



## INNOVATION FUND

# AHSC AFP Innovation Fund

Framework and Guidelines – Year XVIII (2025-26)

Innovation Fund Provincial Oversight Committee

### **THERE ARE SEVERAL CHANGES and IMPORTANT REMINDERS FOR YEAR XVIII:**

- 1. Phase I of IFPOC’s new Grants Management System has been implemented**
- 2. Phase II of the new Grants Management System will be launched July 2025**
- 3. Elaboration on one vs two-year projects (page 4)**
- 4. Clarification of funding flexibility (page 5)**
- 5. Rules for project “pivots” (page 11 – 8.0)**
- 6. GOs are strongly encouraged to collect Key Performance Indicators**
- 7. G4 is now called “Project Change Request” and new circumstances for change have been added, so please review closely (page 12 – 4.2.3) (page 21 – 6.0)**
- 8. All updated sections are highlighted in yellow in the documents that follow**

**Release Date: June 20, 2025**

# AHSC AFP Innovation Fund Year XVIII (2025-26)

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# AHSC AFP Innovation Fund Year XVIII (2025-26)

## Background, Process and Framework

**PREAMBLE:** *This “Framework” document is intended to assist (i) Governance Organizations draft their calls for applications and (ii) Project Leads to draft their proposals.*

### Ontario AHSC AFP Innovation Fund

The Innovation Fund was established by the Alternative Funding Plan agreement between the Academic Physicians, the Ontario Medical Association (OMA) and the Ontario Ministry of Health (MOH). Initially, ~\$10M was provided annually by the MOH to Academic Physicians to support the development of new and innovative approaches to health care delivery and to provide leadership in the dissemination of new knowledge across the healthcare system. Since 2019, ~ \$20M has been available to AHSC AFP Governance Organizations annually, in proportion to their allocation of FTEs.

### Innovation Fund Provincial Oversight Committee Mandate

To support the Innovation Fund, the Innovation Fund Provincial Oversight Committee (IFPOC) was established “to provide provincial-level oversight and guidance for the appropriate, effective, and accountable use of these Innovation Funds, and to support the review and selection process.”\* Its mandate, among others, was to: “Provide guidance to the academic physicians to support their efforts to use the Innovation Fund to develop novel strategies to transform health care delivery in Ontario”\*; “Evaluate projects for innovation” \*and “Assess the projects for their potential to a) impact health care delivery; b) be successfully implemented; c) provide measurable metrics for success; d) produce knowledge translation; and e) become transferable (to other institutions/situations)” This mandate was reaffirmed in 2019, when the Physician Services Committee (PSC) stated in their announcement of additional funding: “The additional projects will follow the same rules and procedures in place for the current Innovation Fund, including required review and approval by IFPOC”.

### About the Innovation Fund Objectives and Timelines

All participating academic physicians are eligible to apply, and a competitive peer review process is required to select the most deserving projects at each Academic Health Sciences Centre (AHSC). IFPOC is required to review and assess projects, raise questions or make any recommendations for changes to improve the quality or enhance the chance of success of each project proposal. IFPOC then makes funding recommendations to the Ontario Ministry of Health. IFPOC will soon solicit recommendations from individual Governance Organizations regarding Innovation Fund Best Practices and will publish these on our Grants Management System for your convenience.

The Innovation Fund provides short-term (one-year or two-year) seed funding to support innovative projects and to enable academic physicians to develop programs sufficiently to qualify for additional support (if required) to evaluate novel strategies to transform health care delivery in Ontario. **Both one-year and two-year projects are each given a “buffer” to account for delays (such as obtaining REB or other approvals, recruitment challenges, and other delays). This buffer is an additional two years beyond the one-year or two-year funding period. Projects designated as one-year are expected to have a timeline that, from the point when all approvals are granted, could reasonably be completed within 12 months. Projects with longer timelines should be designated as two-year projects. We also recommend that complex “one year” projects should be two-year projects to provide them with sufficient time to complete their work within IFPOC’s guidelines. For projects already underway, a change from a one-year to a two-year project may be accomplished with a request for project pivot and associated changes using the G4 (Project Change Request) and an email explaining the rationale.** As a reminder, **project deadline extensions are not permitted** with the following exceptions: COVID-19 (if the project code is from 2023 or earlier) maternity, paternity, parental or medical leave.

Projects are deemed particularly “innovative” if they:

- Have definite potential to impact health care delivery
- Are implementable (have realistic project goals)
- Provide clear, measurable metrics for success
- Offer opportunities to translate new knowledge into medical practice
- Are transferable to other institutions or regions of the Province (or beyond)

This year, the amount available to AHSCs is **\$22,903,238.14** in total, across the 17 participating organizations.

## 1.0 RECENT IMPORTANT IFPOC POLICY CHANGES, REMINDERS and UPDATES

### 1.1 Funding Flexibility

IFPOC understands that some GOs are still uncertain as to what flexibility is available to them vis à vis funding approach and its impact on return of unspent funds.

For two-year projects, there are 2 funding options:

1. Funding for both years may be requested and flowed in the first fiscal year. In the event of a project being “retired”, all remaining funding must be returned to the MOH.
2. Funding for one year may be requested and flowed in the first fiscal year (seeking approval for both years at once, but only requesting flow of funds for Year 1, with plans to request flow of funds for Year 2 in another fiscal year). In the event of a project being “retired”, and if year 2 funds have NOT been flowed by the MOH, IFPOC requires that Project Leads return only the unspent balance of year 1 funds.

Considering the above policy regarding the return only of funds flowed only, IFPOC recommends that all GOs who presently fund two-year projects out of a single year’s allocation review their policies and reconsider this approach. If you opt to change the funding approach at your institution, please let us know, and submit a new G3 (Policy Document).

Finally, should a project have to be retired, we ask GOs at the time of return of funds to MOH to inform IFPOC that they are returning the balance of disbursed year 1 funds only, so we can accurately gauge funds available for new projects for the following year (committed vs uncommitted funds) and submit a Final Online Report reflecting the returned funds. At this time, IFPOC will mark the project “Retired” in the system.

### 1.2 COVID-19 Extensions are no Longer Available

Projects with codes “24” and later (Year 16 and beyond) are not eligible for COVID-19 Extensions. Projects with codes “23” and earlier may still be eligible for an extension based on COVID-19 disruptions. **For those eligible projects, an interim report must have been submitted for consideration for an extension.**

### 1.3 P3s (Final Narrative Report – part of the Final Project Status and Accounting Report) have been Restructured

The P3 was restructured in 2024 to collect and organize additional data and to facilitate analysis and reporting of the project results. Key performance indicators (KPIs) provide objective evidence of the influence of the projects based on accepted and widely employed bibliometric indices. Although these objective indicators provide important benchmarks of projects’ **academic** success, they do not always reflect the **clinical** value of the innovation. Stories about the project offer a better graphic description of the impact (clinical value) of projects. Stories provide concrete examples of the benefit of the IF support and the impact of the results obtained. Furthermore, submission of the key performance indicators and stories near the end of a project will permit IFPOC to enhance exposure and to identify potential sources of additional funding for successful projects. Full GO participation in the collection of KPIs will allow IFPOC to create



targets among all academic health organizations and permit comparison of projects for different GOs. We encourage GOs to facilitate the submission of KPIs and stories. Please ensure Project Leads are using the latest forms (Year 18) so we capture this important data.

#### **1.4 Innovation Fund Awards 2025**

Innovation Fund Awards are given to the best projects in specific categories on an annual basis. IFPOC will announce the winners of the Innovation Fund Awards 2025 on IFPOC.org in the fall. Innovation Fund Awards will be selected from among those projects nominated by their Governance Organizations or by IFPOC members. GOs are encouraged to submit their best projects. Those with positive results are more likely to be scored higher than new projects which do not yet have results. However, exceptionally innovative new projects are occasionally highly scored and may be recommended.

#### **1.5 New IF Grants Management System**

The Innovation Fund Provincial Oversight Committee contracted Salesforce and an IT architect partner to build a new Grants Management System and a Portal to manage the competitions and issue reports. The system (Phase I) was up and running for the Year 17 competition. We are still testing the new system and anticipate that Phase II will be operational in July 2025. For next year, following the implementation of Phase II, two of our Governance Organizations will pilot the full end-to-end functionality of the system that will eventually include submission directly by individual Project Leads and have a comprehensive review module with reports at all stages. IFPOC will continue to work closely with a group of GO Administrators for advice and input on their individual needs and will make use of surveys to gauge needs, issues and concerns of all GOs. If, in between surveys and consultations, any GO has questions or concerns about the system, we urge you to contact us as soon as possible.

### **2.0 Oversight and Administration of the Innovation Fund:**

The Provincial Academic Medicine Steering Committee, with the support of the AHSC AFP Governance Organizations, established the Innovation Fund Provincial Oversight Committee (IFPOC) to oversee the AHSC AFP Innovation Fund. The IFPOC includes representation from the research and innovation sectors, academic medicine, government as well as the AFP Governance Organizations.

The Executive of the IFPOC is comprised of 4 Committee members: Dr. Richard Weisel, Chair of the Committee, Dr. Davy Cheng, Vice-Chair of the Committee, and Dr. Rajin Mehta, AFP Governance Vice-Chair at Sunnybrook, and Dr. Paul Moayyedi, Assistant Dean of Research at McMaster.

Other Committee members represent a variety of specialties, Governance Organizations, and Universities: Victor Han (AMOSO), Rachel Holden (SEAMO), Roy Masters (UOHI), Andrea Proctor, (Manager, Evidence Synthesis Unit, MOH), Neeta Sarta (Acting Director, Physician Relations and Contract Oversight Branch, MOH), Alan Karovitch (TOHAMO Governance Chair), Vincenzo DeLuca (CAMH), and Blake Woodside (UHN and OMA Representative) or Tim Redmond (Parry Sound, Former NOSM Chair and OMA Representative).

#### **2.1 Innovation Fund Showcase**

To support the dissemination of new knowledge and best evidence-based practice across the healthcare system, IFPOC sponsors the Innovation Fund Showcase, previously held in November 2010, 2013, 2016, 2019, and 2023. The next Showcase is planned for November 2027.

## 2.2 Innovation Fund Awards

To further support the dissemination of new knowledge and to acknowledge the excellent work being undertaken by academic physicians across Ontario, IFPOC provides Awards annually to those projects deemed “best in field”. Nominations are sought from individual Governance Organizations, as well as selected by IFPOC, and winners are announced annually in November. IFPOC undertakes a two-layer review of each nominated project – first to determine which category each project will compete in, and a second more detailed review scoring projects against one another within each category.

## 2.3 Forms and Data Input

IFPOC hosts a website where forms for the submission of applications for funding are uploaded. Each year IFPOC provides new policy clarifications intended to streamline the Grants Administration process. We recommend that in addition to providing potential new applicants with the latest forms (P1 and P2/4), Governance Organizations provide the latest versions of P3 and P2/4 to all current project leads so that only the latest forms are submitted.

Forms Required and Method of Submission					
Governance Organizations					
FORM ID	FORM Title	FORM Method of Submission	FORM Purpose	FORM Timing	NOTES
G1	Funding Request	Upload	To request IFPOC approval of funding for new and existing projects	January 9, 2026	Available at IFPOC.org
G1 Supplementary	Funding Request Budgets	Upload	To confirm funding amounts of funding for new and existing projects already approved for funding	January 9, 2026	Available at IFPOC.org
G2	Substitution Request	email	To request IFPOC approval to retire a project which has not spent any funds and subsequently activate a pre-approved contingency project from that funding year.	Within first year of funding approval	Available at IFPOC.org
G3	Policy Confirmation	Upload	Required only if there are any changes to key policies, or AT LEAST every three years.	January 9, 2026	Available at IFPOC.org
G4	Project Change Request (formerly: Leave and COVID-19 Extension Requests)	email	For use for project changes (pivots, changes to Lead, other), maternity, parental, family or medical leaves as well as delays resulting from pandemic. NOTE: not COVID-19 extensions not available for projects funded in Year 16 (with code 24 or later)	Ad Hoc : at least two months prior to deadline for FPSAR	Available at IFPOC.org
n/a	Project Summary	Online Entry	Key information for project from P1 including plain language abstracts.	January 9, 2026	Funding requests online must be reflected accurately in the proposal budget (P2/4) and be accurate +/- 5% with the numbers in the project proposal (P1) budget
n/a	Interim Report	Online Entry	Key information only	During Year 2 and no later than July 1 of Year 3.	
n/a	Final Report Summary	Online Entry	Key information including KPIs from P3 and P2/4 into online This is part of the "Final Project Status and Accounting Report" along with P3 and P2/4	By end of funding period plus two year buffer: for one year projects up to 3 years and no later than June 1 of Year 4; and for 2 year projects, up to 4 years, and no later than June 1 of year 5.	
PLEASE NOTE:	All completed forms should be submitted in the same format as originally presented. Please save Excel as a PDF before uploading to IFPOC. Please DO NOT submit /Upload copied or scanned versions of IFPOC's forms.				

Forms Required and Method of Submission					
Applicants and Grantees					
FORM ID	FORM Title	FORM Method of Submission	FORM Purpose	FORM Timing	NOTES
P1	Project Proposal	Download from Website and email to your Governance Organization	Part I of Project Application Provides your budget request, duration of project, project goals and timelines, potential impacts, and measurements for success.	Check with your Governance Organization	Available at IFPOC.org - submit with P2/4
P2/4	Proposal Detailed Budget and Financials	Download from website and email to your Governance Organization as an EXCEL document.	Part II of Project Application AND of Final Project Status and Accounting Report Provides details about project budget including sources of funding other than IFPOC, plans for expenditures (year 1 and if applicable, Year 2)	Check with your Governance Organization - submit with P1 and at the end of the project with the P3	Available at IFPOC.org - submit with P1 and later with the P3
P3	Final Narrative Report	Download <b>latest year version</b> from Website and email to your Governance Organization	Part I of Final Project Status and Accounting Report Provides details about your project, successes, opportunities for implementation, publications, conferences, etc. and opportunities for further funding	Check with your Governance Organization	Available at IFPOC.org - submit with P2/4 Please use latest year's forms for submission
P5	Change in Status Form P5	Download from Website and email to your Governance Organization	Where applicable only (check with your GO) for use changing a one-year project to a two-year project with NO MAJOR CHANGES to approach or content of project. One additional year is added to the original due date for final reporting regardless of when the P5 is submitted.	Check with your Governance Organization	Available at IFPOC.org
D	Declaration for Substitution	Download from Website and email to your Governance Organization	Where applicable only. For use if your project was accepted as a contingency project that is being activated by your GO.	Check with your Governance Organization	Available at IFPOC.org
PLEASE NOTE:	All completed forms should be submitted in the same format as originally presented. Each has specific instructions. Please submit P2/4 to your Governance Organization as an Excel Document. The GO will save your Excel as a PDF before uploading to IFPOC. Please DO NOT submit /upload copied or scanned versions of IFPOC's forms.				

### 3.0 Innovation Fund Year XVIII 2025— 2026 Timeline

Year 18: 2025	
KEY DATES	ACTIVITIES
June 2 2025	IFPOC issues the FRAMEWORK document to Governance Organizations and the latest forms are available at IFPOC.org
June 27 2025	Deadline for submission of nominations for IF Awards 2025
June 30 2025	IFPOC issues letters to individual GOs confirming amounts funded in Year XVII and amounts available for Year XVIII.
November 2025	Innovation Fund Awards 2025 are announced
December 2025	IFPOC issues reminders to GOs of upcoming 2026 Final Project Status and Accounting Report deadlines
December 1- 14 2025	IFPOC issues calls for nominations for Awards 2026 (due May 1, 2026)
Year 18: 2026	
KEY DATES	ACTIVITIES
January 9 2026	Deadline for AHSC AFP Governance Organizations to submit their funding requests for new and existing projects
Jan 16 – Feb 6 2026	IFPOC reviews proposals and submits questions or concerns about eligibility, whether proposals meet requirements established by IFPOC or the individual Governance Organization. The AFP Governance Organizations will respond to IFPOC with explanations or the submission of alternate proposals
February 12 2026	IFPOC meets virtually for Annual Review of Project Proposals
Feb 13 – 28 2026	IFPOC submits Committee's questions to GOs, reviews responses, approves modification and subsequently makes recommendations to MOH for distribution of funding for 2025-20256(Year XVIII) AHSC AFP Innovation Fund
March to April 2026	IFPOC surveys GO Administrators for recap of Year XVIII processes and consultation on Year 19 Framework – with the option to meet if necessary
March 31 2026	MOH distributes Innovation Fund allocations to each AHSC AFP Governance Organization, based on their approved proposals for funding by the IFPOC
March 31 2026	Final Project Status and Accounting Reports are due
May 1 2026	Governance Organizations' deadline for nominees for IF Awards 2026
June 1 2026	IFPOC issues FRAMEWORK document to Governance Organizations for Year 19 and all Forms are available at IFPOC.org
November 2026 – TBD	Innovation Fund Awards 2026 announced



## 4.0 Provincial Funding, Approval and Accountability Processes

### 4.1 Funding

Funding will be allocated on the following basis, as set out by the Academic Medicine Steering Committee (AMSC) and approved by the AHSC AFP Governance Chairs:

*“Each AHSC AFP has been allocated a portion of the available Innovation Funds in fiscal 2025 - 2026, based on a minimum \$100,000 base allocation to each Governance Organization, with the remaining funds distributed to each Governance Organization (GO) based on the number of Full-Time Equivalents (total FTEs participating in AFP) at each AHSC.”*

AHSC AFP funding is allocated only for approved projects and cannot be employed for any other purpose. Carry-overs are not permitted. Funding may not be allocated by Governance Organizations for unspecified purposes and cannot be moved between projects once distributed by the MOH.

Governance Organizations are required to detail their internal policies in the G3 Form. IFPOC does not require a minimum or a maximum dollar value per project, or per year. However, many GOs have chosen to fund projects to a specific amount. Since the funding available increased since 2017, **GOs may wish to increase the “up to” amounts available for projects (either overall or by year). In addition, they may wish to also increase the number of projects funded or to build in additional flexibility to allow exceptions to the maximum dollar policy. We ask GOs to please spend the full allocation to which they are entitled. If your anticipated funding request is less than your allocation, please contact IFPOC before the January deadline IFPOC will make every effort to assist you to modify your requests to utilize your full allocation.**

#### 4.1.1 IFPOC Policy on Substitutions, Terminations, and Unspent Funds:

Contingency projects, Interim Reports, substitutions, terminations, and changes to Project Leads

##### Funding Period

1. Funding for approved projects begins April 1, 2026 (after funds are forwarded to the institutions from the MOH on March 31, 2026).

##### Annual Review

2. Each project should be reviewed annually by their Governance Organization to determine whether (1) the project has made acceptable progress and (2) the project has expended any of its funds. Organizations must provide an interim report to IFPOC during the second year and before July 1 of the third year.
3. If a project is not making significant progress, IFPOC recommends that the GOs consider taking remedial action such as: replacing the project lead, providing a mentor to the project lead, consider pivoting the project (same goals, with slightly altered methodology) so that the project is achievable within the time and funding available. The goal is to spend all of the available funding and submit a Final Project Status and Accounting Report by the deadline.

##### Contingency Projects and Substitutions

4. Each Governance Organization is invited to submit “contingency” projects for prior approval in case any of their priority projects do not get started within one year of approval. These are optional but are strongly encouraged.
5. If no “contingency” projects have been previously reviewed by IFPOC, no substitutions may be made that year.
6. If a project did not make acceptable progress and has not spent any of its funds within Year 1, the Governance Organization may request that IFPOC permit a substitution of that project with a “contingency project” which had been previously reviewed and approved by IFPOC using a G2 Form.

## Interim Report

7. At some time during year 2 (or up to July 1 of year 3) following funding by the MOH, an ONLINE INTERIM REPORT should be completed by the Governance Organization to ensure that projects are “on track” and that Project Leads have begun spending their funds and do not require any additional support from their GO or from IFPOC to complete their project and submit their Final Project Status and Accounting Report on schedule. An interim report must be submitted on time if an extension request for projects with a code 23 or earlier is to be considered. **Extension requests will not be considered for projects which have not submitted interim reports.**
8. Pivot: if at the time of the interim review the Governance Organization identifies concerns about progress, they should consider remedial actions including, if necessary, a change in project focus (such as a pivot, see section 4.2.3 below) or a change in the project lead so that the project is not in default at the time when the Final Project Status and Accounting Report is due. If remedial actions are unsuccessful, then the project may be terminated, the remaining funds returned to the Government of Ontario, and IFPOC notified.
9. If approved as terminated, the project will be filed in IFPOC system as “retired”, and the GO will arrange to return funds to the Government of Ontario, as well as submit a detailed budget of funds spent to date.
10. In addition, the GO should indicate on the interim report what remedial steps are being taken or confirm to IFPOC that the project is returning funds along with a submission of Final Project Status and Accounting Report (P2/4).
11. Under exceptional circumstances, if a project is unable to proceed at any time during the granting period (1 or 2 years), and if the Governance Organization makes a compelling explanation to IFPOC, then the project may still be substituted with a contingency project provided the unsuccessful project has not used any of its funds.  
No substitutions may be made if any Innovation Fund money has been spent on an “unsuccessful” project.
12. Change in Project Lead: If a “Project Lead” cannot continue to lead a project before the Final Project Status and Accounting Report is submitted, a co-Lead, or another appropriately qualified AHSC AFP physician may be substituted after approval has been granted by IFPOC. All substitution requests must be submitted by the GO in an email to IFPOC, stating that the replacement project lead is a qualified AHSC AFP physician, has the necessary qualifications to take over the project and has been approved by the GO. All substitutions must be approved by IFPOC.

## 4.2 Application, Review, and Reporting Process

Individual AHSC AFP Governance Organizations will issue to their Participating Physicians a request for proposals along with the Year XVIII Framework for projects seeking support through the AHSC AFP Innovation Fund. Please ask physicians to use the latest framework and forms, downloaded from our website at IFPOC.ORG. They should all contain the notation: version # 18.

Each AHSC AFP Governance Organization, according to the Framework and Competitive Peer Review Process and Review Criteria set out below, should establish a common and transparent competitive peer review process to adjudicate and rank proposals being considered for support with Innovation Funds.

Selection committees will choose the best proposals for their institution. From among those, IFPOC specifically requests that Selection Committees and Governance Organizations give priority to projects that could impact health care delivery beyond their institution and/or could be adopted across the province. GOs may wish to direct potential applicants to IFPOC.ORG to review other project abstracts in their field and to contact potential collaborators at other institutions.

### 4.2.1 Innovation Fund Provincial Oversight Committee Review

- The IFPOC may ask for further details and/or clarification regarding any proposal at its discretion.
- The IFPOC may not delay the transfer of funds from the MOH to Governance Organizations but may request that funds not be released by Governance Organizations to support a particular proposal until the IFPOC is satisfied with clarifications requested.

- Governance Organizations will monitor and be accountable for funding received through the AHSC AFP Innovation Fund.

#### 4.2.2 Reporting: Interim and Final Project Status and Accounting Reports

- Governance Organizations are required to conduct a project review and report to IFPOC in a short online report during year 2, and no later than July 1 of year 3 for each project. Governance Organizations are also encouraged to review previous year's projects (during year 1) to ensure they have begun their work and spent some of their funds. This is especially important in view of the March 31 deadline for substitutions with contingency projects, which can only take effect if no funds have yet been spent.
- Project Leads are required to submit Final Project Status and Accounting Reports (FPSARs) to the GO before their own internal deadline.
- Governance Organizations are required to submit project FPSARs to IFPOC and complete a brief online summary about the project's status, achievements, key performance indicators (KPIs) and financials.
- Each "Final Project Status and Accounting Report" is due by March 31, with flexibility to submit up to 2 months later (June 1) within two years after the funding term of the project (e.g. 1-year projects funded in March 2022 must submit Final Project Status and Accounting Reports by March 31, 2025 (with flexibility until June 1, 2025), and 2-year projects funded in March 2022 must submit these by March 31 2026 (with flexibility until June 1 2026).
- Many projects may not have completed all the aims of the original proposal at the time their Final Project Status and Accounting Reports are due. **At 2 years after the end of the funding period, IFPOC requires a report that documents the progress made and the funding spent regardless of the progress made.** If possible, each project should spend all its allocated funds before the due date even if all aims have not been achieved. All projects are required to submit their Final Project Status and Accounting Report at the end of this two-year buffer period and any unspent funds at that time must be returned to the Ontario Government. **Governance Organizations are encouraged to ban Project Leads from submitting new proposals for consideration until all overdue reports have been received and approved.** In addition, Governance Organizations are asked to provide an explanation along with a financial accounting of funds spent to date to IFPOC and the Ministry, and any unspent funds for those projects will be returned to the Province. **For projects reporting before the end of their term date (within the first year for one-year projects, and within the first two years for two-year projects), please note an IF interim report (online) must be filled in and submitted prior to the system allowing you to load your final project status and accounting reports.**
- At three years and again at 5 years after the date of submission of Final Project Status and Accounting Reports, IFPOC's system will send an automated request for an update of the project Key Performance Indicators. This system will be built into our new Grants Management System and we will advise you on details at a later date.

#### 4.2.3 Changes, Extension Requests and G4

- Extension requests are no longer permitted (except for maternity, paternity, parental or medical leave and for delays due to COVID-19 which are only available for projects funded in 2023 and earlier).
- **Project Pivot: Under certain special circumstances, a project pivot (including Project Lead changes) may be considered for extensions. If this is the case, please include the G4 with your email request detailing the issue(s) encountered, the remediation being undertaken (change in focus, new timeline, new leads), and the rationale for additional time.** Such a "pivot" could be a more limited investigation or a different approach to the original purposes of the project and acceptable to IFPOC. If the Project Lead has support of their GO, then IFPOC will consider such requests on an ad hoc basis.
- A Leave or COVID-19 Extension Request now called the "Project Change Request" (G4) is available at IFPOC.ORG and should be emailed to Janice Hutchison ([JaniceHutchison@rogers.com](mailto:JaniceHutchison@rogers.com)) and copied to Sarah Garson ([sgarson@GarsonConsulting.com](mailto:sgarson@GarsonConsulting.com)). GOs, please review these forms prior to sending and ensure all of the appropriate information is included. **IFPOC will load the finalized G4 into the project page within the Grants Management System on behalf of the GO once the G4 is ready for submission to the IF Executive for consideration.**

### 4.3 Termination of a Project

Governance Organizations are encouraged to use all means available to support Project Leads to complete their projects. In the unfortunate event that a project is unable to continue – either it has lost its Project Lead, the proposal is no longer viable, or for any other unforeseen reason, the Governance Organization may send a letter (email) to IFPOC requesting that a project be terminated. The email should be sent to the IFPOC, copied to the MOH and should contain the following information:

- i. Reason for termination – a detailed explanation.
- ii. If any funding has been spent, a detailed budget.
- iii. If any funding remains, the balance of the amount distributed by the MOH must be returned to the Government of Ontario.

If approved, the project will be filed in IFPOC system as “retired”, and the GO will arrange to return funds to the Government of Ontario.

### 4.4 Intellectual Property and Project Information

The Innovation Fund Provincial Oversight Committee has established the following policy for the dissemination of Innovation Fund information:

- ❖ Ownership of the Intellectual Property will remain with the Institution and/or Project Lead.
- ❖ Once a project has been approved for funding, the name and contact information of the Project Lead, the total amount of Innovation Fund funding, as well as the abstract will be made public either by IFPOC or the Government of Ontario.
- ❖ Once a project is complete and its final report has been submitted and approved, the name and contact information of the Project Lead, the final amount of Innovation Fund funds spent, as well as the final abstract will be made public by IFPOC through our website [ifpoc.org](http://ifpoc.org) or the Government of Ontario.
- ❖ Any further details regarding a project will be released to interested parties only with the agreement of the Project Leads.

### 5.0 Eligibility Criteria

The “Project Lead” for each proposal must be a “Participating Physician”, as defined in the AHSC AFP Agreement.

To hold Project Leads accountable for funding received from the IF, IFPOC strongly recommends GOs decline proposals from Project Leads who have overdue Final Project Status and Accounting Reports.

Innovation Funds should be used to support the human resources and infrastructure necessary to implement, test and/or evaluate new concepts and modes of health care delivery. In general, the funds are not intended for equipment; however, the innovative use of equipment could form the basis of a project. Funding may not be used to defray the cost of implantable medical devices or drug trials. While this funding is clearly intended to support innovative clinical care to patients, it is not intended as a substitute for perceived inadequacies in either the OHIP fee schedule or individual institutional funding. Innovation Funding is not intended to fund long-term clinics, facilities or other “bricks and mortar” endeavours.

The Innovation Fund was intended to support projects with funding for up to 2 years. Additional funding for the project beyond 2 years should be sought from sources other than the Innovation Fund.

Each AHSC should provide either a clear definition of “innovation” for their institution on the G3 form or indicate that the IFPOC definition is being used. Each individual proposal should reference that definition and indicate why the



project is innovative for that institution and each Governance Organization should indicate that each project conforms to its definition of innovation.

The IFPOC will review each application. Those projects that do not align with the Provincial Framework or do not meet the criteria established by their own Governance Organization will be returned to the Governance Organization for revision, or the Governance Organization will be invited to replace that project with another application during the review process that year and no later than the end of March.

### **5.1 Scope of Projects Eligible for Funding**

Innovative, promising and deserving projects are eligible to receive funding through the Innovation Fund across a wide scope of areas of focus including but not limited to:

- Patient education and enablement
- Continuity of care (Health Services)
- Process improvement models in efficiencies, patient safety and quality of care
- Support/collaboration from AHSCs with the community
- Virtual care (eHealth, mHealth)
- Knowledge transfer across AHSCs and the broader health care system

If GOs are submitting QI projects for consideration, IFPOC recommends that they also consider sharing results of successful QI initiatives with their fellow GOs once the project has submitted its Final Project Status and Accounting Reports via IFPOC's Grants Management System.

To facilitate IFPOC's ability to provide "leadership in the dissemination of new knowledge", the Innovation Fund particularly encourages projects that address the current health system priorities. The Ministry of Health recently released its plan "[Your Health: A Plan for Connected and Convenient Care](#)" which identified patient-centred care priorities around: the right care in the right place (e.g. improving access to care at home and in communities, improving access to mental health and addictions services, connecting Ontarians to health information 24/7) and faster access to care (e.g. reducing wait times for surgeries and procedures, faster access to emergency care) and supporting end of life care.

For 2025 – 2026, based on experience, the following are examples of projects that were judged to be less innovative by IFPOC:

- Drug or other industry related projects, and
- Projects designed to evaluate a new device / drug in which there is already significant industry sponsorship.

### **6.0 Evaluation of Project Proposals**

IFPOC requests that each project be reviewed twice: once by each GO's internal competitive review process, and a second review, by IFPOC.

#### **6.1 Competitive Peer Review Process**

Each AHSC AFP Governance Organization will establish a competitive peer review process that invites expressions of interest from across the AHSC and results in funding recommendations that are based on demonstrated merit, not equity. For example, the allocation of Innovation Funds on a per FTE basis at individual AHSCs should not be supported. Governance Organizations are encouraged to include one or more representatives on their peer review committee from outside of their AHSC Governance Organization, to support an objective review process.

## 6.2 Review Criteria

The assessment of proposals by each Governance Organization’s competitive peer review committee should continue to be guided by the above, and should be based on the following criteria:

- a. Potential impact
  - Potential impact within and beyond the local institution and the academic community: the likely significance of the project in generating and transferring new knowledge and beneficial results beyond the project participants
  - Potential to improve understanding in the project’s subject field: presence of a documented and coherent knowledge translation strategy for exchanging information generated by the project beyond the project participants.
  
- b. Proposal merit
  - Innovative and original idea(s)/objectives
  - The applicants should indicate why the proposal is innovative for their institution or constituency
  - Well-written and focused proposal
  - Comprehensive relevant performance metrics that can be used at the end of the first year (and any subsequent years) of funding
  - Appropriateness and relevance to scope of Innovation Fund
  - Feasibility and viability of project, including consideration of budget costs.
  
- c. Team strengths
  - Experience and skills of the project team - track record; historical productivity and impact
  - The inclusion of early career investigators
  - Likelihood that this team can complete the project being proposed
  - Time and availability to commit to the project
  - Collaborative arrangements with colleagues if applicable.
  
- d. Assessment
  - What are the metrics for evaluation?
  - What are the timelines and when do you expect to see progress? What kinds of progress do you expect?
  - How will you judge if your project has been a success?
  
- e. Priority
  - IFPOC requests that review committees and Governance Organizations give priority to projects which have the potential to impact health care delivery in multiple institutions or across the Province
  - If two projects otherwise have equal merit, the Selection Committees and Governance Organizations are asked to give priority to projects that could impact health care delivery beyond their institution and/or could be adopted across the province.

IFPOC Members will consider the proposals submitted for funding based on several guiding criteria:

<i>Assessment:</i>	clear and measurable outcomes indicating that the project will improve health care delivery
<i>Merit:</i>	distinctly “innovative” for their institution
<i>Potential impact:</i>	the project can be translated to clinical practice and impacts health care delivery
<i>Strength:</i>	quality of proposal and participants
<i>Scope:</i>	the potential to impact health care delivery in multiple institutions across the Province

### **6.3 Common Scale for Evaluation**

Each Governance Peer Review Committee should use a single evaluation scale for evaluating, rating and ranking its proposals. The CIHR Merit Review Scale is one such example.

### **6.4 Relevance Review**

Governance Organization Competitive Peer Review Committees may evaluate proposals for relevance in relation to previously identified health care priorities for their institution (if applicable, as entered on G3).

### **6.5 Process Integrity**

The integrity of the Innovation Fund competitive peer review process, like others, will be dependent on shared principles of confidentiality and conflict of interest.

Confidentiality:

All information contained in expressions of interest or applications should be considered strictly confidential. The applications and any discussions related to them may not be used for any purpose beyond that for which they were originally intended. Outside of their group deliberations, peer review committee members must not discuss expressions of interest or applications with other parties.

Conflict of Interest:

Governance Organizations, review committees, and Project Leads are expected to be aware of, and to manage, any conflict of interest situations within the peer review committee. To that end, the P1 includes a section where the Project Leads may declare any potential conflicts and explain how they will mitigate any unwanted impact from that conflict of interest: for example, if a Project Lead is also participating in the design/sale of a product which will be used in testing an innovation in their workplace. In that case the Project Lead should detail how the conflict of interest will be managed. We also ask that Project Leads declare who (individual or organization) will hold title, patent, or commercial ownership of any such product. AFP Governance Organizations are asked to confirm with IFPOC how potential conflicts of interest will be managed at their institution (G3). Governance Organizations must make every effort to ensure that the decisions of its peer review committee are fair, objective and transparent, and that the peer review process is communicated broadly to practice plans and Participating Physicians. Peer review committee members may be determined to have a conflict of interest if they, or an individual Participating Physician they represent, submit an Innovation project proposal for consideration by the peer review committee. Peer review committee members deemed to have a conflict of interest on this basis shall be excused from discussions and decisions of the peer review committee as they pertain to project proposals for which the conflict of interest exists. Each member should attempt to avoid adversely influencing competing applications.

## **8.0 Acknowledgements and Contacts**

Should Project Leads (or Governance Organizations) wish to acknowledge Innovation Fund as the source of funding for their projects at conferences, on posters, in publications, or on websites, the correct acknowledgement is as follows:

“... was supported by the Innovation Fund of the Alternative Funding Plan for the Academic Health Sciences Centres of Ontario.”



For information about IFPOC, the Innovation Fund, its framework and/or process, or to view project abstracts from across the Province, please visit [IFPOC.ORG](http://IFPOC.ORG) to download forms, for FAQs, to see past and current projects, and to use contact links, or to contact us directly.

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# AHSC AFP Innovation Fund Year XVIII (2025-26)

## Appendices

Please find attached **within this Framework** instructions related to the following documents, each of which can be found at IFPOC.ORG:

### **For Governance Organizations:**

- Appendix A: AFP Governance Organization Process Details regarding
- 1) Policies and Procedures (G3)
  - 2) Funding Requests including Funding Guidelines and Funding Process
  - 3) Online Interim Reports
  - 4) Contingency Projects
  - 5) Final Project Status and Accounting Report
  - 6) Other Forms
  - 7) About Change of Status Form (P5)

### **For Innovation Fund Applicants:**

- Appendix B: Applicant Process Details regarding
- 1) About Project Proposals (P1 and P2/4)
  - 2) About Final Project Status and Accounting Report (P3 and P2/4)
  - 3) Form P1 and Narrative Proposal
  - 4) Form P2/4
  - 5) Form D
  - 6) Forms P3 and P2/4 Final Reporting
  - d) Changing Project Status (P5)

### **For Governance Organizations and Innovation Fund Applicants:**

Appendix C: New Grants Management System Instructions

Appendix D: OMA per diem Guideline

**Please find located at IFPOC.ORG by clicking on <https://ifpoc.org/> the following 9 related documents:**

Funding Request:	G1
Substitution Request:	G2
Policy Confirmation:	G3
Project Change Request	G4 (Includes leaves and COVID but for COVID only for projects with a code “-23-“or earlier)
Project Proposal:	P1 (some GOs have individualized P1s)
Budget and Financial Statement:	P2/4
Final Narrative Report:	P3
Change of Status:	P5 (only where allowed)
Declaration for Substitution:	D

# APPENDIX A - AHSC AFP Innovation Fund Year XVIII (2025-26)

## AHSC AFP Governance Organization Process Details

Each project, once approved by IFPOC, is assigned a unique identifier: a three letter GO identifier – a two-digit year identifier – and the unique three-digit code identifier for each project. This coding system allows IFPOC, our Grants Management System, and the Project's Governance Organization to track all projects and document their progress to date, funding allocated, and facilitates reporting. **In any communications with IFPOC regarding a specific project, please use this IFPOC identifier so that we can quickly identify the project in question.**

We are now providing P1 and P3 forms only in MS Word Open format. Please ensure that you and your Project Leads are using Calibri 11pt font. GOs, please ensure that forms have not been altered, and that Project Leads have completed all sections. **Strict adherence to page maximums is required given that we are now using MS Word Open P1.**

All Governance Organizations are required to submit a G1 form annually through our new Grants Management System portal – whether they are submitting new projects or not. The simplified G1 form is available to GOs for upload along with an Excel spreadsheet known as the G1 Supplementary.

If new projects are being submitted, the relevant P1 and P2/4 forms must be uploaded prior to the G1.

Applicants are asked to fill in P1 and P2/4 for submission to their Governance Organizations – found at [ifpoc.org](http://ifpoc.org). Please ask Project Leads not to alter these forms or they will be rejected. P2/4 should be saved as Excel by Project Lead.

The P2/4 budget amount being requested from IFPOC must match the amount being requested on behalf of the Project by their Governance Organization. This same amount should also be reflected accurately to within +/-5% in the P1. Governance Organizations are asked to fill in Online Interim Reports for ALL projects, during year 2 and no later than July 1 of year 3.

### 1. POLICIES AND PROCEDURES (G3)

Updates or confirmation of local budgetary and conflict of interest policies and guidelines in the G3 are required at least every 3 years, or whenever changes are made. This year, for all GOs, a G3 Policy Confirmation is due prior to January 9, 2026, ONLY if any policies have changed, or if you haven't submitted one for the past 3 years.

The G3 Policy Confirmation confirms a Governance Organization's: selection process, conflict of interest guidelines, definition of innovation (if different or more specific than those of IFPOC), and health care priorities (if you have any for Innovation Fund). It also informs us about your decisions regarding whether you allow physicians to be remunerated out of Innovation Funds, and whether you charge projects administration fees (and how). It also provides us with an understanding of your own funding approach and informs IFPOC if there are any internal restrictions on how you allocate Innovation Fund money (such as minimum or maximum amounts per project, or per year). As a reminder, IFPOC does not require maximum amounts per project or per year, and recommends that GOs build some flexibility into their funding policies.

## 2. FUNDING REQUESTS (G1 Declaration and G1 Supplementary)

The Funding Request Form has two purposes:

- a) To confirm that previously funded projects are on track and should receive their second-year funds (when applicable)
- b) To confirm that projects selected by the Governance Organization have been reviewed and approved by the relevant hospital and university.

Even if a Governance Organization is not submitting NEW projects for funding, we ask that they complete Form G1 annually to indicate that previously approved projects are on track and eligible for second year funding according to the GO-approved guidelines. G1 will also confirm support for funding and related policies. During this process, we recommend that GOs ascertain whether projects still in their first year have spent any of their funds.

The G1 should be completed and uploaded AFTER all the project files, to ensure project codes and funding are aligned. Based on our past experiences, when projects contain significant information technology components, the Chief Information Officers (CIOs) of their institution can facilitate the activity of the projects. Therefore, we encourage Project Leads to inform their CIOs if their projects are deemed to have significant IT components (integrated into proposal P1 for applicants). Likewise, Governance Organizations are asked to ensure that their institutional IT staff review and approve proposals before sending project proposals to IFPOC for funding (integrated into G1).

### 2.1 Funding Guidelines

Governance Organizations may only submit funding requests to IFPOC for 1 or 2 years. Any requests for funding additional years of any projects will be declined.

- Governance Organizations may only submit funding requests to IFPOC that add up to their maximum amount allowable in any single funding year. The total funding request on G1 for all projects in any year may not be an amount higher than the allocation allowable from the Ministry.
- To improve individual accountability, IFPOC recommends GOs decline new proposals from PLs with an overdue Final Project Status and Accounting Report. Any G1 that requests funding beyond that which is allowable from the Innovation Fund will be declined. At an individual project level, it is essential that the project budget and financial report (P2/4) are clear about how much funding is provided by IFPOC, and how much of that funding was spent. We also welcome information about additional sources of funding, but these should be reported separately in the P2/4 as per instructions.
- Governance Organizations are not required to report any earned interest on funds provided.
- Governance Organizations are asked to indicate on G1 that they have reviewed and approved all NEW proposals submitted to the IFPOC for funding according to the provincial framework and according to the process in their G3 that they had previously submitted for approval by IFPOC.
- AFP Governance Organizations will submit individual Project Proposals (P1 and P2/4) recommended for funding to the IFPOC in January.
- The budget amounts being requested from IFPOC by Project Leads for their projects in the P2/4 (Year 1 and Year 2) must match the amount being requested by GOs on behalf of that project in the online project summary. In recognition that P1 document evolves as it is reviewed, we no longer require that budget request amounts be perfectly aligned, but **they must be within +/-5% to ensure that the plan as laid out in the narrative proposal is sufficiently funded to be successful.**
- Use of Innovation Funds for physician remuneration may not exceed current OMA Per Diem rates (see Appendix D) whether this remuneration is for actual clinical activity or not.
- If GOs wish to charge fees to Projects for administration costs they must apply them fairly across all projects. **If GOs wish, they may take administrative fees “off the top” as a percentage (not more than 5% of total funding being requested for projects from IFPOC). IFPOC will provide a fee calculator and support in case there are questions.** If GOs wish to charge a flat fee (dollar amount) that flat fee may not add up to more than 5% of IF funding provided to each project, but it may be less.

- If Innovation Funds are being used to pay for project administration, and if any changes to these policies are made, Governance Organizations should provide this information to the IFPOC using G3 explaining what the administrative fees will cover and why.

## 2.2 Funding Process

- Governance Organizations are asked to indicate on G1 that they have reviewed and approved all NEW proposals submitted to the IFPOC for funding according to the provincial framework and according to the process they had previously submitted for approval by IFPOC contained in their G3.
- The IFPOC will evaluate each proposal recommended for funding and will ensure that all proposals are consistent with the provincial framework and locally defined guidelines.

## 3. ONLINE INTERIM REPORTS

GOs are asked to fill out an “ONLINE INTERIM REPORT”, for ALL projects during year 2 and no later than July 1 of year 3 after funding has been granted. This short online form will indicate that each previously approved project is on track and has spent some of its budget. We do not require that GOs re-submit any additional budgetary documents (including P2/4). The Interim portion of that document is intended for internal GO use, as needed.

In this form, GOs will be asked to

- a) confirm that projects have been reviewed and are “on track” to completion as per original proposal
- b) inform IFPOC how much funding was i. approved ii. flowed to date to project lead, and iii. has been spent to date by the Project lead
- c) If the Project Lead or GO has concerns about the ability of a project to proceed, the GO is encouraged to institute remedial actions so that the project moves toward completion and spends its funds before the Final Project Status and Accounting Report is due. If changes to the project lead and/or other personnel are necessary for the project to complete spending of the funds, IFPOC should be notified and asked for approval.
- d) An interim report must have been submitted on time if an extension request is subsequently requested.

## 4. CONTINGENCY PROJECTS

Governance Organizations are invited (and encouraged) to submit additional projects, in their order of preference (which are not included in the calculation of “allowable funding”), as “contingency” projects, for pre- approval by IFPOC. The number of contingencies you are invited to submit is dependent on the size of the GO’s funding envelope.

- Small Governance Organizations are invited to submit up to 3 contingency projects (Montfort, Baycrest, Holland Bloorview, Bruyère, CAMH, ROH, UOHI, and WCH).
- Medium Governance Organizations are invited to submit up to 4 contingency projects (CHEO, NOAMA, SEAMO, SHSC, and SMH).
- Large Governance Organizations are invited to submit up to 5 contingency projects (AMOSO, HAHSO, MSH-UHN, and TOHAMO).

Normally, contingency projects will not be funded immediately but could step in to take the place of a previously approved and funded project from that same funding year should a recommended project not be successful for any reason (such as unable to receive ethics or other approvals). This movement of funds will only be allowed if a) the projects are from the same funding year, and b) if NONE of the Innovation Fund monies have been spent.

## 5. FINAL PROJECT STATUS AND ACCOUNTING REPORT

Each project’s “Final Project Status and Accounting Report” contains three elements: a P3 (Final Narrative Report – provided by the Project Lead), a P2/4 (Final Budget and Financial Statement – provided by the Project Lead), and an Online Final Report Summary – to be filled in online by the GO that confirms amounts spent and unspent and provides abstract of final status and results. **GOs are asked to ensure Project Leads are using the latest version of the P3 (this**

year beginning with v. 18.xxx), and ensure they include detailed information about expenses on their P2/4 and clearly delineate between funds provided by IFPOC and those from any other sources.

#### Online Final Report Summary

- The Governance Organization should first complete the Online Final Report Summary by answering several questions for each project: the amount of funding provided by the IF, spent, and unspent (if any); approval by Governance Organization; is this Project Lead an “early career investigator” (Y/N); a final abstract which must be inserted for each project from the P3.
- The Governance Organization is strongly encouraged to collect Key Performance Indicators (KPIs) at the time of the submission of the online summary. The bibliometric indices along with stories about impact will combine to demonstrate value of the work undertaken by Ontario’s academic physicians.
- The amount spent should equal the amount spent as indicated on the P2/4.
- If there are unspent funds, the Governance Organization must check a box to indicate that the MOH will be advised, and that the unspent funds will be returned.
- IFPOC’s new Grants Management System will issue regular reminders about Final Project Status and Accounting Reports coming due the following year.

#### 6. OTHER FORMS:

##### ABOUT G4 – PROJECT CHANGE REQUEST (renamed: previously “Leave and COVID-19 Extension Requests”)

This form will facilitate accurate and consistent information regarding special requests.

Project Pivot: Under certain special circumstances, a project pivot (including Project Lead changes) may be considered for extensions. If this is the case, please include the G4 with your email request detailing the issue(s) encountered, the remediation being undertaken (change in focus, new timeline, new leads), and the rationale for additional time.

Other Uses: Please also use this form for maternity, parental, family, medical, and COVID-19 related extensions. COVID-19 extensions are not available for any projects funded with the code 24 or later (Year 16 or beyond). The G4 can be filled in and emailed to Sarah Garson and Janice Hutchison for consideration.

##### ABOUT G2 and D and OTHER TYPES of SUBSTITUTIONS

Although substitutions may be made, we anticipate that they will be rarely implemented. The rules for substitutions are as follows:

##### Project Lead Substitutions (Please use G4 if an extension is being requested)

If a “Project Lead” cannot continue to lead a project before the Final Project Status and Accounting Report is submitted, a co-Lead, or another qualified AHSC AFP physician can be substituted subject to approval by IFPOC. This substitution may also be used as one of many kinds of pivots for unsuccessful projects. A physician might be deemed qualified should they participated in the original application or have adequate qualifications. They must be a Participating Physician, as defined in the AHSC AFP Agreement.

##### Process:

- Governance Organizations are asked to send G4 to IFPOC with details about the rationale, timelines and workplan for keeping the project on time and within budget.
- IFPOC will review the request within two weeks, and if approved, will ask the Governance Organization to update the project files with the relevant personal information for the new Project Lead.

Other Project “Pivot” (Please use G4 if an extension is being requested)

Under exceptional and rare circumstances, after being approved, a project may later be deemed to be not viable (failure to gain REB approval, inability to recruit sufficient participants or other). In such cases, GOs are invited to send email (with G4 if extension being requested) to IFPOC Chair and Executive Director, to determine if a pivot will improve likelihood of success. Such a “pivot” could be a more limited investigation or a different approach to the original purposes of the project and acceptable to IFPOC. If the Project Lead has support of their GO, then IFPOC will consider such requests on an ad hoc basis.

Project-for-Project Substitutions (G2 and Form D)

Each Governance Organization is invited and encouraged to submit “contingency” projects annually to IFPOC for prior approval in case any of their priority projects do not get started in a timely fashion.

Substitutions will **not** be permitted:

- a) If no “contingency” projects have been previously reviewed and “approved” by IFPOC,
- b) If any Innovation Fund money has been spent by the original project.

Process:

- Once Form G2 and the corresponding Form D have been emailed to IFPOC, Governance Organizations may expect to receive a decision from IFPOC within two weeks regarding the substitution.
- After approval by IFPOC, and if Governance Organizations have directed IFPOC to do so, IFPOC will list the old project as inactive, and the contingency project will be listed as active.

**7. ABOUT P5: CHANGE OF STATUS**

Subject to approval by IFPOC, a P5 may be used by those Governance Organizations which:

- 1. Fund projects one year at a time, and
- 2. Elect to change funding period from one to two years with **no other major changes to the project**

These Governance Organizations may not submit the project as an entirely new project. By using the P5, Governance Organizations agree to extend the existing project, from a one to a two-year project, to provide it with additional funds for year 2, and to thereby extend the due date of the Final Project Status and Financial Report by one year (regardless of how long it has been since the initial project was originally funded for one year). No projects may take any longer to report than 4 years from the date of funding before they must submit the Final Project Status and Accounting Report, regardless of when they are approved for Year 2 funding. They must also use the existing project code, so that IFPOC can track these projects.

## APPENDIX B - AHSC AFP Innovation Fund Year XVIII (2025-26)

### Applicant Process Details – Proposals and Final Reporting

Proposals should be submitted electronically to your own Governance Organization using the P1 and P2/4 forms that can be located at <https://ifpoc.org>. Please use version 18.0 of all elements to be eligible for consideration.

#### BEFORE DECIDING TO PROPOSE A PROJECT

1. Check at IFPOC.org to see if anyone has already done work in this area, to learn what other work is underway in the field and to see if there are any opportunities for collaboration. Duplication is not prohibited if the project is new to your institution and might be valuable as a learning experience, or as an opportunity for collaboration, or preparing for a larger study. In addition, innovative projects from other institutions may be very valuable if implemented at your institution.
2. If the project contains a significant IT component, we recommend scheduling a discussion with hospital/university Chief Technology Officer (or equivalent) to understand what assistance the institution can provide and what potential restrictions on the viability of the project might exist.

#### WHEN WRITING PROPOSAL

3. Please be clear in your application about whether you have other funds “anticipated” or “committed”, add the \$ amount if known, and the source.
4. Please include information about linkages with other Innovation Fund groups (in your own hospital network or beyond). This information is helpful for you to consider collaboration, and for IFPOC to understand the potential for spread of ideas and impact of the program.
5. Please only include vital information in the application. While IFPOC allows several pages for “other” at the end of the application, we will only concentrate on the pages within the allowable limit. Since we review 180+ proposals annually over the course of a few weeks, we hope that you understand we may not be able to review in depth a multitude of diagrams and pages of support letters.

#### AFTER FUNDING APPROVED

6. Please seek REB approval (if not already sought prior to proposal submission) as soon as possible, if required.
7. Please begin the project as soon as possible, so that you may identify any unforeseen barriers as early in the process as possible. This will allow time for a “correction”, “pivot”, or “alteration” of approaches or processes (with the support of your Governance Organization and subject to IFPOC approval) to ensure success and completion within the time allotted.
8. Please consult your Governance Organization to seek appropriate support and advice. In exceptional circumstances, IFPOC will allow extensions (due to leaves), if you have the approval of your GO.

#### WRITING YOUR FINAL PROJECT STATUS AND ACCOUNTING REPORT (FPSAR)

IFPOC is now collecting Key Performance Indicators so that we can report back to GOs and the MOH about successful use of Innovation Fund funding support. These measures include additional funding, publications, lectures, other knowledge translation results (new procedures or practices). You will be asked to provide details of plans for future studies. This information will assist us to enhance the exposure of successful projects and may assist efforts to obtain additional funding.

#### AFTER SUBMITTING YOUR FINAL REPORTS

9. Please consider attending the next Innovation Fund Showcase 2027 (date and location still TBD) to share information about your project, but also to offer tips and strategies for making the most out of Innovation Fund’s seed money to other newer investigators.

10. IFPOC or your GO will reach out at 3 and 5 years after the date of the initial FPSAR submission for an update about Key Performance Indicators so that we can celebrate extremely successful projects.
11. Please continue to monitor IFPOC.org for information about other successful projects, award winners, and other potential mentees in the same/similar field as your project.

## 1. ABOUT PROJECT PROPOSALS (P1 and P2/4)

A complete Project Proposal consists of two documents: the Project Proposal P1 and the Project Budget P2/4. To be eligible for funding, both elements must be included in the submission to your Governance Organization.

Governance Organizations will be asked to submit P1 and P2/4 to IFPOC no later than January 9, 2026. Your own Governance Organization will provide you with the internal deadlines you will be required to meet, and they will not be permitted to upload projects to IFPOC that do not include both elements.

If you wish, you may include tables and figures in the body of the document, but with a strict page number limitation. Some Governance Organizations have elected not to permit the use of attachments.

## 2. ABOUT FINAL PROJECT STATUS AND ACCOUNTING REPORT (P3 and P2/4)

Project Leads are required to provide a detailed final narrative status report (P3) that includes a project summary and a detailed separate budget and financial statement (P2/4). The Project Leads requesting funding for more than one year are required to provide an annual progress report to their own Governance Organization which may then report the progress to IFPOC. Project Leads must submit Final Project Status and Accounting Report (P3 and P2/4) through their Governance Organization to IFPOC at the completion of the funding agreement – within 60 days of completion of the project, and no more than two years beyond the end of the funding term – whether the project is finished or not, unless you have been granted a pre-approved extension.

## 3. FORM P1

Form P1 will ask you to:

- Identify projects with a significant IT component (we encourage applicants to advise or seek input from their CIO or IT representative as early in the proposal preparation stage as possible. This can provide welcome support and advice to applicants before they receive funding, as well as support afterwards).
- Provide a brief summary of the proposed project in non-technical language – which will become the abstract for your project available on the public Innovation Fund website (IFPOC.org).
- What is the length of the project for funding (one year or two years)?
- What is the length of the active portion (timelines) of the project? 1-16 months (approx. 1 year) or 17-30 months (approx. 2 years)?
- How much funding is being requested from the Innovation Fund for the project each year, and in total?
- What is the full value of funding required (if different than above) for the project? Please let us know if you have secured or applied for funding from other sources (which ones)?
- Identify 5 key words that define your project, in order of importance. Please select from among the list of indicators for focus, methodology and outcomes. This will be used to identify your project in the searchable Innovation Fund database. These can be found at our website: [https://ifpoc.org/search-project-abstracts-keyword-code/#link\\_acc-keyword\\_list](https://ifpoc.org/search-project-abstracts-keyword-code/#link_acc-keyword_list) Provide a narrative proposal that includes objectives of the project, impact on knowledge translation, collaborators, approach and work plan, timelines, metrics to measure success, and project funding.

- Please remember to inform your Governance Organization if, over the duration of your project, you take leave (parental, maternity, family, medical) so that appropriate arrangements can be made with IFPOC.

### 3.1 About the Narrative Proposal

#### SECTION 3 (3.1 – 3.4) and SECTION 5.1

##### Background, objectives, rationale, significance, and justification for the innovative nature of the project

This section should provide a concise description of the objectives and question(s) to be addressed that will allow reviewers without technical or specialty expertise in that area to understand the importance, feasibility, and relevance of the project. This section should also address the following: existing research, knowledge, and practice in this area; importance and likely outcome of the research; and relevance to patients and the health care system in general.

For example:

- Describe the “Innovation” and why it is innovative for your institution.
- What issue does the proposed research address within the eligible areas of scope? What evidence is there that this issue is important from a broad system perspective? How will the research results be used and to whom will they be applicable?
- How broadly relevant will they be? Do the results of the project have the potential to lead to sustainable changes in practice, process and/or education?
- What are the plans or opportunities for knowledge translation or dissemination of the project outcomes and to improve health care in Ontario?
- To what extent does this proposal support leadership in the dissemination of new knowledge across the healthcare system?

#### SECTION 5.2

##### Approach and work plan

This section should provide a description of the approach to be used as well as a detailed project work plan.

#### SECTION 5.3

##### Timeline

This section should provide a target start date (should be within 3 months of funding approval) target completion dates for significant steps (milestones) leading to the proposed outcomes, and target finish date for the project. **If timeline for the project is longer than 17 months, if your GO permits, consider asking for a two-year project (even if you only require funding for one year), since we will no longer provide extensions.**

#### SECTION 5.4

##### Metrics to evaluate outcome of the project

This section should outline in detail what the anticipated outcomes would be and how the outcomes will be measured. It should provide a list of measurable milestones (outcomes) upon which the team will periodically report.

- How will the Project Leads determine if the project was successful?

Please indicate:

- What will you measure to determine success? How will you measure it?
- What is the expected benefit and how will it be measured?

#### SECTION 5.5

##### Team

This section should include the names and affiliations of the team members, with a brief statement of their roles, experience, area(s) of expertise, whether any are early career investigator physicians (within 5 years of faculty appointment at the time of drafting the proposal), their time commitment and planned individual contributions to the project.

## SECTION 5.6

### Project funding

The project team should identify all current sources of additional funding for the proposed Innovation Fund project, as well as applications for funding currently in progress.

## SECTION 5.7

### Any other relevant information

The project team should identify any other relevant information.

## SECTION 5.8

### Prior unsuccessful applications

Please inform us if you have previously applied and been declined for \$IF. Let us know what reviewers said, and how you addressed their comments, questions, concerns.

## SECTION 5.9

### List of References and/or Support from Partners (optional)

A brief list of bibliographic references and/or letters of support from other partners may be included.

For the list of references please include all authors or the first 6 authors (if more than 6) followed by et. al.; the title of the paper, the journal name, the year of publication, the volume number and the page numbers and DOI. The format is: authors' last name and first initials (list first 6 and if more add et al. after the first 6). Title. Journal title. Year; Volume: page numbers. DOI. Examples from the National Library of Medicine are presented here:

[https://www.nlm.nih.gov/bsd/uniform\\_requirements.html](https://www.nlm.nih.gov/bsd/uniform_requirements.html)

Note regarding priority: Project Leads are reminded that IFPOC has requested review committees and Governance Organizations to give priority to projects which have the potential to impact health care delivery in multiple institutions or across the Province. If two projects otherwise have equal merit, the Selection Committees and Governance Organizations are asked to give priority to projects that could impact health care delivery beyond their institution and/or could be adapted across the province. Should you wish to identify potential collaborators, or if you'd like to know if any other academic physicians are already working on your project topic or similar related topics, we recommend you visit <https://ifpoc.org/search-project-abstracts/> to identify allies.

## 4. FORM P2/4

Form P2/4 is a budget form that you will use for application, and if successful, will re-use when submitting your final report. It will ask you to describe and justify all requested budget expenditures, and:

- To include sufficient detail to allow for an assessment of the eligibility of these budget expenditures, including remuneration levels for physician and non-physician costs (such as compensation for non-physician team members).
- To specify the contributions (cash, in-kind, other) of any other funders/contributors.
- How much funding are you requesting from the Innovation Fund for the project each year, and in total? What is the full value of funding required (if different than above) for the project?

Please note that the amount you are requesting will be reviewed by your Governance Organization for consideration. If they then recommend the project for approval to IFPOC, in some cases, they may only approve a portion of the funding originally requested. We require the two amounts (budget number in the P2/4 and approved funding) to be aligned so please be aware that you may be asked to revise the budget to reflect a revised funding amount and we require the P1 amounts requested be no more than +/-5% variance. To that end, **we ask that you submit the P2/4 to your Governance Organization as an Excel document, in case alterations to the budget are required.**

## 5. FORM D

D is a declaration by Project Leads whose projects were selected as “alternates” or contingency projects during the initial round of any given competition. If these Projects Leads are later invited to proceed with their project, they must first fill in Form D for review and approval by their Governance Organization and by IFPOC.

The declaration itself is intended to demonstrate to the IFPOC that the Project Lead is:

- Ready to begin the project within the next three months
- Prepared to complete the project within the same timeframe as the project being replaced
- Able to complete the project using the Innovation Fund money available from the project being replaced

## 6. FORMS P3 and P2/4 – FINAL REPORTING

A complete Final Project Status and Accounting Report (FPSAR) from the Project Lead consists of two documents from the Project Lead: Final Narrative Report P3, and Final Budget and Financial Statement P2/4. Both elements must be included in the reporting to your Governance Organization. The project need not be complete at the time of submission, but all funding should be spent, and the narrative report should be a comprehensive description of the status of the project at the time of the report. Project Leads may be asked to update their reports at a later date.

This Final Project Status and Accounting Report needs to be submitted to IFPOC by your Governance Organization before March 31 of the year the report is due. Please submit the FPSAR to your Governance Organization as soon as possible so that they can undertake their own internal review and approvals before submitting to IFPOC. All Final Project Status and Accounting Reports must be received by IFPOC within 2 years and no later than June 1 of year 5 after the end of the term of Innovation Funding (e.g. Projects receiving one year of funding in March 2022 must submit Final Project Status and Accounting Report by March 31 2025, and Projects receiving two years of funding in March 2022 must do so by March 31 2026) whether you have finished the project or not. At the end of this period, regardless of status of the project, a report is required, and any unspent funds must be returned to the Treasurer of Ontario.

In the P3, you are required to provide a narrative report. In addition, you should provide data about several Key Performance Indicators, including a list of publications which resulted from the project, any plans for future studies and whether you anticipate any additional funding for the next phase. Also, did this project result in any new procedures or practices (innovations) in health care delivery compared to current practice? How will the delivery of health care be improved because of this innovation? You will also be asked to write a short “sound bite” which can be employed for media releases.

Please note that the reporting requirement, Final Project Status and Accounting Report includes these three elements: the **Online Final Report Summary (provided by your Governance Organization)**, the Final Narrative Report (P3) and the Final Budget and Financial Statement (P2/4). Governance Organizations will not be permitted to upload final reports that do not include these three elements.



## APPENDIX C: AHSC AFP Innovation Fund Year XVIII (2025-26)

### About the New IFPOC Grants Management System

Page 1 of 2

## Planning:

### General

Prior to any proposal writing, applicants can increase their chances of success with proper planning. This section will provide some tips, recognizing that your own Governance Organization also has their own processes and priorities.

### What does Innovation Fund Look for In a Proposal?

The IF values project proposals that are well-written and contain all the required sections, with a special focus on realistic timelines and measurable outcomes. It also places a high priority on multi-centre collaborations. Because innovation takes many forms, the Innovation Fund does not define “innovation” and places high priority on innovation and on projects that improve the delivery of health care in Ontario when evaluating proposals.

### What are your GO Priorities?

Each Governance Organization has their own priorities that have been communicated to you via email. Please take those into consideration when you develop your innovation idea.

### Plan Within your Organization

- Reach out to your Governance Administrators for guidance on resources that could support submitting a strong application.
- If your project has a large IT component, consider reaching out to your IT department to ensure your plans will be acceptable, and for assistance in developing those components.
- Understand the internal and external deadlines as the system will not accept any submissions post the stated time and date.
- Understand any approvals (sign offs from department heads, REB approvals) and documents that will be required prior to submission.
- Check for past Innovation Fund projects with the same focus as yours as an opportunity to collaborate with other experts@ <https://ifpoc.org/search-project-abstracts/>

## Applications:

### Application Development

- Form your team of collaborators.
- Download/save the relevant documents from your GO email, paying attention to timelines and submission requirements.
- Develop budget keeping in mind the funding parameters of your institution.
- Pay attention to page limits and instructions.

### Submission Process Overview – applying to your GO

- Please check with your GO for directions and deadlines.
- Your GO will also inform you how you may track your projects.

## **Award Process:**

### Notice of Award

- Once your project is evaluated by your GO, the successful projects will be submitted to IFPOC.
- Once IFPOC has reviewed the projects and accepted its projects, you will receive an email from your GO notifying you of your success.

## **Post-Award Process:**

### Post-Award Monitoring and Reporting

- As part of project oversight, there are several reports that your institution and Innovation Fund will require through the lifecycle of the project.
- Once a project has been approved, your institution will communicate with you via email if any changes are required. You will receive automatic notification of upcoming due documents.
- At 3 and 5 years post-completion, many GOs will be collecting Key Performance Indicators.

# APPENDIX D: AHSC AFP Innovation Fund Year XVIII (2025-26)

## OMA per Diem Guidelines<sup>1</sup>

**Please note:** If permitted in your institution, 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 attached Appendix “C”)

**Use of funds:** Innovation Funds may be used to compensate participating physicians for evaluating the quality of existing or new health care services, to enable the development of new models of health care delivery, and to optimize health care delivery within the framework of the current health care system.

## OMA – Claim Guidelines JANUARY 1, 2023

### 1. HONORARIUM

#### *A. Rates for Meeting, Teleconference, and Travel Honorarium:*

##### **OMA Honorarium Basic Rates**      **Meeting Attendance (Hourly rate only used for meetings up to 2 hours)**

Days Served since January 1	Hourly Rate	Half-Day Rate
Up to 15	130.00	455.00
15.5 to 25	159.00	557.50
More than 25	184.00	642.50

#### *Honorarium for Meetings:*

Meeting duration	Basis for honorarium
0.5 to 2.0 hours	Hourly
2.5 to 4.5 hours	One half-day
5.0 to 9.5 hours	One full day
More than 9.5 hours (on same calendar day)	Three half-days
Teleconferences and travel are calculated to the nearest half hour	

- Members will be paid at the highest tier for all days served during the calendar year, retroactively if necessary.
- Members of designated bodies and Committee chairs will be paid a premium rate of 25% for meetings of the designated body to reflect time spent outside formal meetings which would not otherwise be paid.

<sup>1</sup> ONTARIO MEDICAL ASSOCIATION, MEMBER HONORARIUM & EXPENSE CLAIM – JANUARY 1, 2023