



Partnership for Research and Innovation in the Health System (PRIHS)

Program Guide 2015/2016

Background

In Canada, providing high quality care with limited resources is a continual challenge – one that must be overcome to maintain a sustainable health care system. Health care spending continues to increase faster than the rate of economic growth without the corresponding improvements in quality of care. This is a matter of concern to citizens and decision makers.

Alberta Innovates - Health Solutions (AIHS) and Alberta Health Services (AHS) are addressing this challenge through the Partnership for Research and Innovation in the Health System (PRIHS). This program supports the integration and application of high quality, relevant research and innovation in the health system. In alignment with the strategic goals of the [Alberta Health Research and Innovation Strategy](#), the vision is to support innovation to improve the quality of life of Albertans.

The overarching goal of PRIHS is to support innovation activities that will contribute to achieving a sustainable health system in Alberta. PRIHS combines the expertise of researchers, clinicians, managers, patients, policy-makers and other stakeholders to transform and improve healthcare delivery and patient outcomes.

Strategic Clinical Networks (SCNs)

- Addiction & Mental Health
- Bone & Joint Health
- Cancer
- Cardiovascular Health & Stroke
- Critical Care
- Diabetes, Obesity and Nutrition
- Emergency
- Kidney
- Maternal, Newborn, Child and Youth Health
- Primary Health Care*
- Respiratory Health
- Seniors Health
- Surgery

*Emerging SCN

The 2015/2016 PRIHS will fund the implementation of evidence-informed solutions to address specific health system challenges in Alberta through the [Strategic Clinical Networks \(SCNs\)](#). **Funded projects will adopt and implement existing evidence to improve quality of patient care and substantially reduce costs for the healthcare system.**

The 2015/2016 PRIHS will focus on achieving improvements in two dimensions of the [Health Quality Council of Alberta's Quality Matrix](#) - appropriateness and efficiency – in areas defined by AHS and the SCNs.



AIHS and AHS recognize that change is hard work. PRIHS is a tool to help implement, scale, and spread change in a way that provides high quality care while using fewer resources. Successful projects will present a persuasive change management theory and plan to identify and address the obstacles to enablers of improvement. PRIHS requires meaningful patient and family collaboration in the conceptualizing, planning, design, and implementation phases of each proposal.

Objectives

The objectives of the 2015/2016 PRIHS are to:

- Support improvements in two dimensions of the Health Quality Council of Alberta's Quality Matrix - appropriateness and efficiency – in areas defined by AHS and the SCNs;
 - **Appropriateness** - health services that are relevant to user needs and are based on evidence-based practice.
 - **Efficiency** – resources that are optimally used in achieving desired outcomes.
- Implement innovative solutions and/or new models in care that improve appropriateness and efficiency in one or more of the following areas:
 - Transitions in care
 - Complex High Needs Population (CHNP)
 - Appropriate use of therapeutics
 - Appropriate use of diagnostic tests
- Support SCN activities that focus on reassessing/assessing technologies, services and processes to improve the value for money in AHS and in the broader healthcare system;
- Apply existing evidence (e.g. systematic review, Cochrane review, health technology assessment, clinical pathways) to clinically important areas where there are major opportunities to improve quality and eliminate waste;
- Encourage collaboration and integration of research and innovation activities between Alberta's academic institutions, community providers, SCNs, AHS operations and patients to achieve measurable and sustainable impacts in the health system;
- Build applied health research capacity within AHS, in the health system and in Alberta's academic institutions, with a focus on understanding the factors that enable or inhibit improvement.



Description

The 2015/2016 PRIHS will support implementation research and innovation activities that:

- Address problems that affect significant numbers of Albertans in any part of the continuum of care;
- Produce solutions that maintain or improve quality within AHS and in the healthcare system while substantially reducing current costs (i.e. save real dollars/direct savings).

The PRIHS portfolio as a whole is expected to achieve real cost savings that free up resources for investment in future innovation projects. This requires: a) objective methods to identify and estimate cost savings; b) mechanisms to extract the savings; and c) commitment to redeploying an appropriate portion of the realized savings toward future innovation projects.

Level of Funding: No maximum amount set. Proposed budgets are to be customized to project need. The budget will be assessed as part of the full application review process. The intent is to fund proposals with strong potential of quality improvement and cost-savings (i.e. appropriateness and efficiency), and a budget that aligns with the proposed activities. Higher budget projects would be expected to demonstrate substantial improvements in quality and greater cost savings. Funding will be stage-gated based on achieving deliverables and milestones outlined in each proposal.

Term: Maximum of three years. Projects of shorter duration are encouraged.

Eligibility: Each proposal must involve at least two SCNs in the development and implementation of the evidence informed solution. To be eligible for funding, every proposal submitted to AIHS must be a direct result of the application development and review process conducted by AHS (i.e. Phase I, see *Application Development and Review Process* for more information).

Each eligible application will include:

- Lead and/or Co-Lead applicants who have their primary appointment with an Alberta-based institution;
- The leadership of each SCN involved in delivering the solution must endorse the full application;



- At least one senior operational official involved in the implementation of the proposal (i.e. responsible for resources needed to deliver care and ability to make impact on processes related to patient care) must endorse the full application.

Allowable Costs

The guiding principle is that PRIHS funding should be used primarily to implement, scale, and spread innovation, and support activities that could not reasonably be covered by existing resources. Funding can be used for costs associated with the proposed activities. More detailed information related to this will be provided in the full application instructions.

Costs associated with the following will NOT be supported:

- Major equipment (>\$5,000);
- Pharmaceutical drug-related trials;
- Overhead & administrative costs;
- Local programs or projects in one zone or one hospital that are not applicable to other zones or sectors;
- Salary support for Leads and Co-Leads; and
- Costs associated with development and protection of intellectual property.

Application Development & Review Process

The process of development and review of applications is divided into two phases.

PHASE I: Letter of Intent

The development, submission and review of the LOI will be led by the Research, Innovation and Analytics (RIA) department at AHS. The RIA department will establish a review panel composed of individuals representing knowledge and expertise across Alberta's healthcare delivery settings. The panel will evaluate and short-list the LOIs based on their relevance to Alberta's health system and the feasibility to improve quality while reducing health system spending in as short a timeframe as possible. Following this, members of the Senior Leadership Team at AHS will evaluate the short-list and select up to eight LOIs for development into full applications. Applicants invited to submit a full application to AIHS will be notified in December 2015.

Applicants will submit their LOIs to AIHS by 4:00 pm on **September 24, 2015**. For more information on Phase I, please contact Marc Leduc, Executive Director, Innovation and Research Operations at marc.leduc@albertahealthservices.ca or 780-809-1267.



PHASE II: Full Application (by invite only)

Review of Full Applications. Full Application deadline: **March 31, 2016**

Full Applications developed as a result of Phase I will be received by AIHS and assessed by a committee of expert reviewers. The review committee will rate and rank applications according to specified assessment criteria and make recommendations for funding to the AIHS Board of Directors for final funding approval.

Applications to the 2015/2016 PRIHS MUST provide evidence of:

- Evidence-informed solutions that have the potential to realize substantial quality improvement (focus on appropriateness) and cost-savings for the health system within 3 years or less;
- A clearly articulated change management theory and plan with support from key operational leaders that will drive and implement changes in clinician behavior;
- Successful adoption of the solution by other health systems;
- Feasibility of system-wide adoption, uptake and use of results;
- Continuous patient and family engagement (where possible) to ensure their perspectives are integrated in the development and implementation of the proposal;
- Provincial scope and a sustainable implementation plan.

Assessment Criteria

Full Applications will be assessed using the following criteria:

- **Scientific Merit:** Proposed activities are based on well delineated health questions/issues and define a set of evidence-based deliverables. The environment/framework described for the proposed evaluation and implementation research will contribute positively to the achievement of deliverables.
- **Quality Improvement:** The proposal primarily addresses improvements in appropriateness and efficiency but may also improve any or all of the remaining four quality dimensions.
- **Cost Impacts:** The proposal must demonstrate how cost savings will be objectively measured. Projects demonstrating a cost impact in less than three years will be viewed favorably.



- **Commitment to Change:** The proposal contains evidence of commitment from all relevant stakeholders and a feasible scale and spread strategy at an operational level.

Guiding questions for each assessment criteria are listed below to support applicants in formulating an approach. The list is presented as a guide and not all questions below may be relevant since different innovative solutions will emphasize different approaches.

Scientific Merit

- Is the implementation approach innovative and realistic, and does it contain deliverables derived from an evidence-based approach to health that clearly lead to cost savings for AHS?
- How robust is the theory of change and the strategy proposed to implement change? How will ineffective and inefficient forms of care be eliminated?
- How strong is the body of evidence on appropriateness underlying the proposal?
- Does the design incorporate relevant implementation science research to support the desired change in clinician behavior?
- Are the proposed outcomes applicable to other settings within AHS?
- Is the proposal feasible given the available resources and timelines?

Quality Improvement

- How strong is the focus of the proposal on appropriateness and efficiency?
- How many Albertans are affected by the problem identified – i.e. how significant is the issue?
- How well are patients engaged and involved in the development and implementation of the proposal?
- Does the proposal take into account patient experience and satisfaction when making care more appropriate and efficient?

Cost Impacts

- What is the expected rate of adoption of the new evidence over the course of the proposed project and when will the benefits be realized?
- What current resources will no longer be needed once the proposed changes are adopted at scale (e.g. what inefficiencies and waste are eliminated)?
- How robust is the cost measurement component? Are the datasets required to determine cost impact available? Are experts evaluating and measuring cost-savings engaged throughout the proposal?



- Is the project budget in line with the level of effort, deliverables and projected benefits presented in the proposal?
- Are all future costs associated with implementing the proposal accounted for using a recognized approach?

Commitment to Change

- Does the scale and spread strategy illustrate a strong commitment from the relevant practice, management, and policy levels?
- Have relevant operational stakeholders been included in the proposal development?
- Do the stakeholders involved demonstrate a willingness to implement the change?
- How well have the front-line staff been engaged in the proposal?
- How sustainable is the proposed change once the funding ends?

Management, Reporting and Evaluation of PRIHS Investments

AHS and AIHS will work with successful applicants to produce an approved Project Plan, which will be used to monitor the progress of the projects funded. Release of funds will be stage-gated according to achievement of deliverables and milestones identified in the proposal. An award may be cancelled if progress is delayed, inadequate and/or reporting requirements are incomplete. Consistent acknowledgement of funding is required of successful applicants.

The PRIHS program will be monitored and evaluated using the [AIHS Performance Management and Evaluation Framework](#). The framework includes a program evaluation strategy, logic model and related performance indicators. Reports submitted by the awardees will be used to determine the overall return on investment including, but not limited to, compliance with the Terms & Conditions document, program's performance, evaluating value for money, potential for future programs, and awareness among relevant stakeholders and the general public in Alberta.

Contact Information

For further information on the 2015/2016 PRIHS, please contact:

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