

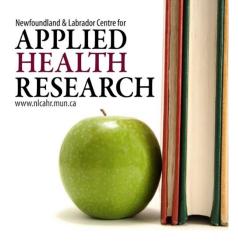


Rewarding Success

NL Information Session | October 3, 2017 Newfoundland & Labrador Centre for Applied Health Research







Welcome & Introductions

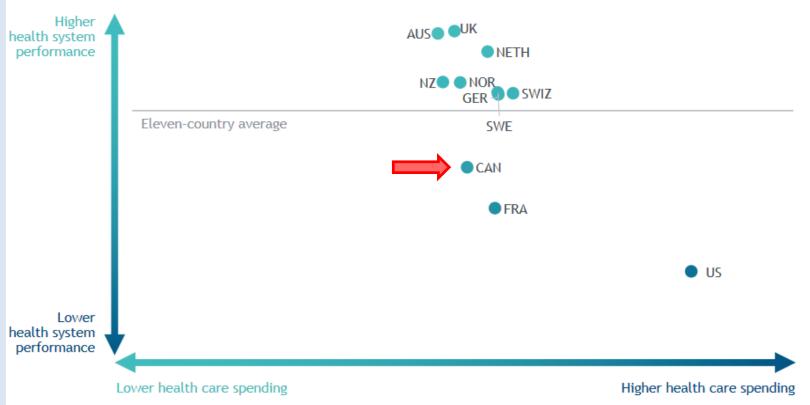
Dr. Stephen Bornstein, Director, NLCAHR

AGENDA

- Overview: Jessica Nadigel
- NL Priorities: Michael Harvey
- How to Apply: Chaid Leneis
- NL-SUPPORT: Kate Hogan and Dale Humphries
- Q&A/ Discussion

Background Context: The Canadian Healthcare Spend

Jessica Nadigel | Assistant Director of the Institute of Health Services and Policy Research, CIHR



- Healthcare spending (estimated at \$228B in 2016) is 11% of Canada's GDP
- Canada ranks 9th (out of 11 OECD countries) in terms health system performance
- Canada must improve the value of its health investment



New Approaches are Needed to Incentivize Innovation, Successful Partnership and Implementation

- ✓ Conventional peer review committees are reluctant to support riskier innovation
- ✓ Successful partnership development is not rewarded, nor success in implementing interventions to improve care
- ✓ Alternate funding models have been used to foster innovation
 - Prizes (e.g. EU prize for Low Cost Point of Care Testing for Viral vs Bacterial URI Infections)
 - Risk Sharing (new technologies)
 - Social Impact Bonds (challenging social problems)





Rewarding Success Model

- · Agree on an idea on how to improve value for investment in healthcare
- Determine outcomes and metrics to be measured



Multidisciplinary Team

Partner

Implement intervention(s) in healthcare organizations using innovative clinical trial methodology



Payer organization

- Determine value and timing of payback
- Develop contracts and agreements

IMPROVE HEALTH OUTCOMES, PRODUCE HEALTHCARE COST SAVINGS AND/OR HEALTH DELIVERY EFFICIENCIES

EVALUATION OF THE INTERVENTION

If agreed upon outcomes are achieved, the savings will be redistributed between the payer, the multidisciplinary team and/or redirected to an Innovation Fund

The Rewarding Success Design

Idea Brief (Letter of Intent)

- · Opportunity to outline an idea using the Rewarding Success model
 - Innovative ideas that enhance value-based care
 - Novel ways to scale and spread successfully implemented innovations that improve value for money
- Reviewed by Ministry of Health
- Top four selected ideas from each participating province invited to Ideathon

Sept – Nov 2017





February 6-7, 2018 Ideathon

- 1 national Ideathon
- Invited teams pitch ideas to the Idea Panel
- Idea Panel consists of ministries of health from all regions
- Top two pitches in each participating province are awarded a Business Case **Development Grant**

Business Case Development Grants (10 grants @ 100K for 1 yr)

- No matched funding required
- Determine timing and value of pay back
- Develop agreements
- · Refine targets and establish outcomes and metrics
- Independent evaluation/audit
- Feasibility studies

Feb 2018- Jan 2019



complex intervention trials and financial and

legal frameworks





April 2019

iCT Rewarding Success Team Grants

(\$24M total for 5 grants over 4 yrs)

- Implementation and evaluation of the intervention in a healthcare delivery setting using Innovative Clinical Trial methodology
- Redirection of a proportion of the savings
- 1:1 matched funding required



Putting Patients First



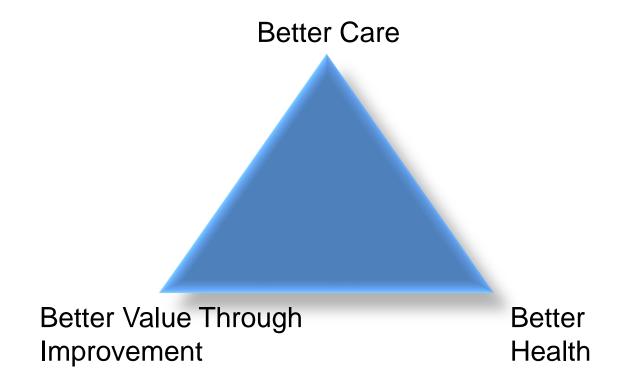
Rewarding Success Department of Health & Community Services Priorities

Michael Harvey
Assistant Deputy Minister of Policy, Planning and Performance Monitoring
Department of Health and Community Services

Priorities

- Home and Community Care
- Mental Health and Addictions
- Primary Health Care
- eHealth / Health Information Management
- See our Strategic Plan:
 - http://www.health.gov.nl.ca/health/publications/HCSStrategic Plan2017-20.pdf

Triple Aim



Home and Community Care

- Alternate Level of Care poor value, wrong care
- Supports need to be in place in the community
- Health System Initiatives:
 - Home First philosophy and program
 - Health Living Assessments for Seniors
 - Improved palliative / end-of-life care in community
- Other community supports (e.g. Autism)

Mental Health and Addictions

- Towards Recovery: Mental Health and Addictions Action Plan for NL
 - Implementing 54 recommendations of the All Party Committee on Mental Health and Addictions
- Stepped Care Model least intrusive treatment for greatest likelihood of improvement
- Involvement by numerous types of mental health workers
- Focus on community care where possible

Primary Health Care

- Range of community-based services essential to maintaining and improving health and well-being
- Access to family doctor, community health nurse, physiotherapists, pharmacists, etc.
- Quality primary health care can improve health, better manage chronic diseases, reduce demand on hospitals, drug utilization, etc.
- Way Forward commitment to expand primary health teams: work underway in Bonavista, Burin, Downtown St. John's, soon elsewhere.



eHealth / Health Information Mgt

- Utilization of eHealth technology can: improve quality and efficiency of care; enhance patient safety; provide health information to inform future health planning and policy development.
- Continued development of Electronic Health Record (Pharmacy Network, Healthe-NL Viewer, EMR)
- Telehealth
- Health Analytics



Thank You

Questions?



Chaid Leneis,

Program Delivery/Peer Review Team IHSPR-CIHR

How to Apply?





Objectives:

The iCT Rewarding Success is expected to:

- Incentivize multidisciplinary research teams and their healthcare and innovation partners to design, adopt, and evaluate interventions implemented into a healthcare delivery organization that enhance value-based care, health system sustainability, and health outcomes.
- Support innovative process transformations that improve health outcomes and value for Canada's healthcare investment.



Eligibility Criteria:

- 1. Anyone can generate an idea, but the Nominated Principal Applicant must be one of the following:
 - a. An independent researcher
 - b. A knowledge user
- 2. The Nominated Principal Applicant must be appointed at an eligible institution
- 3. By the Idea Brief submission deadline, the Nominated Principal Applicant must have successfully completed **sex- and gender-based analysis (SGBA) training** by following one of the CIHR Institute of Gender and Health's three online training modules.
- 4. Teams must be multidisciplinary and consist of at least four (4) Principal Applicants and/or Principal Knowledge Users. Each of the following categories must be covered:
 - A clinician
 - A researcher
 - A decision maker from the health care delivery organization
 - A patient: In the context of SPOR, patient is "an overarching term inclusive of individuals with personal experience of a health issue and informal caregivers, including family and friends."
 - Other sectors are welcome to join the team but are not mandatory. These may include philanthropies, SPOR Networks, not-for-profits, industry, etc.



Idea Brief Review Criteria:

CIHR will review all applications for relevance to:

- Funding opportunity objectives
- Alignment with iCT research areas
- SPOR principles

The Ministries of Health and SUPPORT Units will use the following criteria for the prioritization exercise:

- Relevance to provincial priorities, both those identified by the province and those that may be suggested by the applicants and accepted as highly relevant by the respective province.
- Quality of the idea (i.e., intervention/program) and the potential of the province to spread and scale.
- The likelihood of achieving the stated outcomes within the time window for full implementation (4 years).
- The likelihood that the team can successfully implement and measure the cost-effectiveness of the program/intervention



Ideathon Review Criteria (February 6-7, 2018):

1. Innovation

- a. Potential to address one or more provincial priorities.
- b. Degree to which the idea is original, unique and creative.
- c. Extent of the magnitude and types of changes in care delivery in the proposed idea with respect to significance of improvements over current practice in terms of value for money.
- d. Economic impact and potential for cost savings in the health-care system.
- e. Potential for scalability of the planned intervention.
- f. Evidence of appropriate and meaningful integration of patient engagement mechanisms that are aligned with the SPOR Patient Engagement Framework.

2. Scientific Strategy

- a. Clarity of the idea and its alignment to the objectives of this funding opportunity.
- Appropriateness and feasibility of the research approach and planned activities in relation to the proposed budget.
- c. Potential for the proposed research approach and planned activities to lead to equitable scale-up of the intervention through the appropriate integration of sex, gender and other relevant intersecting factors.



Ideathon Review Criteria (continued):

3. Team and Operations

- Experience of the applicants in the proposed idea area.
- b. Quality of scientific, clinical, patient, and management leadership.
- Availability and accessibility of personnel, facilities and infrastructure required to conduct proposed activities.
- d. Capacity of the partners to implement the potential intervention, facilitate change management and end-user engagement.
- e. Quality and potential sustainability of the proposed partnerships.

4. Budget

 Extent to which the budget is appropriate and justified in relation to the proposed activities.



How to Apply:

2-page Idea Brief that must include the following information:

- Describe the healthcare challenge/provincial priorities
- Describe the proposed intervention to the aforementioned challenge, highlighting how it is expected to enhance value-based health care, health system sustainability, and equitable health outcomes.
- Describe potential outcomes that will be measured.
- Describe the cost savings that will be produced and which payers would benefit from these savings.
- Describe how this idea would be of value to patients and how patients will be involved, giving consideration to sex, gender and other intersecting factors as relevant.
- Describe how the implementation of the idea aligns with the definition of iCT and its research areas



How to Apply (continued):

The application must also include:

- Provide an Academic CV or a Knowledge User CV for the Nominated Principal Applicant.
- Provide a BioSketch for all Principal Applicants and Principal Knowledge Users with the exception of the patient.
- Provide a patient written statement describing their relevant lived experiences that details their fit for this role in the context of the application
- Provide a 'Participant Table' with participant's role, affiliations, role in multidisciplinary team, expertise.
- Provide a profile of each of the payer organizations identified in your application.
- Sex- and gender-based analysis (SGBA) Certificate of Completion of one training module.
- A budget breakdown for the travel and accommodation funds needed to attend the Ideathon.
- A budget breakdown and justification of planned activities is required for the Business Case Development Grant.



Key Dates

- Application Launch: September 2017
- Phase 1 Idea Brief Deadline: November 21, 2017
- Notice of Idea Brief Decision: December 21, 2017
- Ideathon: February 6-7, 2018 in Ottawa
- Business Case Development Grant Funding: March 1, 2018



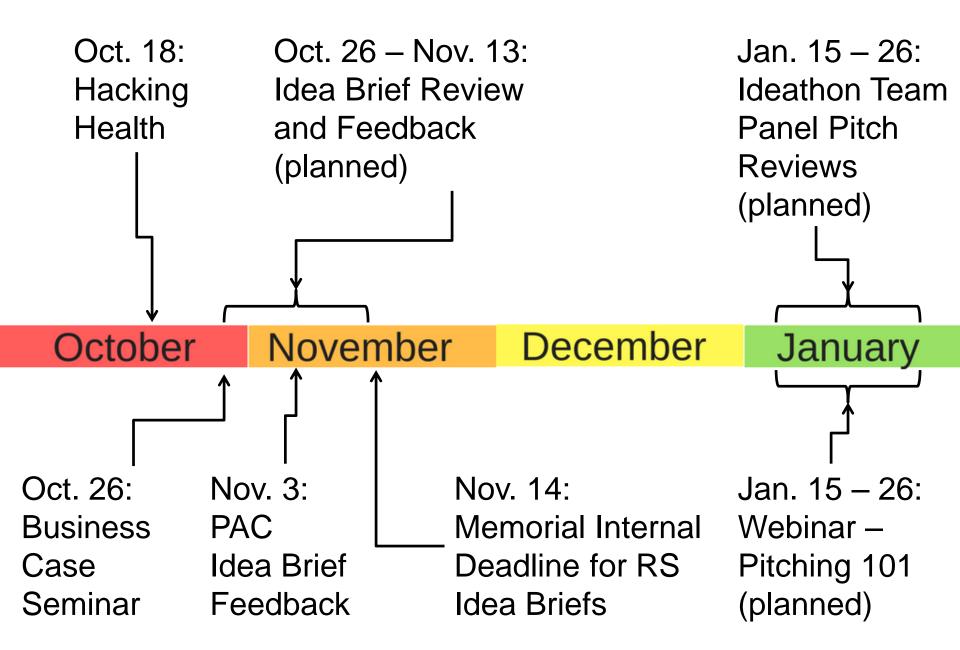


Rewarding Success:

Supports and Services

Kate Hogan, KT Lead Dale Humphries

October 2, 2017





http://www.nlcahr.mun.ca/Funding/RewardingSuccess17.php

