



REVISED
Request for Proposals

**Interim Formative Evaluation of Phase II of the
Ontario SPOR SUPPORT Unit**

May 26, 2023

Invitation

The Ontario SPOR SUPPORT Unit (OSSU) is soliciting proposals from organizations with demonstrated experience and sector knowledge to evaluate the implementation of Phase II activities (beginning April 2021) of the Strategy for Patient Oriented Research (SPOR) in Ontario. The successful organization is expected to, working in conjunction with the OSSU Coordinating Centre, engage with OSSU's Initiatives, Research Centres, projects and partners to conduct a formative evaluation that will demonstrate how OSSU is set up for success and sustainability as well as identify opportunities for further enhancements.

Timeline

Launch:	May 26
LOI Due:	Jun 16
Invitation to submit:	Jun 20
Full Proposals due:	Jun 30
Selection:	Jul 5
Field work:	Jul - Nov
Interim Report due:	Oct 20
Final Report due:	Nov 25

Organizational Overview

OSSU was launched in 2013 as the SPOR SUPPORT Unit for Ontario with joint funding from the Government of Ontario and the Canadian Institutes of Health Research. During the first eight years, constituting Phase I of SPOR funding, OSSU undertook to shift the paradigm of health and health services research in Ontario to one that embraces patient partnership and patient-oriented approaches. Empowered as a collaboration of leading health research centres in Ontario and supported by a Coordinating Centre, OSSU engages researchers, patients, clinicians, policy makers, industry representatives and other health system professionals in the conduct of POR to generate evidence to benefit health.

Phase II of OSSU began in April 2021 with a modified SPOR mandate to further promote and support POR in Ontario and mobilize POR evidence to inform and implement more effective health policy and clinical practices throughout the province. Phase II mandated SUPPORT Units such as OSSU to address core components (Data Platforms; Learning Health System; Capacity Development; Patient Engagement) as well as special considerations (Supporting SPOR Entities; Equity, Diversity and Inclusion (EDI); Sex and Gender-based Analysis (SGBA); and, Official



Languages and Minority Communities) of SPOR. In preparation for this new mandate, OSSU prepared and established key research Initiatives targeted at local health priorities (such as Mental Health and Addictions, digital health and virtual care, etc) as well as the SPOR special considerations (EDI, SGBA, etc). OSSU tasked the McMaster Health Forum (led by Dr. John Lavis), through RISE, to lead the Learning Health Systems work in Ontario. The mandate for Phase II is fully described in the [CIHR directed funding call](#) launched October 8, 2019. Now, with world leading expertise in data access, methodological and research services, knowledge mobilization, clinical trials and capacity building, OSSU provides infrastructure and expertise to support patient-oriented research and knowledge mobilization in Ontario.

Further details on OSSU and SPOR are available in Appendix A and at www.ossu.ca.

Scope of the Work

OSSU is seeking an external Consultant to undertake an interim (2 year) formative evaluation that will cover all actions and activities of OSSU since April 2021. **This interim formative evaluation is expected to identify successes, ongoing challenges and lessons learned from the implementation of Phase II of OSSU** – with a particular focus on:

- The development of relationships in the Ontario health research system for the purpose of furthering SPOR objectives;
- The value-add of bringing OSSU into the existing research excellence in Ontario to support high-quality patient-oriented research;
- The engagement and involvement of key populations in OSSU activities (e.g. patients, decision makers, Indigenous groups, Francophone groups, underserved/marginalized groups);
- How POR and patient partners contribute to enhancing the overall research enterprise;
- Mobilization of POR evidence to policy and practice to improve health and the Ontario healthcare system sustainability;
- Sustainability of POR approaches to health and health services research in Ontario; and,
- Any role OSSU has had in steering national or cross-provincial conversations or activities around patient-oriented research;

The evaluation will gather information from OSSU's 8 [Initiatives](#), 14 Research [Centres](#), projects, Coordinating Centre and relevant stakeholders outside of OSSU (such as decision makers, patients, etc). However, it is **not** an evaluation of individual Initiatives or Research Centres other than in their contribution to overall goals of OSSU.



The successful group/organization in this RFP will have access to OSSU and SPOR documentation held by OSSU, as well as working with a small steering committee selected by OSSU that includes patient representation.

Submitted proposals will outline the organization's track record and capacity to deliver an evaluation report over a 4-month timeframe (July – November 2023).

Approach

While OSSU does not have a specific approach for the interim evaluation and will work with the contractor to ensure that the most appropriate approach for the evaluation, the proposed evaluation will need to provide evidence-informed impact stories from OSSU's first 2 years of Phase II activities, as well as aligning with evaluation criteria from OSSU's funders (CIHR and MOHLTC). Key issues to take into account for the approach are:

- To align the evaluation approach and findings with OSSU's strategic priorities and goals (see Appendix B), as well as those of SPOR Phase II as a whole (see Appendix A).
- The use of logic modelling to identify the theory of action for OSSU. The logic model approach will need to align with CIHR's logic model for SPOR SUPPORT Units (this will be made available to the selected contractor) and the MOHLTC's productivity analysis approach which is grounded in the Payback Framework for research evaluation and the CAHS research ROI Framework – Appendix C.
- The use of a multi-method approach to the evaluation that can capture qualitative and quantitative information on OSSU.

Contractor requirements

Proposals must showcase the contractor's abilities to provide and deliver the following:

1. Develop an evaluation approach tailored for OSSU's 2-year Phase II evaluation. This approach should include:
 - A clear link between the proposed evaluation framework and the frameworks used by OSSU in the past (Appendix B) and those underpinning CIHR and MOHLTC evaluation frameworks (Appendix C).
 - The development of a multi-method approach to evaluation that can capture both quantitative and qualitative information.
 - A distinct approach to developing evidence-informed impact stories from OSSU activities.



- A demonstrated ability to access the different stakeholders involved in OSSU activities across Ontario (including patients, researchers, policy makers, research management, etc.).
2. The successful organization should have a proven track record of providing formative and summative evaluations in the health research field. These evaluations should demonstrate:
- The ability to engage multiple stakeholder groups in the evaluation process.
 - Knowledge of the Ontario health research system.
 - Knowledge and understanding of the CIHR Strategy for Patient-Oriented Research.
 - An understanding of the relationships between the health research delivery system and the actors through which health research impacts occur.
3. Findings from the Phase II 2-year evaluation should be reported such that they speak to the needs of the multiple stakeholder groups engaged in OSSU. This includes:
- Detailing findings that relate to patients and caregivers (e.g. related to patient needs for research, roles of patients in health research, how health research has affected patients, etc.)
 - Findings that relate to OSSU funders at Federal and Provincial levels.
 - Findings that relate to OSSU's partners in Ontario (e.g. OSSU Research Centres/Initiatives, Ontario stakeholders in the health research system - health professionals, private/charity sectors, health care policy and delivery, etc.)

Key Considerations:

In their proposals, organizations should outline their relevant experience, capacity, and track record, as well as the anticipated cost (not to exceed \$100,000) and timeline to deliver on the work identified in this Request for Proposals. Bidders may collaborate to draw expertise from various organizations, but a single lead organization should be identified on each submission.

OSSU would like all interested vendors to submit a two-page Letter of Intent outlining your experience and intended approach to the interim evaluation. The letter of intent must be submitted electronically to ossu@ossu.ca by **5:00 pm eastern on Friday, June 16, 2023**. Please include "OSSU Phase II 2-year Evaluation LOI" in the subject line.

We will quickly review these submissions and invite the top 3 applicants to prepare and submit full proposals on **Tuesday, June 20, 2023**.



Full proposals are to be submitted electronically to ossu@ossu.ca by **5:00 pm eastern** on **Friday, June 30, 2023**. Please include "OSSU Phase II 2-year Evaluation" in the subject line.

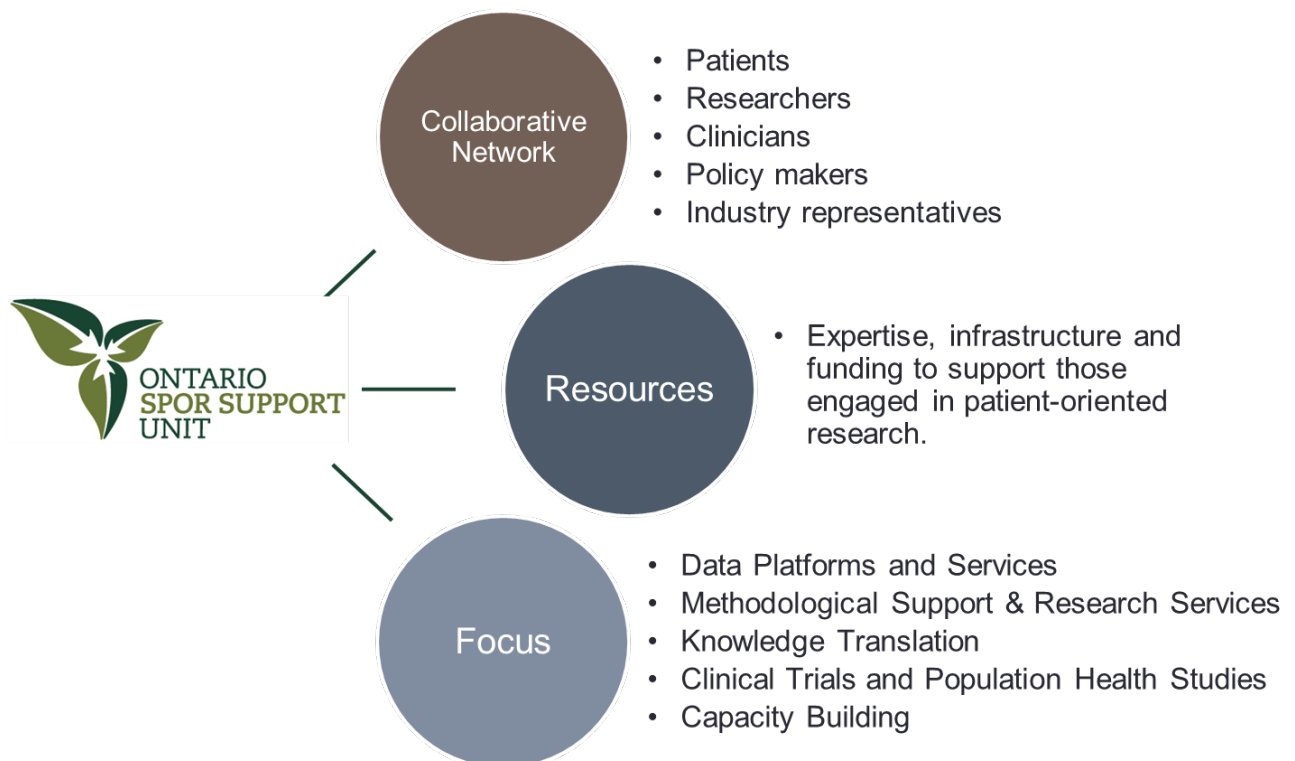
Questions related to the RFP should be submitted to ossu@ossu.ca before **5:00 pm eastern** on **Friday, June 23, 2023**.

Appendix A

OSSU Overview

OSSU brings together a diverse stakeholder group engaged with patient-oriented research in Ontario. With this group, OSSU leverages Ontario’s wealth of health research resources to align and build upon CIHR’s SPOR goals (Figure 1). Using this strategic approach allows OSSU to ensure that the existing high volume of excellent health research in the province gets realigned with the needs of the collaborative network of stakeholders in patient-oriented research in Ontario.

Figure 1. OSSU’s strategic approach



The OSSU is composed of a Coordinating Centre and health research centres/initiatives with diverse expertise related to patient-oriented research and knowledge mobilization (Figure 2). The majority of OSSU funding is directed to new activities at these health research centres/initiatives, including supports and services that they will provide to other researchers, infrastructure/platform investments, capacity building initiatives and knowledge mobilization.



Figure 2. OSSU Coordinating Centre and Health Research Centres

OSSU Resource and Service Matrix

Affiliated OSSU Centres and Initiatives	Data Platforms & Analytics Services	Methods Support & Development	Real World Clinical Trials	Career Development	Patient Engagement	Consultation & Research Services	Learning Health Systems	RM & Implementation Science	Equity, Diversity & Inclusion	Sex and Gender
Applied Health Research Centre (AHRC)	✓	✓	✓	✓	✓	✓		✓	✓	
Centre for Rural and Northern Health Research (CRANHR)	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clinical Trials Ontario (CTO) *	✓		✓		✓	✓				
Health System Performance Network-Institute for Better Health (HSPN IBH)	✓	✓		✓	✓	✓	✓			
ICES	✓	✓	✓	✓	✓		✓	✓	✓	✓
Innovations Strengthening Primary Health Care Through Research (INSPIRE-PHC)	✓	✓	✓	✓	✓	✓	✓	✓		✓
Knowledge Translation Program (KTP)		✓		✓	✓	✓	✓	✓		
McMaster Collaborative for Health & Aging (MCHA)	✓	✓	✓	✓	✓	✓	✓	✓	✓	
McMaster Health Forum (MHF)		✓		✓	✓		✓	✓		
Ontario Brain Institute (OBI) *	✓				✓					
Ontario Child Health Support Unit (OCHSU)		✓	✓			✓				
Ontario Drug Policy and Research Network (ODPRN)	✓	✓		✓	✓	✓	✓			
Ottawa Methods Centre (OMC)	✓	✓	✓	✓	✓	✓	✓	✓		
Sex and Gender Plus Research Support (WCH)						✓			✓	✓
Digital Health & Implementation Science Initiative (DHISI)							✓	✓	✓	
Fairness Is Excellence Initiative (FEI)		✓		✓	✓	✓	✓	✓	✓	✓
First Nations Research and Data Management Initiative (FNDRMI)**		✓		✓				✓		
Indigenous (Métis/Inuit) Initiative (IMI)	✓	✓			✓	✓	✓		✓	
Mental Health & Addictions Research Initiative (MHARI)	✓	✓		✓			✓	✓		
Ontario Francophone Communities Research Initiative (F-COFFRE)		✓		✓	✓		✓	✓	✓	
Public and Patient Engagement Collaborative (PPEC)		✓		✓	✓		✓		✓	
Training and Capacity Building Initiative (TCBI)				✓	✓					
Ontario SPOR SUPPORT Unit (OSSU) Coordinating Centre		✓	✓	✓	✓	✓	✓	✓	✓	✓

* Denotes centres that do not receive funding directly from OSSU
 ** Research requests must go through the First Nations Data Governance Committee

Figure 3. OSSU Working Groups

OSSU also funds end-of-grant EMPOWER (Engaging Multi-stakeholders for Patient Oriented-research Wider Effects and Reach) projects. These projects support end-of-grant knowledge mobilization activities for POR evidence that will build relationships and push the results to those who can use them to effect real impact and change for Ontario. Previously funded EMPOWER projects were published in a 2022 [Healthcare Quarterly supplement](#).

SPOR Overview

CIHR states that “Canada's Strategy for Patient-Oriented Research (SPOR) is about ensuring that the right patient receives the right intervention at the right time.” SPOR is a joint federal, provincial, territorial initiative to foster:

- Evidence-informed health care with system-wide impact.
- Enhanced patient engagement and partnerships.



- Innovative collaboration among researchers, clinicians, patients, health system administrators, policy makers, health charities, industry, etc.
- Engages a coalition dedicated to the integration of research into care and the translation of research results into improved health outcomes.

For SPOR, patient-oriented research refers to a continuum of research that engages patients as partners, focusses on patient-identified priorities and improves patient outcomes. In SPOR, ‘patient’ refers to individuals with personal experience of a health issue and informal caregivers, including family and friends.

SPOR as a whole is built on a number of principles (Box 1) that outline the way SPOR research should be funded, approached, practiced and assessed.

- Patients need to be involved in all aspects of the research to ensure questions and results are relevant and integrated into practice.
- Decision-makers and clinicians need to be involved throughout the entire research process to ensure integration into policy and practice.
- Funding is based on a 1:1 matching formula with non-federal government partners to ensure relevance and applicability.
- Effective patient-oriented research requires a multi-disciplinary approach.
- SPOR is focused on first-in-human (and beyond) research designed to be transformative in nature and improve patient outcomes and the effectiveness and efficiency of the health care system.
- SPOR is outcome driven and incorporates performance measurement and evaluation as integral components of the initiative.

Box 1. SPOR principles

SPOR is essentially comprised of two main components that both integrate patient engagement, and training and mentoring activities as core components: SPOR SUPPORT Units and SPOR Networks (Figure 4).

SUPPORT Units: Provincial and/or regional centres providing support and expertise to those engaged in patient-oriented research.

SPOR Networks: National collaborations to generate research evidence and innovations designed to improve patient health and health care systems.

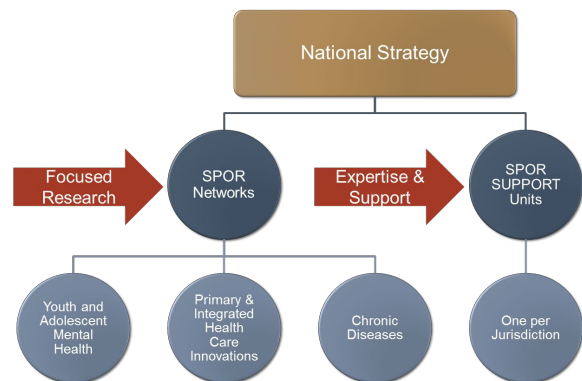


Figure 4. SPOR Components

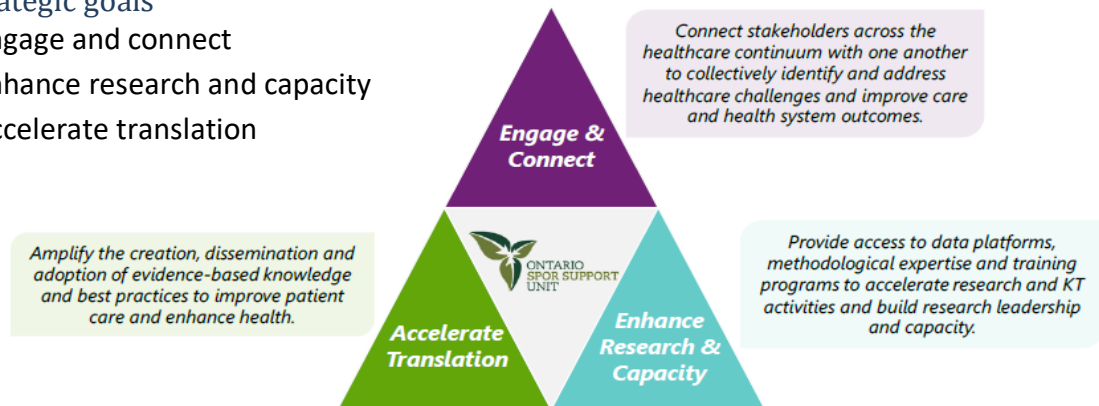
Appendix B

Conceptual framework for OSSU interim evaluation.

Key findings in OSSU's interim evaluation were analyzed and reported as an assessment of OSSU's progress against its **strategic goals** and **impacts from health research**.

OSSU Strategic goals

1. Engage and connect
2. Enhance research and capacity
3. Accelerate translation



OSSU Impacts¹

1. Advancing knowledge
2. Capacity building
3. Informing decision making
4. Health impacts
5. Social/economic impacts

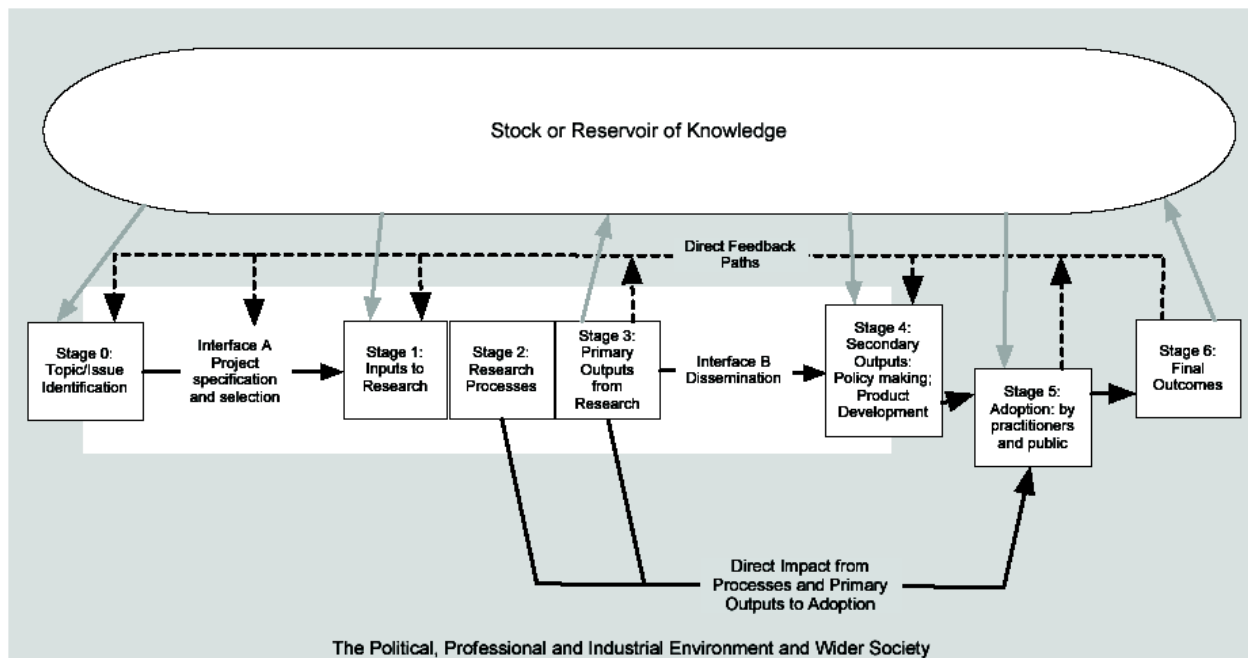
¹ These impact categories flow from those used in the Payback Framework and CAHS Framework for health research evaluation (see Appendix C for details)

Appendix C

Logic models underpinning OSSU, MOHLTC and SPOR evaluation frameworks

Underpinning the OSSU evaluation, Ontario Ministry of Health and Long-Term Care, and SPOR evaluation frameworks are two logic model based frameworks: the Payback Framework (figure 5) and the Canadian Academy of Health Sciences (CAHS) Framework (figure 6). More details on these two frameworks can be found in the links below the figures.

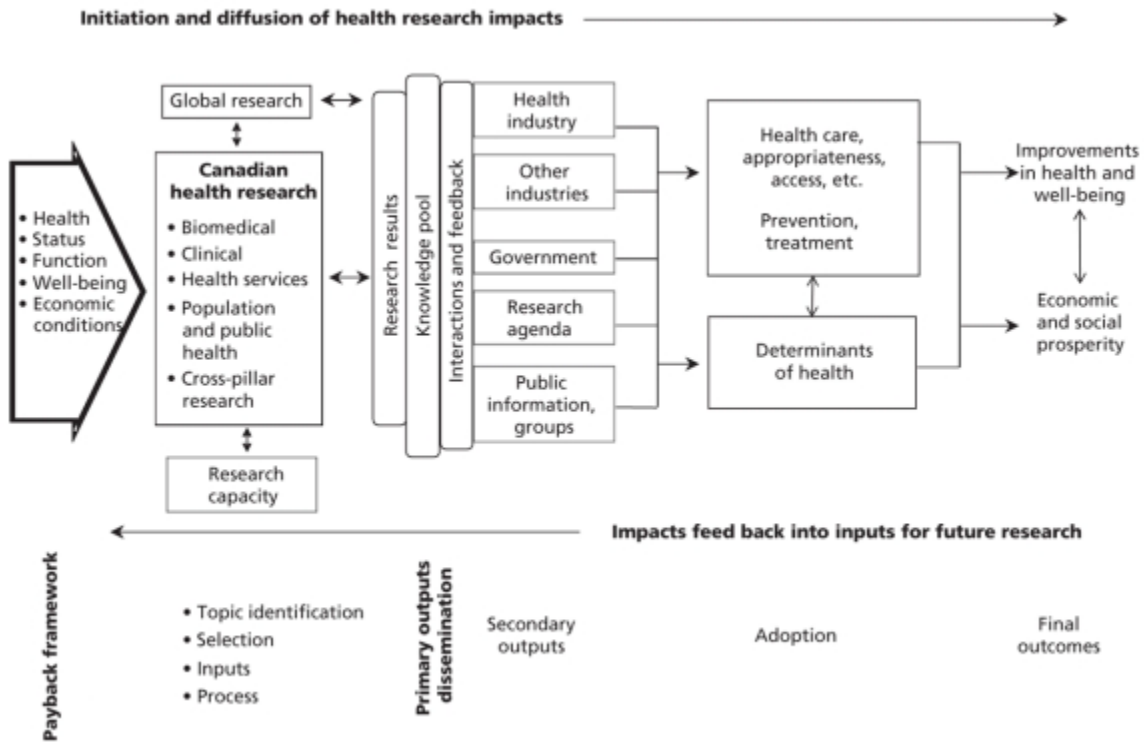
Figure 5. Payback Framework



Donovan and Hanney, 2011. 'The 'Payback Framework' explained' *Research Evaluation*, **20**(3): 181–183

(available at: <http://www.ukcds.org.uk/sites/default/files/uploads/PaybackFramework.pdf>)

Figure 6. CAHS Framework



Frank and Nason, 2009. 'Health research: measuring the social, health and economic benefits', *CMAJ*, **180**(5): 528–534. (available at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2645444/>)