

## Care Forward

# Enhancing Integrated Care (Cohort 2) Call for Applications



## About Healthcare Excellence Canada

Healthcare Excellence Canada (HEC) works with partners to spread innovation, build capability and catalyze policy change so that everyone in Canada has safe and high-quality healthcare. Through collaboration with patients, caregivers and people working in healthcare, we turn proven innovations into lasting improvements in all dimensions of healthcare excellence.

HEC focuses on improving care of older adults, bringing care closer to home and supporting the retention of the health workforce – with quality and safety embedded across all our efforts. We are committed to fostering inclusive, culturally safe and equitable care through engagement with different groups, including patients and caregivers, First Nations, Métis and Inuit, healthcare workers and more.

Launched in 2021, HEC brings together the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement. We are an independent, not-for-profit charity funded primarily by Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.

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## Social Media

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Healthcare Excellence Canada honours the traditional territories upon which our staff and partners live, work and play. We recognize that the stewardship of the original inhabitants of these territories provides for the standard of living that we enjoy today.

[Learn more](#)

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## What's the opportunity?

Across Canada, health and social care organizations are innovating to improve primary and community care. Care Forward is a pan-Canadian movement of people sharing knowledge, applying proven approaches and making healthcare better, faster.

At Healthcare Excellence Canada (HEC), we support organizations addressing similar challenges and striving to improve quality and safety. By joining this movement, you can help improve health outcomes, enhance care experiences for patients and providers and advance the value and equity of care — collectively making a difference in the lives of at least one million people across Canada.

If your organization is implementing innovative solutions in primary and community care — especially those expanding access and reducing pressure on emergency departments to ensure people receive the right care, at the right time, in the right place — we invite you to participate in HEC's new offering designed to accelerate your impact.

## Why join?

Teams that have partnered with HEC describe the many benefits of participating, including:

- Connection and collaboration – Engage with like-minded healthcare leaders to share knowledge, celebrate successes and drive collective progress.
- Expert support – Receive coaching from experts to address challenges, sustain improvements and plan for long-term success.
- Visibility and recognition – Showcase your work through HEC's newsletter, website, social media, awards and networking opportunities.
- Learning opportunities – Such as webinars and activities to build foundational knowledge and skills in areas including [equity](#), [cultural safety](#), [engagement-capable environments](#) and [Rethinking Patient Safety](#).
- Tools for progress – Access resources and support to track and measure your impact over time.
- Funding opportunities – Apply for monetary awards and seed funding to enhance your initiatives.

By working together, we can improve healthcare for more people, ensuring safe, high-quality and timely care in every community.

# Enhancing Integrated Care (EIC)

Apply now



**Moderate effort** – Teams are expected to measure and share data with HEC, and participate in group coaching and learning activities with some additional optional activities.

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## Description

[Enhancing Integrated Care](#) (cohort 2) will support up to 60 primary and community care organizations working to enhance integrated team-based models of care, including virtual approaches to care, that help improve access to primary care and reduce pressure on emergency departments (see our glossary for the definition of integrated care).

## What you'll receive

Organizations selected to participate in Enhancing Integrated Care are eligible to receive:

- up to \$10,000 in seed funding (subject to [eligible expenses](#))
- individual and small-group coaching from experts with experience in team-based primary and community care and quality improvement practices
- virtual learning experiences and networking opportunities with peers and experts from across Canada
- measurement and evaluation support
- potential research support by CIHR-funded researchers for teams in the primary care sector ([more information](#))

During the application process, teams will be asked to specify the support they are requesting from the list of above. Applicants may select any combination.

## Timeline

This 12-month program will be delivered from December 2025 to November 2026.

## Who can apply?

Primary and community care organizations providing health and/or social care can apply to the Enhancing Integrated Care program.

Applicants must be actively involved in an existing team-based model of care, or seeking to improve one, within a primary care setting or another setting connected to primary and community care (for example, hospitals, homecare, mental health, social/community care, rehabilitation, palliative care).

Additionally, eligible teams can include: Regional health authorities, and/or provincial/territorial governments, First Nations, Inuit or Métis health service delivery organizations, First Nations, Inuit or Métis governments/organizations, in partnership with organizations that deliver integrated team-based care, provided that each organization that delivers care identifies a team of people who will lead the improvement work.

Application details:

- Applications open August 25, 2025 via the [HEC Community Portal](#).
- Applications are due by **October 31, 2025**.

## Eligibility and requirements

Applicants to the Enhancing Integrated Care program must demonstrate:

- They have an existing team-based model of care initiative underway that has the potential to reduce pressure on emergency departments.
- The initiative includes providers from different professional backgrounds (for example, physicians, nurses, allied health professionals, mental health providers, pharmacists, community/social service providers).
  - The program team includes:
    - An executive sponsor
    - A program team lead
    - A measurement/evaluation lead
    - [A patient/caregiver/community partner](#) with lived/living experience receiving team-based primary care.

## Participation commitments

Selected teams must:

- participate in the program activities outlined in the [activities schedule](#)
- complete program deliverables, outlined in the [deliverables schedule](#)
- complete expenditure reporting related to seed funding spending
- measure and share data with HEC and assigned coaches on required indicators to guide improvements in your setting, as well as track, monitor and share data with your team and coach (see the [deliverables schedule](#) and measurement FAQ.)

Apply for the offering via the [HEC Community Portal](#). For questions or to confirm eligibility, contact the HEC team [application-demande@hec-esc.ca](mailto:application-demande@hec-esc.ca) and read the [FAQ](#).

## Eligibility criteria

All applicants must meet the following criteria:

- based in Canada and provide publicly funded health and/or social services in Canada
- private (for-profit), charitable or non-profit organizations based in Canada that provide health and social care related services as partners with organizations based in Canada providing publicly funded health and/or social services in Canada

Organizations not eligible:

- organizations located outside of Canada
- federal government departments or agencies
- organizations that do not satisfy the requirements set forth in these terms (as determined by HEC in its sole and absolute discretion)

Ineligible team members:

- directors, officers, employees, representatives or agents of HEC or its affiliated entities
- award suppliers, advertising/promotion agencies and other individual(s) or entities involved in the development, production, implementation, administration, judging or fulfillment of this program

## Selection criteria

HEC, in collaboration with our partners, selects teams based on readiness for improvement and ensures a diverse group of participants. HEC will seek to identify a diverse group of teams that:

- represent communities across Canada
- serve diverse, equity-deserving populations, including First Nations, Inuit and Métis individuals, families and communities, racially diverse communities, LGBTQ2S+ individuals, immigrants and refugees, people living in rural and remote communities and people experiencing homelessness or precarious housing
- demonstrate potential to improve access to safe, high-quality, culturally safe care for many patients and communities
- commit to collect and share HEC program evaluation data, including the number of ED visits reduced for conditions that could be managed by primary care and/or the number of ED visits reduced for primary care-sensitive conditions
- have the time to devote to the improvement work, program activities and deliverables
- are at various stages of the improvement journey.

## How to apply and join

**Step 1:** Register/apply to the offering(s) of interest via the [HEC Community Portal](#).

**Step 2:** Using the selection criteria outlined in this call for applications, HEC will select and invite teams to participate in the offering and notify you of the outcome of your application.

**Step 3:** Teams invited to join the offering will be invited to sign a letter of agreement covering seed funds and coaching supports (if applicable), expenditure reporting, and collection and sharing of common measures. Teams must also:

- complete an electronic funds transfer form to issue seed funding
- review and confirm understanding of [HEC's Conflict of Interest Policy](#), available in the application

**Please read our [FAQ](#).**

## Potential research opportunity for primary care sector teams

HEC has partnered with the Canadian Institutes of Health Research (CIHR) to support the evidence-informed implementation of primary care innovations through Care Forward.

In addition to advancing the work that was part of their HEC proposal, HEC-funded healthcare delivery teams in the **primary care sector** have an opportunity to collaborate with highly qualified CIHR-research teams to:



- generate data-driven insights to improve the implementation and success of primary care innovations
- know in real-time whether a primary care innovation is having its desired effect
- adapt and improve the primary care innovation for maximum success
- improve the sustainability and long-term benefits of successful primary care innovations
- integrate research and data-driven insights seamlessly into the project workflow

HEC's partnership with CIHR, and your harnessing of the research support, will also have positive effects for people in Canada in need of high-quality primary care by advancing:

- the spread and scale of successful interventions to additional communities, population groups and regions
- the generation of new knowledge about which innovations are most effective, in which populations and contexts, and why

As part of the application process, HEC will invite Care Forward primary care sector teams to signal their interest in collaborating with a CIHR-funded research team. If your team expresses interest and is successful in your HEC application, following the completion of your agreement, your contact information and project details will be shared with CIHR-funded research teams.

The CIHR-funded research teams will assess the alignment between your project and their research expertise and capacity. Where there is a match, they will reach out to you directly to offer an opportunity to collaborate and discuss next steps. If mutually agreed, you and the research team will establish a separate agreement to guide your work together.

For questions or to learn more, email: [info.ihspr@ices.on.ca](mailto:info.ihspr@ices.on.ca) and [application-demande@hec-esc.ca](mailto:application-demande@hec-esc.ca)

# Glossary

## **Executive sponsor**

This is the senior leader with the ability to legally bind an agreement. The executive sponsor is responsible for supporting and approving the team's involvement in the program, signaling strong endorsement of their participation. This individual actively advocates for the program's objectives, ensuring that it aligns with strategic priorities. Additionally, they make certain that the team has dedicated, protected time to focus on and contribute to the program's success.

## **Integrated care**

Integrated care refers to the system where health and social services are organized and managed across sectors and organizational boundaries, allowing patients to receive coordinated and comprehensive services ([HSO definition](#)).

## **Measurement/evaluation lead**

This individual is responsible for collecting data to assist team learning about whether the changes they are making are resulting in improvement. This lead also informs HEC of the team's progress.

## **Patient/caregiver/community partner**

This is an individual with lived or living experience relative to the services provided by the participating organization(s) who can act as an advisor on the activities of the program team.

## **Team lead**

This is an individual who has the time, resources and accountability to coordinate and oversee the day-to-day activities of the improvement journey, serve as a key coordinator and motivator of the team.

## Eligible and ineligible expenses

HEC is committed to contributing funds to help offset costs associated with staff replacement, travel and accommodations for education sessions and related to the program.

Category	Eligible expenses*	Ineligible expenses
Personnel	<ul style="list-style-type: none"> <li>• compensation/honorarium for involvement of patient/caregiver advisors</li> <li>• release time for team members whose regular job description will be amended so they can work on the quality improvement initiative</li> <li>• funds to hire additional staff to backfill team members being released to work on the quality improvement initiative</li> </ul> <p>salary replacement costs to allow providers to participate in the quality improvement initiative</p>	<ul style="list-style-type: none"> <li>• eligible release time charged at rates above existing salary</li> <li>• service delivery costs (unless approved by HEC in advance)</li> </ul> <p>release time related to the financial administration of seed funds</p>
Travel for educational purposes**	<ul style="list-style-type: none"> <li>• travel costs for team members between quality improvement initiative site(s)</li> </ul> <p>travel, accommodation and meals for team members required to attend meetings, including the collaborative in-person workshops</p>	travel costs not directly related to delivery of the learning collaborative
Equipment	cost of equipment directly required for the quality improvement initiative (all equipment requests must be reasonable and fully justified)	large capital purchases
Supplies and services	<ul style="list-style-type: none"> <li>• cost of producing materials required for the quality improvement initiative (photocopies, printing, office supplies, etc.)</li> </ul> <p>costs related to communication of the quality improvement initiative results, such as meetings and video conferences</p>	cost of supplies and services not directly related to delivery of the quality improvement initiative

\* If your organization recovers part of its costs due to your tax status, the recoverable portions must be deducted from your budget and expenditure reports.

\*\*Alcohol and cannabis are always ineligible expenses; the lowest economy fare must be selected for all travel; and reasonable rates must be sought for all travel related costs. Note, travelling expenses are subject to:

- the Services the National Joint Council Travel Directive, which may be amended from time to time and can be viewed at <https://www.njc-cnm.gc.ca/directive/d10/v238/en>  
HEC's corporate administrative policies