

## CLINICAL INNOVATION OPPORTUNITIES FUND GUIDELINES AND APPLICATION PROCESS

### 1.0 BACKGROUND

The NOAMA Board with the support of the Physician Clinical Teachers Association has designated a portion of the Alternate Funding Plan to a Clinical Innovation Opportunities Fund.

This funding intends to support physician clinical faculty in the development and implementation of new evidence-based enhancements within their clinical practices resulting in a change in practice to facilitate “better care.” This funding is designed to support NOSM’s vision of “innovative education and research for a healthier north” by facilitating the targeted integration of positive clinical research outcomes into the day to day delivery of community care by clinical faculty.

The Clinical Innovation Opportunities Fund Sub-Committee manages the Clinical Innovation Opportunities Fund process and formulates recommendations for the NOAMA Board regarding approval of Clinical Innovation Opportunities Fund projects.

### 2.0 CRITERIA FOR THE CLINICAL INNOVATION OPPORTUNITIES FUND

#### 2.1 Eligibility:

- 1) The lead physician, as well as any physician receiving payments under the Clinical Innovation Opportunities Fund project, must be a participating physician in the AHSC AFP and be actively involved with NOSM.
- 2) The project proposal must indicate a topic and description that is *in-scope with the definition of Clinical Innovation approved by the NOAMA Board*.

The Clinical Innovation Opportunities Fund is directed towards actual clinical practice, incorporating evidence-based changes and practice patterns into different environments following through with NOSM’s innovative education and research, and improved patient accessibility, with an emphasis on “better care”. Examples of clinical innovation include the following:

- Changes in practice which encourage patient engagement and patient-centered care;
  - Meeting community needs through integrated clinical care;
  - Improving quality and patient safety;
  - Innovations in health human resources including interprofessional initiatives;
  - Innovations in health promotion;
  - Innovations in health information management including improving patient access to information;
  - Improving efficiency through process redesign.
- 3) The lead physician, as well as any physician receiving payments under the CIOF must be compliant with the guidelines and applications process of any outstanding CIOF projects to which they are involved.

- 4) The lead physician cannot, at any time, hold more than two approved or current NOAMA CIOF grants.

## **2.2 Funding:**

### **1) Funding Limitation**

The maximum amount of funding per applicant is limited to a total of **\$50,000 per project submission.**

### **2) Multiple Project Submissions**

Applicants can submit more than one project; however, the Clinical Innovation Opportunities Fund Sub-Committee will recommend only one (if any) of the projects for funding.

### **3) NOAMA Funding Sources Limitation**

Funding is only available from one of NOAMA's grant funding sources for the project, Clinical Innovation or AFP Innovation funds.

### **4) Other Funding**

Project leads are to indicate if they have applied for, or are receiving, funding from other sources. In these cases, the applicant must specify the project components (expenditures) which will be paid from the NOAMA funding.

### **5) Capital Assets**

Acquisitions of capital equipment are limited to 10% of the requested NOAMA funding.

### **6) Timing**

The funding is a one-time investment over an agreed upon time frame, but no longer than two years. Funding can only be provided for the initial year with the release of the second year contingent on an annual review process to ensure the project is on time and is achieving its stated objectives.

## **2.3 Funded Projects - Start-Date Requirement**

Funded projects must start within eighteen (18) months of the offer of funding. Any projects not starting within this timeframe will be canceled and the designated funding will be returned to the CIOF fund.

## **2.4 Submission Requirements (including Budget):**

- 1) The proposal must include a target start date, an implementation plan, a budget, and provide indicators of progress against which the success of the project will be measured.
- 2) As a minimum, budget documentation includes budget assumptions as well as supporting calculations and explanations for the individual budget items. Funding is not intended for major capital expenditures.

- 3) Approved local AFP Physician compensation guidelines will be applied to all successful projects. Local guidelines stipulate that:

*Physician compensation is eligible for funding based on the time involved at a rate no higher than the OMA per diem rates whether or not remuneration is for actual clinical activity (see Appendix – OMA Claim Guidelines). This time should not otherwise be clinically remunerated. Group physician support is limited to a maximum of two days per week per year of support. Projects must specify the number of weeks of physician support required.*

- 4) The resource implications for other Institutions must be considered. If there are resource implications (space, staff, and resources) to other institutions such as a hospital, clinic, NOSM, etc., formal written approval by the institution is required. A letter of support must be included with the project.

## **2.5 Ethical Review:**

Research Ethics Board (REB) approval may or may not be required, depending upon the nature of the project. The release of funding will be conditional upon receiving ethical clearance(s) from an appropriate Research Ethics Board (REB) or a letter stating that REB approval is not required for the project(s).

NOSM's Research Support Group is available to assist with the ethics review process. NOSM's Research Support Group can be contacted at [research@nosm.ca](mailto:research@nosm.ca).

## **2.6 Funding Management:**

For individuals or groups awarded Clinical Innovation Opportunities Funding, a demonstration of an appropriate transfer payment agency or accountability mechanism for the monies must be made. Where there is no appropriate transfer agency, the funding will be transferred to NOSM Research Unit for administration. Project Leads are required to follow the approved procedures of the transfer payment agency.

Examples of an appropriate transfer agency include the hospital, clinic, university, or Local Education Group.

## **2.7 Recognition of Funding**

All publications and presentations related to projects funded from the NOAMA Clinical Innovation Opportunities Fund are to acknowledge "Supported by the Northern Ontario Academic Medicine Association (NOAMA) Clinical Innovation Opportunities Fund award" and are to include the NOAMA logo. The logo is available from the NOAMA office.

### 3.0 APPLICATION PROCESS

#### 3.1 Project Application Package

Project application packages are to include the following completed documents:

1. Project Submission Form (*Appendix A*).
2. Project Summary - following the outline provided in the Project Summary Framework (*Appendix B*). (**maximum 5 pages**) (References do not count toward the 5-page limit)
3. Completed Budget Template (*Appendix C*). (**1 page**)
4. Letter(s) of Support from all institutions where there are resource implications as indicated on the Project Submission Form (*Appendix A*).
5. Letter of sign-off by the payment transfer agency (**1 page**).

#### 3.2 Resubmission of Projects Previously Declined

If you are resubmitting a previously declined project, every effort must be made to enhance the quality and merits of the project by addressing the recommendations provided by the peer reviewers.

#### 3.3 Submissions

1. Deadline Date for submissions is 23:59 Midnight on **February 4, 2018**.
2. Email one PDF (Adobe) file format attachment of the complete application package to [grants@noama.ca](mailto:grants@noama.ca)
3. Scanned, faxed and handwritten applications will not be accepted.
4. When emailing applications, please use the standard subject line format of: Project Lead's last name and project title. Example: Jenson: Patient Repeat Prescriptions Study
5. Out of consideration for all applicants, NOAMA is unable to accept incomplete or late applications.

### 4.0 PROJECT REVIEW AND FUNDING PROCESS

- 1) All projects that meet the guidelines for submission will be reviewed by the Clinical Innovation Opportunities Fund Sub-Committee. The Sub-Committee has comprehensive membership representing signatories to the NOAMA agreement including appointees, representing a majority of representation, from the Physician Clinical Teachers Association.
- 2) Lead physicians applying for Clinical Innovation Opportunities Funding are considered to have a conflict of interest with respect to participation on the NOAMA and PCTA Boards, and the Clinical Innovation Opportunities Fund Sub-Committee. They are required to recuse themselves from discussions regarding Clinical Innovation Opportunities Funding recommendations.

- 3) Notification of NOAMA Board funding decisions will be communicated in writing to the applicants after the NOAMA Board meeting.
- 4) Evaluation Criteria:

In the evaluation process, the Clinical Innovation Opportunities Fund Sub-Committee will address: **Does the project positively impact direct patient care?**

The following criteria will be considered in the evaluation process. The Committee makes consensus-based recommendations to the NOAMA Board of projects to be funded.

**a) Project Impact:**

- i. Is the project, patient-centered, focusing on improving:
  - Patient Care;
  - Patient Engagement;
  - Patient Accessibility;
  - Patient Safety.
- ii. Demonstrated alignment with previous and ongoing quality improvement initiatives within the local community or healthcare organization.
- iii. Process improvement – efficiency (resource saving) and effectiveness:
  - Increased access.
  - Integration/bundling of services.
  - Integration of human resources in delivering care.
  - Systems Transformation.
- iv. Measurable improvement in the quality of care for patients, community and beyond.
- v. Transferability of project results.
  - Can it serve as a template to be shared?

**b) Project Merit:**

- i. Alignment with the purpose of the Clinical Innovation Opportunities Funding.
- ii. Well written and focused.
- iii. Innovative and evidence-based.
- iv. Feasibility and viability of the project, including consideration of budget costs.
- v. Relevant performance metrics.

**c) Project Team:**

- i. Does the project create an opportunity for NOSM undergraduate and postgraduate learners to be involved in a research project and to meet the research requirements of their educational program?

**d) Assessment:**

- i. What are the metrics for evaluation?
- ii. Is there a process to measure the results?
- iii. How will the success of the project be judged?

**5.0 PROCESS ASSISTANCE**

NOSM's Research Support Group is available to assist in the process. Contact information is included in the Research Support Group brochure (Appendix E). Email - [researchsupport@nosm.ca](mailto:researchsupport@nosm.ca).

**6.0 REPORTING**

Project Leads are required to submit the Final Report and Final Budget to NOAMA for review. Each final report is due within 60 days of the end of the project. The project start date will be considered the date as indicated on the distribution of funds package. One year projects will have one year plus 60 days to submit their final reports, whereas, two-year projects will have two years plus 60 days to submit their final report. Two-year projects will require a project update to release second year funding.