

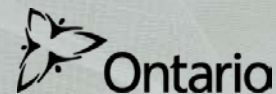


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Where Next Happens

# HEALTH TECHNOLOGIES FUND ROUND 3 BRIEFING 2018-03-21

Ontario Centres of Excellence is a member of



# AGENDA



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**Where Next Happens**

- Program at a Glance
- Program Objective
- Project Funding
- Two Stage Application Process
- Assessment Process
- Program Timelines
- Lessons Learned from Rounds 1 and 2 (to be discussed throughout the presentation)

# HEALTH TECHNOLOGIES FUND (HTF) AT A GLANCE



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Where Next Happens

- **THEME:** Better Care Closer to Home, supports technologies that deliver better coordinated and integrated care in the home and community.
- Fosters partnerships between publicly-funded Healthcare Service Providers [HSP] (**LEAD APPLICANT**), patients, academia and industry (**PROJECT PARTNERS**) to drive collaboration that improves patient outcomes, adds value to the health system and creates jobs in Ontario.
- Supports two types of projects: (1) Pre-Market Evaluation, (2) Early Adoption
- Funding will support up to 50 per cent of eligible project cash costs up to a maximum amount of (1) Pre-Market Evaluation \$500K (2) Early Adoption \$1M
- Project duration is up to 24 months
- Two stage application process: (1) EOI (2) Full Proposal
- Round 3 (\$8M budget)

# PROGRAM OBJECTIVE



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- Supports the development of made-in-Ontario health technologies by accelerating evaluation, procurement, adoption and diffusion in the Ontario health system.
- Potential economic benefit to the technology company resulting from an HTF project should be realized in Ontario (e.g., job creation, incremental revenue, follow-on financing).

# THEMES: BETTER CARE CLOSER TO HOME



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- **Client & Care Team Communication:** Develop or adopt solutions that change how clients and caregivers communicate with their care team. Projects should have capabilities including, but not limited to: secure communication; viewing and scheduling appointments; and, enabling access to information such as care plans and assessment results.
- **Continuity of Care Provider:** Develop or adopt an existing logistics and routing tool that allows home and community care providers to better match staff skills, competencies and availability with client needs. The solution should enable improved continuity of providers on a client's care team. The tool could include functions that support transportation and other services for clients in the community.
- **Supporting Clients to Live Independently:** Support the development and adoption of solutions that enable older adults and home care clients to age in place and live independently. This can include devices and/or solutions that assist with activities of daily living, such as personal hygiene, locomotion, and eating.

# PROJECT FUNDING



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HTF program updated to offer:

- (1) Pre-Market Evaluation [single site deployment]
- (2) Early Adoption [multi-site deployment]

# HEALTH INNOVATION TEAM (HIT)



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- **Applicant:** One or more provider(s) of publicly funded health service provider (HSP). Eligible health care system applicants include (but are not limited to) family health teams, community care providers, long-term care homes, and hospitals. The HSPs define the problem statement and commits to providing the health care setting in which the innovative technology will be evaluated, including patient engagement, clinicians and operations support, and procurement expertise.
- **Technology partner:** An Ontario-based, for-profit health technology business providing an innovative solution to the problem statement. Partners may be of any size or stage (start-up, small- to medium-sized enterprise, and multinational enterprise) with a research and development, and/or manufacturing presence in Ontario.
- **Third-Party Evaluation Provider:** Ontario-based evaluation team with expertise in technology adoption and diffusion, design and implementation, and health economics. The evaluation component of the project should support the development of a plan to support wider-scale procurement and/or adoption of the technology in Ontario.
- **Other partners:** other partners such as community based associations and advocacy groups are strongly recommended. In addition, HITs are strongly encouraged to engage one or more Local Health Integration Network (LHIN) partners, who can provide sector expertise to ensure project development and implementation meets sector and local needs. If the LHIN is not already a partner, projects are encouraged to gain a letter of endorsement from their respective LHIN as part of their application.

# PROJECT ELIGIBILITY



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Applications **MUST** be focused on addressing a “Problem Statement” identified by the healthcare service provider and **MUST** align with the theme of the program.

## Requirements:

- 1. Pre-Market Evaluation projects:** technologies **MUST** have obtained all required regulatory approvals, received initial user validation, and be ready to be tested with healthcare service providers.
- 2. Early Adoption projects:** technologies **MUST** have obtained all required regulatory approvals and be market-ready. Furthermore, technologies must have been successfully implemented at least once in one or more healthcare settings, and **MUST** have supporting institutional use case data, including clinical and economic evidence of value.



# INELIGIBLE ACTIVITIES



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The following activities and technologies are not supported:

- Technology development (only minor updates for integration purposes are eligible)
- Evaluation, research, and clinical trials of medicines or vaccines
- Clinical trials to assess the safety or efficacy of the technology.
- Activities that do not align with the overall theme of the program and all activities outside of the province of Ontario.

# PRE-MARKET EVALUATION



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Where Next Happens

**PURPOSE:** Projects involve a HIT collaborating to implement a validated technology in a health care setting to understand the conditions necessary for successful implementation, and to develop evidence to support broader uptake of the technology. Projects must align with the theme of Better Care Closer to Home and the technologies must have obtained required regulatory approvals and received initial user feedback.

**ACTIVITIES:** may include identifying changes required to clinical workflow to successfully integrate the technology, generating evidence to support future procurement and adoption, and developing an adoption plan.

**OUTPUT:** Upon completion of a Pre-Market Evaluation project, HITs should have identified clinical workflow changes and other changes needed to effectively integrate the technology into the health care setting, generated evidence that supports further adoption (e.g. an economic analysis that examines the cost effectiveness of the technology and potential value to the health system), and a plan to support wider adoption, wider-scale procurement, and adoption of the technology in Ontario.

# EARLY ADOPTION



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**PURPOSE:** The Early Adoption stream supports validated, market-ready technologies that have been successfully implemented in one or more health care settings. Early Adoption projects involve a HIT collaborating to perform an additional implementation (and preferably multiple implementations) of the technology (in one or more health care settings) in order to evaluate the technology across multiple implementations, to generate further evidence to support value-based procurement and wide-scale adoption, and to develop an adoption plan.

Early Adoption projects must align with the theme of Better Care Closer to Home, and the technologies must have obtained required regulatory approvals and received initial user feedback. Furthermore, the technology must have supporting institutional use case data, including clinical and economic evidence of value.

**ACTIVITIES:** Activities may include: identifying changes required to clinical workflow to successfully integrate the technology, knowledge translation and user training, establishing new evidence to facilitate integration into the broader health system (e.g., across multiple LHINs), developing further clinical or economic evidence, developing an adoption plan, and developing an value-based procurement plan for participating health care providers.

**OUTPUT:** Upon completion of an Early Adoption project, HITs should have identified clinical workflow changes and other changes needed for successful implementation, generated sufficient evidence to support wider adoption, and developed a plan for wider-scale procurement and adoption of the technology in Ontario.

# GETTING STARTED

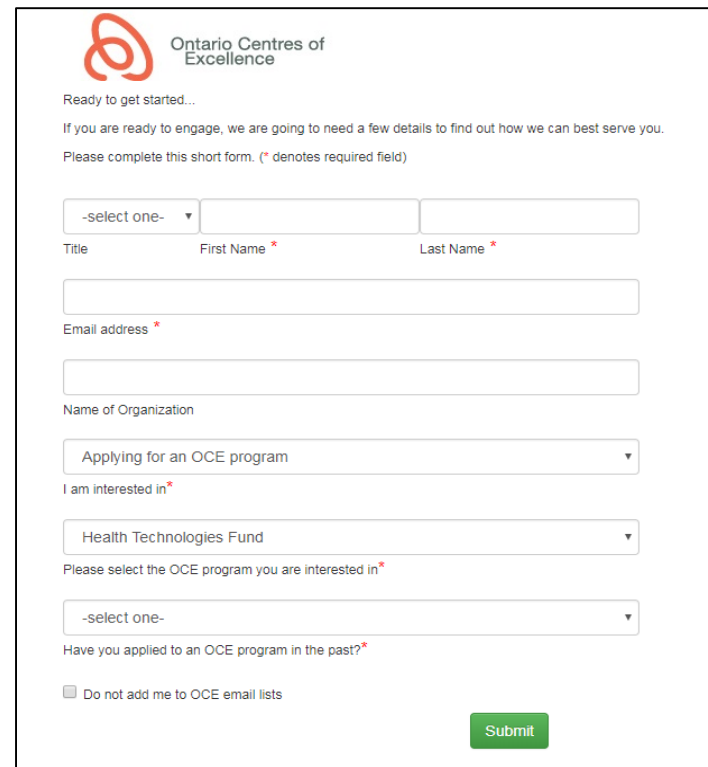


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Where Next Happens

To begin the EOI submission process, please complete a “[Client Intake Form](#)”.

An OCE Business Development Manager (BD) or the Innovation Procurement Manager (IPM) will contact you to discuss the opportunity and assist you with the initiating and developing of the EOI. The BD and/or IPM will maintain oversight responsibility for the OCE components of any approved project.



The screenshot shows the 'Client Intake Form' for Ontario Centres of Excellence. The form is titled 'Ready to get started...' and includes the following fields and instructions:

- Title:** A dropdown menu with '-select one-' selected.
- First Name \*:** A text input field.
- Last Name \*:** A text input field.
- Email address \*:** A text input field.
- Name of Organization:** A text input field.
- I am interested in \*:** A dropdown menu with 'Applying for an OCE program' selected.
- Please select the OCE program you are interested in\*:** A dropdown menu with 'Health Technologies Fund' selected.
- Have you applied to an OCE program in the past? \*:** A dropdown menu with '-select one-' selected.
- Do not add me to OCE email lists:** A checkbox that is currently unchecked.
- Submit:** A green button at the bottom right.

# TWO STAGE APPLICATION PROCESS: EOI



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1. **Application information** (Summary of Proposal for Public Release (Title))
2. **Team Information** (Company Profiles (publicly funded healthcare organizations do not complete))
3. **Proposal** (Upload EOI Questions, includes embedded Milestone/Activity Table)
4. **Use of Funds** (Source, Type “Cash” and “In-kind” and Justification) **ONLY CASH CONTRIBUTIONS ARE REIMBURSABLE**
  - > *High level budget only (3-5 lines only)*
5. **Supporting Documents**
  - > *CVs/LinkedIn Profiles of key team members*
  - > *Commitment letter required by the Health Service Provider (HSP) lead for all types of HTF projects. Letter should outline level of commitment (Cash and/or in-kind), types of activities to support and rationale why this proposed project is a priority.*
  - > *letter of endorsement from their respective LHIN*

**NOTE: Applications must be submitted via AccessOCE (OCEs on-line application system)**

# APPLICATION ASSESSMENT



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All eligible applications are assessed against program objectives and [assessment criteria](#).

## **Expression of Interest (EOI) stage**

- Assigned to representatives from OCHIS and OCE for review against a formal rubric
- Top ranked applications will be invited to submit a Full Application

## **Full Proposal stage**

- Assigned to an External Review Panel (ERP) for review against a formal assessment template (assessment criteria to be shared to HITs invited to submit a Full Application)
- Top ranked applications will be invited to present at the ERP meeting (September 2018)

# TWO STAGE APPLICATION PROCESS: FULL APPLICATION



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Where Next Happens

- **Full Application requested by INVITATION ONLY**
- **Full Application requirements**
  - *Application Information (Refine the Summary of Proposal for Public Release (Title))*
  - *Team Information (Company Profiles (publicly funded healthcare organizations do not complete))*
  - *Proposal (upload of Full Proposal Questions)*
  - *Use of Funds (Full Detailed budget and justification required: Source, Type “Cash” and “In-kind”)*
  - *Supporting Documentation (CVs/LinkedIn Profiles of key team members, Letters of support from demonstration sites (community of engagement and funding support to be included))*
- **Business Development Manager ENDORSEMENT required (At the Full Application stage only)**

**NOTE: Applications must be submitted via AccessOCE (OCEs on-line application system) by submission deadline**

# PROGRAM TIMELINES



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Where Next Happens

|                          |                    |
|--------------------------|--------------------|
| Round 3 in-take Opens    | March 7, 2018      |
| EOI Development Workshop | March 21, 2018     |
| EOI Submission Deadline  | <b>May 9, 2018</b> |
| EOI Assessment           | June 2018          |
| EOI ERP Meeting          | June 2018          |

*EOI Draft Reviews are encouraged (connect with the BD and/or IP Manager)*

|   |                 |
|---|-----------------|
| Invitation to submit a Full Application | July 2018       |
| Full Application Development Workshop   | July 18, 2018   |
| Draft Review 1 of 2 (optional)          | August 1, 2018  |
| Draft Review 2 of 2 (mandatory)         | August 14, 2018 |
| Full Application Submission Deadline    | August 16, 2018 |
| Full Application Assessment             | August 2018     |
| External Review Panel Meeting           | September 2018  |
| Award Notification                      | September 2018  |
| Public Announcement of results          | September 2018  |



# QUESTIONS



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- [Client In-take Form](#)
- **HTF Round 3** [Theme Overview](#)
- [Patients First: A Roadmap to Strengthen Home and Community Care](#)
- [HTF EOI Questions template](#)
- [HTF EOI Assessment Criteria](#)



## Round 1 Recipients (15 projects)

Ontario Improving Patient Care through Innovative Health Technologies

## Round 2 Recipients (12 projects)

Ontario Investing in Made-in-Ontario Health Technologies