PRIHS 6
STAGE 1 APPLICATION FORM

DRAFT FOR REFERENCE ONLY. SUBJECT TO CHANGE.

APPLICATIONS ARE ONLY OPEN TO THOSE INVITED BY A STRATEGIC CLINICAL NETWORK & ARE TO BE SUBMITTED ONLINE.

PRIHS 6 Stage 1 Application (DRAFT)

Specification of the problem
1. What is the gap or problem in Alberta’s health system that will be addressed by the proposed solution?

2. Using quantitative measures, please describe the size/impact the gap or problem in Alberta.

3. Why is this problem a priority now (e.g., describe the clinical/human resource/infrastructure, the significance to people in Alberta, and/or the cost implications of maintaining the status quo)?

4. Describe for whom the need/gap is a problem (i.e. who is affected and how). What is the problem from the perspective of patients and/or families/caregivers (if different from above)?

Specification of the solution
5. Provide a brief description of the proposed solution(s) and how it will address the gap or problem identified in the previous section.

6. Describe the clinical evidence and evidence of effectiveness for the proposed solution generated through an Alberta pilot or in another jurisdiction. What is the strength of evidence that suggest the proposed solution will provide an advantage over the status quo and/or possible alternatives in Alberta? This argument should be based on the nature and strength of the current-state evidence base, and ideally informed by synthesis-level evidence. What is the evidence to suggest that this solution will work in Alberta?
7. What is known about the cost-effectiveness of the proposed solution (i.e. based upon literature or a previous economic evaluation conducted by the project team)?
   - Where were the previous studies conducted? If the previous studies were not conducted in Alberta, how comparable are the health care settings to healthcare delivery in Alberta?
   - What alternatives were compared?
   - How did the solution improve patient health (what health outcomes were measured and over how long?) and what were the associated changes in health system utilization? Which health care resources are expected to experience an increase in demand as a result of implementation in Alberta? Which ones are expected to experience a decrease?
   - What were the results of the economic evaluation?

Relevance
8. Articulate how the proposed solution meets the PRIHS objectives (e.g., significantly improving the sustainability of Alberta’s health system, by significantly reducing costs and/or improving quality relative to costs within the PRIHS 6 timeframe).

Expected Impacts
9. Describe the total target population for the proposed solution in terms of characteristics and size

10. What sample size will be used to test the proposed solution on? (e.g., Year 1: 50 patients/participants, Year 2: 75, Year 3: 100).

11. What is the expected primary impact on patients who are exposed to the proposed solution (in terms of experience, outcomes, or service utilization)?

12. How will the deployment of the proposed solution help reduce the burden placed on existing health system resources and generate cost savings? Please describe the anticipated nature and magnitude of this reduction/cost savings.

Feasibility
A. Patient and Stakeholder Engagement

13. What stakeholders have been engaged with thus far? How? How will they be engaged as the work progresses? To what extent have they or their representatives been engaged specifically in scoping the problem and developing the proposed solution? Please include a description of how the proposed solution has meaningfully engaged patients and families/caregivers specifically.

14. Please describe how the proposed solution has meaningfully engaged those who will be involved in/affected by the implementation (e.g. operational areas, practitioners) specifically. Have these stakeholders/stakeholder groups confirmed acceptability of the proposed solution?
B. Strength of the Team

15. Using the tables below- identify your team including leadership, operation leads, community partners and collaborators.

Example:

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Primary Organization</th>
<th>Organizational Position</th>
<th>Describe their role relative to implementing the Proposed Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

16. If this is a multi- SCN approach, describe how the approach to testing the proposed solution will be integrated across the various SCN's involved.

Implementation and Study Methodology

17. How will the solution be put into practice (i.e. what is the plan for implementation)?

18. What methodological approach will be used to observe and/or assess implementation of the solution? Include (as applicable) a description of the study design, research question(s) and objective(s), population/participants including inclusion and exclusion criteria, sample size/power calculations, methods for participant enrollment, intervention/study arms, primary and secondary outcome measures including analysis plans and data sources. Note, research methodology should provide the capability to determine if the proposed solution was effective.

19. Through an Alberta pilot or If the solution was previously implemented somewhere else, please describe any of the barriers and facilitators to implementation that were found during that implementation of the solution. How might these barriers and facilitators influence implementation in Alberta? What is the plan for assessing knowledge about barriers and facilitators to implementation throughout this project?

20. Through an Alberta pilot or If the solution was previously implemented somewhere else, identify any known conditions or contextual factors that might influence implementation in Alberta (i.e. patient needs/resources, structural, communication, cultural, knowledge/resource availability, aspects about the learning/implementation climate, readiness for change, pre-existing tension for change, policies/incentives/rewards, relative priority and compatibility of the solution, alignment with goals, access to feedback, competitive pressure, degree of connectivity to other centres). What is the plan for assessing knowledge about the contextual influences on implementation throughout this project?

21. What specific implementation study outcomes will be monitored? Which will be measured? How will implementation quality be assessed? Include how this plan will monitor/evaluate uptake and process outcomes including (as applicable):
- How change happens
- How the solution works/or not and for whom
- Adherence
- How much and how well the solution is delivered
- How well components of the solution are conducted
- How responsive the target users are
- How the solution fits within workflow/pre-existing or related solutions.

22. How will acquired knowledge of the implementation study process (e.g., barriers and facilitators, end-user experiences, contextual factors, intervention components) be used to tailor the solution and its implementation?

23. Please describe the anticipated risks or barriers that may be associated with the implementation of your proposed solution.

24. For projects with an IT component: is third party software required for your project? If yes, what specific requirements are needed? What IT resources will be required to implement? What IT hard components are required? What IT integration resources are required? Has IT been engaged to speak to need for/ability to integrate with Connect Care (if appropriate)?

**Equity**

TBD

**Budget**

Example:

<table>
<thead>
<tr>
<th>Budget Line</th>
<th>Project Year 1</th>
<th>Project Year 2</th>
<th>Project Year 3</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor/personnel (including fringe benefits)</td>
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<tr>
<td>Trainees</td>
<td></td>
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<tr>
<td>Minor medical equipment / devices (&lt;$5000)</td>
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<tr>
<td>Travel</td>
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<tr>
<td>Administrative and procedural expenses</td>
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<tr>
<td>Training</td>
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<tr>
<td>Communication and knowledge transfer</td>
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<tr>
<td>Other (Please describe)</td>
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