the project.
Organizations will be provided a maximum of $2 million of funding per project.

5.0 PERFORMANCE MEASUREMENT

Projects should demonstrate data pre- and post-implementation and will be subject to quarterly reporting. Examples of KPIs could include:

- Increased recruitment of healthcare professionals
- Reduction in turnover and vacancies
- Reduced rates of absenteeism and attrition
- Metrics for quality of care for patients/caregivers

Reporting timelines will be detailed in the written agreement with Ontario Health.

At the application stage, primary applicants must clearly identify their performance targets, and plan for the collection, analysis and reporting of the data.
### APPENDIX 1: GLOSSARY OF SELECTED TERMS

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<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>Evaluation Team</td>
<td>A panel of representatives from Ontario Health and the Ministry of Health that will review and rank all proposals using a standardized scoring methodology.</td>
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<td>Key Performance Indicator (KPI)</td>
<td>A quantifiable measure used to evaluate the success of a project in meeting objectives for performance.</td>
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<td>Ontario Health/MOH Innovation Fund Table</td>
<td>A review panel composed of experts from Ontario Health and the Ministry of Health.</td>
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<td>Partner Organization</td>
<td>An organization with a formal role in the development and implementation of the proposed project, working alongside the primary applicant.</td>
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<td>Primary Applicant</td>
<td>The lead organization on the Models of Care Innovation Fund application, responsible for ultimate reporting requirements, and the main point of contact for Ontario Health.</td>
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<tr>
<td>Project</td>
<td>An initiative funded by Ontario Health (through MOH) under the Models of Care Innovation Fund.</td>
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<tr>
<td>Written Agreement with Ontario Health</td>
<td>A legal, signed agreement between Ontario Health and a successful primary applicant, including rights, responsibilities and obligations of both parties.</td>
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