

LE PRIX
HIPPOCRATE

INNOVATION CATALYST GENERATING VALUE

2026 HIPPOCRATE AWARD COMPETITION
CALL FOR NOMINATIONS



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2026 HIPPOCRATE AWARDS COMPETITION

CALL FOR NOMINATIONS

INTRODUCTION

The Hippocrate Awards recognize and promote innovations that make a tangible contribution to the evolution of health and social service systems.

The 2026 edition marks a major evolution for the competition. Against a background of rapidly changing needs, care pathways, and organizational structures, the Hippocrate Awards are strengthening their role as a catalyst for identifying, promoting, and accelerating high-impact initiatives.

The competition highlights projects capable of improving care, services, patient journeys, and the overall performance of healthcare systems, while addressing the growing complexity of clinical, human, organizational, and technological realities.

AN APPROACH FOCUSED ON VALUE AND REAL IMPACT

The Hippocrate Awards recognize innovations that demonstrate a tangible contribution to improving the health and well-being of populations.

Submitted projects must generate measurable results, integrate into real-world practices, and demonstrate their ability to create value for users, teams, organizations, and systems. The competition particularly recognizes initiatives capable of operating in complex environments, facilitating seamless care pathways, and supporting sustainable transformation of practices.



This vision is part of an integrated approach covering the entire health and social services continuum, from prevention to life trajectories with chronic disease, taking into account the human, organizational, technological, digital, and intersectoral dimensions that now influence system performance.

The 2026 edition also places significant emphasis on translational research and knowledge transfer to facilitate the faster translation of discoveries, knowledge, and innovations into clinical, organizational, and population-based practices.

A BACKGROUND OF PROFOUND TRANSFORMATION

Health and social services systems are evolving in a context marked by increasingly complex needs, the rise of chronic diseases, fragmented care pathways, pressures on human resources, and the accelerated integration of digital technology, data, and artificial intelligence.

In this environment, innovation can no longer be viewed solely as an idea or an experiment. It must demonstrate its ability to produce concrete, sustainable, and transferable effects in real-world settings.

The 2026 edition therefore places particular emphasis on:

- demonstrating results and measurable value;
- onboarding of innovations into career paths and organizations;
- interprofessional and intersectoral collaboration;
- reproducibility and scaling up;
- the dissemination of best practices and knowledge;
- the ability to create alliances that generate impact for communities.

AN OPEN, FORWARD-LOOKING COMPETITION

The competition is open to teams from **various** networks with ties to health and social services, public, private, non-profit, and community organizations, academic, research, and innovation communities, health-related businesses and innovators, as well as cross-sector partnerships among stakeholders with responsibilities in the health sector.

The competition promotes transformative collaborations and initiatives that build bridges between clinical, scientific, technological, academic, community, and organizational sectors.



New for 2026, the competition is now **open to initiatives outside Quebec and international initiatives**, provided they demonstrate proven value in their original background, show structured potential for adaptation in Quebec, and offer concrete improvements for population health and the evolution of health systems.

The competition aims to foster connections among various innovation stakeholders to accelerate the flow of knowledge, the emergence of high-impact solutions, and the development of local, pan-Canadian, and international collaborations.

A VISION FOR THE FUTURE

The Hippocrate Awards aspire to become a hub for the convergence and acceleration of high-value innovations in health and social services.

Beyond recognizing projects, the competition aims to support the emergence of solutions capable of inspiring practices, strengthening systems, and making a lasting contribution to improving public health.

Through this edition, the Hippocrate Awards help showcase the innovations.

PROJECT CATEGORIES FOR EACH AWARD

Each award has two categories

TRANSFORMATIVE PROJECT

- Must demonstrate an advanced level of maturity and have been active for at least 18 months;
- Must demonstrate measurable results;
- Must have solid evidence demonstrating value creation (before/after data);
- Must demonstrate real onboarding, transferability, or scalability;
- Must be supported by relevant stakeholders;
- Must demonstrate progress, if it has been submitted in the past and was not selected for a grant;
- Must align with the person-centred, value-based approach to care and services, as well as with the ministry's five-point purpose.

EMERGING PROJECT

- Must be in the initial or intermediate phase and serve as a proof of concept;
- Must have been in place for at least six months;
- Must demonstrate strong potential for value creation;
- Must have a mechanism for measuring results as well as data demonstrating both the innovative aspects of the project, the preliminary results obtained, and the indicators currently being developed;
- Must demonstrate capacity and potential for growth, as well as the steps necessary for scaling up;
- Must align with the person-centred, value-based approach to care and services, as well as with the Ministry's five-point purpose.

Notes:

- For the Innovation Award – Next Generation and Emerging Talent, the project must have been in operation for more than three months.
- All applications submitted for the Innovation Award – Global Solutions, Local implementation must be filed in the International Solutions with Local Impact category, regardless of the nature of the project.

ELIGIBILITY

- ✓ The Hippocrate Awards competition is open to health and social service organizations collaborating on an interdisciplinary or intersectoral innovation project. These may include the scientific community, the private sector, the public sector, associations, or community organizations. The synergy between these entities allows the project's impact to extend beyond the immediate sphere to serve broader societal interests. In this background, the organizations are characterized by their commitment to fostering innovation through collaboration across different sectors and disciplines, thereby contributing to improved care and services for users, the advancement of knowledge, technological development, and the well-being of society.
- ✓ Organizations work together to contribute to innovation that is based on partnerships with research networks or centres and that also incorporates a dimension of accountability to the public in its development or outcomes.
- ✓ The team's composition and collaboration reflect a diversity of expertise and resources aimed at achieving a common innovative purpose: improving value from the perspective of users and the general public, as well as the well-being of the system's stakeholders.

An application will not be accepted if:

- the project is submitted in more than one award category;
- a Hippocrates Award has already been awarded to this same project in a previous edition, and for the same award;
- it includes attachments: no attachments will be accepted with the application submission;
- the project has been operational for less than 6 months for emerging projects or less than 18 months for transformative projects. An exception applies to the Innovation Award – Next Generation and Emerging Talent, for which the project must have been operational for more than 3 months.

Additional Notes

- A project that has already won an award in the Emerging category remains eligible in the Transformative category if it meets the criteria for the latter.
- A project that has already been submitted without receiving an award may be resubmitted if it demonstrates progress.

SUBMISSION OF APPLICATIONS

To be accepted, each application must:

- ✓ be submitted no later than **September 3, 2026, at 11:59 p.m.**;
- ✓ specify the category in which the project is being submitted. A project may be submitted for only one award. *However, an exception applies to pan-Canadian or international organizations submitting a project in the “International Solutions with Local Impact” category, provided that their teams are also jointly participating in a project submitted by a Quebec organization in another category and are collaborating on that project;*
- ✓ relate to a project conducted in an interdisciplinary and/or intersectoral manner;
- ✓ comply with the following formatting criteria: the font must be Times New Roman; titles must be in 12-point font and bold; the text must be in 12-point font, single-spaced, with 6-point spacing after paragraphs; margins (left, right, top, and bottom) must be 3 centimeters;
- ✓ Explain the intended and achieved results for the various phases of the project.

Note: A series of questions accompanies the description of each award. These questions are provided for guidance only, and the elements of the answers should normally be found in the responses to the criteria.

As part of the 2026 edition, the key performance indicators (KPIs) developed by Canada Health Infoway and presented in the appendix of this document are provided as a reference framework to help align and strengthen the evaluation of the impact of submitted projects. Candidates are strongly encouraged to draw inspiration from these KPIs when describing and measuring their results. Applicants are not required to report on all KPI families; instead, where possible, they should select the indicators that best align with their project objectives and stage of maturity.

Applicants are, however, requested, where the information is available, to complete a one-page summary of the content elements outlined in the table entitled “Required Fields for the Key Performance Indicators Table”, found in the appendix.

Finally, the jury recognizes that these KPIs may not have been available or integrated at the time certain projects were designed. Their use will therefore be assessed contextually, based on the extent to which candidate teams were reasonably able to incorporate them into their initiatives.

A complete application includes the following:

- ☐ Application form
- ☐ A completed Word document, in accordance with the formatting criteria described above (**maximum of 10 pages**). Videos and additional attachments will not be considered in the project review;
 - An additional page may be included for responses (where available) to the table entitled “Required Fields for the Key Performance Indicators Table”, found in the appendix of the KPI document.
- ☐ One-page summary (maximum 300 words) describing and highlighting the following:
 - The problem addressed and its root causes;
 - The innovative nature and value creation of the proposed solution;
 - The main results achieved or expected, the measurement of results, and the performance reflected in the results;
 - Effective onboarding and benefits for the target clientele;
 - the gains achieved through developed partnerships, interdisciplinary and intersectoral synergies, and the complementarity of the organizations.

Notes: The one-page summary will be used for the preliminary analysis of projects to ensure their compliance with the 2026 competition criteria and their eligibility, prior to their review by the jury committees.

For the winning teams, this summary will be used for publication in the digital journal Hippocrate.

- ☐ Authorization for the usage of information related to the project through the mechanisms implemented by the organizers of the Hippocrate Award and its collaborators (website, Hippocrate journal, newsletter, gala, collaborations in research, education, development, or other sponsor media aimed at promoting the winners and their projects).

Submission of Application

Please send your completed form to candidature2026@prixhippocrate.ca. Please note that only complete applications submitted electronically will be accepted.

TIMELINE

Applications open: **May 29, 2026**

Application deadline: ~~July 9, 2026, 11:59 p.m.~~

Extended deadline: September 3, 2026, at 11:59 p.m.

Evaluation and selection of applications by the jury: **Late summer 2026**

Hippocrate Awards ceremony: **October 29, 2026**



CHOICE OF AWARD AND CATEGORY

Form to be completed

Participants in the 2026 call for applications must specify the award and category for which they are applying. **Only one category** may be selected per project, with the exception of Awards 11 and 12 (see the footnotes in the relevant sections).

✓ **I am submitting my project for: (Check the award and its category)**

	Transformative Category	Emerging Category
Population Health and Integrated Care Pathways 1. Innovation Award – Integrated Prevention and Sustainable Health 2. Jean-Paul Marsan Innovation Award – Transforming Complex, Integrated and Value-Creating Care Pathways		
Human-Centered Care and Transformation of Healthcare 3. Innovation Award – Putting People and Quality First		
System Intelligence and Operational Excellence 4. Innovation Award – Artificial Intelligence 5. Innovation Award – Digital Transformation 6. Innovation Award – Logistics and Chain Supply 7. Innovation Award – High Value-Added Health Technology		
Integrated Research and Accelerated Impact 8. Innovation Award – Translational Research		
Human Leadership and Emerging Skills 9. Innovation Award – Next Generation and Emerging Talent 10. Innovation Award – Adaptive Workforce, Transformation of Skills and Practices		
Quebec Leadership on the International Scene 11. Innovation Award – International Impact and Value Transfer		N/A
International Solutions with Local Impact 12. Innovation Award – Global Solutions, Local implementation		N/A

HOW TO SUBMIT YOUR PROJECT AND HOW IT WILL BE EVALUATED

Each submitted project must clearly and substantially demonstrate:

- the **real challenges it addresses**, including the causes of the problem and the initial situation;
- **the complexity of the background** in which it operates (clientele, organization, resources, background, etc.);
- **the relevance of the proposed solution** and its ability to effectively address the identified needs;
- its level of onboarding into healthcare practices and health-related systems;
- **the results achieved or expected**, supported by measurable and comparable indicators;
- its adaptability, scalability, and reproducibility.

The information provided must be:

- factual and supported by data, where available;
- **structured and consistent** with the project's purposes;
- **comparable over time**, particularly through before-and-after data or equivalent analyses;
- **grounded in real-world conditions**, taking into account the constraints and dynamics specific to the healthcare system.

Particular attention is given to **demonstrating results** and the project's ability to have a concrete impact on:

- people's health and well-being;
- the experience of users and professionals;
- the quality, safety, and appropriateness of care, services, and research;
- the overall efficiency and performance of the system.

Projects must also demonstrate how they leverage the various components of the system—including human resources, organizations, technologies, infrastructure, and logistics—and how these components interact in a background marked by increasingly complex challenges.

Finally, submitted initiatives must demonstrate their ability to align with the system's evolution, whether through their potential for deployment, their replicability, or their contribution to the adoption of best practices, both in Quebec and internationally.



2026 HIPPOCRATE AWARD COMPETITION

AWARD DESCRIPTIONS





CATEGORY – 2026 COMPETITION
**POPULATION HEALTH AND INTEGRATED
CARE PATHWAYS**

1. Innovation Award – Integrated Prevention and Sustainable Health

This award recognizes innovative initiatives that sustainably improve the wellness and overall health of populations by addressing the root causes of disease, vulnerabilities and the deterioration of health conditions. It highlights interventions that aim to prevent the onset of health problems, limit their progression, complications or relapses, and positively transform life trajectories (health, care and services). This approach encompasses both actions aimed at healthy individuals and those designed to prevent the worsening of the situation for people already living with an illness, a disability, risk factors or chronic conditions, within a continuous framework of prevention, health promotion and the maintenance of wellness.

The award recognizes projects that tackle the social, economic, environmental, cultural and behavioural determinants of health, acknowledging that health is shaped far beyond the health care system. From a sustainable health perspective — that is, “a healthy mind in a healthy body, in healthy living environments and settings, on a healthy planet” — it highlights the importance of taking action on living environments, working and living conditions, physical and social environments, lifestyle habits, diet, physical activity, education, housing, transport, the environment, culture and all the factors that have a lasting influence on the health and quality of life of populations.

The recognized initiatives stand out for their ability to foster strong cross-sector and multidisciplinary collaboration, involving citizens, communities, the voluntary sector, institutions, local authorities, government bodies, the research and education sectors, and the various relevant public and private health systems. They demonstrate a commitment to building health collectively, by empowering individuals and communities, promoting citizen participation, and reducing social, territorial and environmental health inequalities, with a focus on equity and population-level responsibility.

The selected projects demonstrate measurable, transformative and sustainable value creation, at the individual, population and systemic levels. They contribute to improving health outcomes, the citizen experience, quality of life and resource usage, whilst reducing pressure on the health and social services system. They are based on rigorous measurement, evaluation and learning mechanisms, and show strong potential for sustainability, adaptability, transferability and scalability across different backgrounds and settings.

This award recognizes innovative initiatives that sustainably improve the wellness and overall health of populations by addressing the root causes.

Key criteria

- ✓ clearly describe the root causes, determinants, population, territory or background targeted by the initiative;
- ✓ explain how the initiative prevents the onset, limits the progression or improves sustainable health trajectories;
- ✓ demonstrate how living environments, behaviours, policies, community conditions or structural factors contribute to the initiative;
- ✓ identify cross-sector partners and describe their specific roles;
- ✓ describe the involvement of citizens, patients, families, the community and their networks, and how self-determination is encouraged;
- ✓ provide indicators, benchmarks, targets, data sources, stratification by equity and time periods;
- ✓ outline initial lessons learnt for emerging projects and demonstrate the long-term impact for transformative projects;
- ✓ explain the conditions for sustainability, adaptation and scaling up;
- ✓ demonstrate, where applicable, how data, digital tools or AI contribute to the value of prevention and sustainable health.

The application must establish a concrete link between determinants, intervention activities, evidence, equity and value creation.

Criteria

1. Relevance and understanding of determinants

- Present the definition of target populations, territories, vulnerabilities or priority groups, and the deliberate consideration of vulnerable backgrounds and priority groups.
- Clearly identify the targeted health determinants (social, economic, environmental, behavioural and structural) and their links to the Health Challenge in the field of prevention and sustainable health.
- Demonstrate an understanding of the underlying causes influencing health and life trajectories by documenting the issues using population-level data.
- Demonstrate the originality of the approach, its relevance and its grounding in real needs.

2. Sustainable health and structural impact

- Explain how the initiative works to influence behaviours, environments, living conditions or structural determinants at an early stage.
- Demonstrate the likelihood of sustainable improvements in wellness, overall health and health trajectories.
- Illustrate concrete changes demonstrating an impact on the prevention or reduction of disease progression.

3. Cross-sector collaboration and strong local engagement

- Demonstrate the scope, relevance and commitment of cross-sector partners, as well as the clarity of roles, responsibilities, coordination mechanisms and governance, and show how the roles and contributions of each partner are aligned around a common purpose of creating healthy living environments and promoting health.
- Demonstrate how the project is rooted in a specific area, community or living environment, creating a local ecosystem that promotes health.
- Demonstrate how the various indicators and dimensions related to sustainable health are taken into account, and the operational onboarding of cross-sector partnerships (public, community, voluntary, etc.) at all stages of the project.
- Present evidence of stable, long-term collaboration for successful projects and demonstrate the operational link between the social and health care system, the determinants of health, and sustainable health partners outside the health care system.

4. Human dimension, global health and self-determination

- Demonstrate how citizens, patients, families, communities or participants are involved in the design, governance, implementation and improvement of the project.
- Demonstrate how the approach promotes individual and collective self-determination and values experiential knowledge (peer support, community leadership) on par with professional expertise.
- Identify how holistic health (physical, mental and social) is taken into account.
- Demonstrate an enhancement and improvement in the quality of empowerment and lived experience.

5. Value-Based Health Care (VBHC)

- Demonstrate an improvement in health and wellness outcomes.
- Demonstrate a more efficient and sustainable usage of resources by showing how the project reduces preventable health problems or pressure on health systems.
- Demonstrate value created at the individual, population and system levels.
- Demonstrate the logic linking determinants, intervention activities and value creation.

6. Measuring and demonstrating impact

- Define indicators from the outset and ensure they align with prevention purposes.
- Demonstrate impacts (qualitative and/or quantitative) on behaviours, environments or health.
- Present the monitoring of impact over time and its usage for learning and adjustment, as well as the credibility of before-and-after comparisons, comparable groups or other evaluation models.

7. Equity and population-level impact

- Demonstrate a contribution to reducing health inequalities of a social, geographical, cultural and economic nature or those related to access.
- Illustrate an impact at the level of a population or a region.
- Demonstrate how the project empowers the population to understand, measure and take action regarding the determinants of sustainable health and contributes to the co-construction and dissemination of value-added knowledge for the population.

8. Sustainability and scalability

- Demonstrate the ability to sustain the solution over time by identifying the conditions for sustainability and deployment.
- Outline the conditions for success, known constraints and risk mitigation.
- Demonstrate adaptability to other backgrounds or environments.
- Demonstrate potential for transformation on a larger scale (plans for adaptation and replication in other backgrounds).

9. Contribution of digital technology, data and AI

- Demonstrate the usage of data to understand, target and monitor interventions and support behavioural change.
- Demonstrate the relevance of technology usage to achieve prevention outcomes, rather than as a standalone feature.
- Illustrate the concrete contribution of digital technology or AI and the benefits associated with population analytics or continuous monitoring.
- Demonstrate data quality, confidentiality, governance, interoperability and acceptability.

EVALUATION CRITERIA – EMERGING PROJECT

1. Innovation Award – Integrated Prevention and Sustainable Health

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

EMERGING PROJECT	
CRITERIA	
1- Relevance and understanding of determinants	The project presents a strong initial rationale, clear targeting of determinants, relevant baseline data and a distinctive approach to prevention and sustainable health.
2- Sustainable health and structural impact	The project presents a compelling design for upstream prevention, observable changes from the earliest stages and a credible pathway towards sustainable health effects.
3- Cross-sector collaboration and strong local engagement	The project involves the relevant partners at a very early stage, defines their contributions and is embedded in a concrete prevention background.
4- Human dimension, global health and self-determination	The project includes meaningful early participation by citizens or the community as well as capacity building, and shows initial signs of engagement or behavioural change.
5- Value-Based Health Care (VBHC)	The project defines a compelling potential value, targeted prevention pathways, as well as credible early indicators or measurement plans.
6- Measuring and demonstrating impact	The project has a robust early measurement plan, monitored indicators, documented lessons learnt and credible early signs of impact.
7- Equity and population-level impact	The project clearly targets vulnerable backgrounds, is designed to be accessible and has credible potential to benefit the population.
8- Sustainability and scalability	The project identifies the conditions, constraints and rationale for early scaling up that make its future sustainability credible.
9- Contribution of digital technology, data and AI	The project makes appropriate usage of data or simple digital tools to understand, target, monitor or learn from the early stages of implementation.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

1. Innovation Award – Integrated Prevention and Sustainable Health

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

TRANSFORMATIVE PROJECT	
CRITERIA	
1- Relevance and understanding of determinants	The project demonstrates a thorough understanding of the determinants, a documented transformation of practices, and a substantial contribution to knowledge transfer in the field of prevention.
2- Sustainable health and structural impact	The project demonstrates measurable and sustainable changes in living environments, behaviours or living conditions, with a structural impact over time.
3- Cross-sector collaboration and strong local engagement	The project demonstrates an integrated, stable and functional cross-sector ecosystem, characterized by sustainable coordination and shared responsibility.
4- Human dimension, global health and self-determination	The project demonstrates civic engagement at every stage, a measurable improvement in the experience and signs of sustainable empowerment.
5- Value-Based Health Care (VBHC)	The project demonstrates measurable health value, including improved wellness, a reduction in preventable outcomes and effective usage of resources.
6- Measuring and demonstrating impact	The project demonstrates its impact over time through longitudinal or comparable data, sustainable outcomes and active learning mechanisms.
7- Equity and population-level impact	The project demonstrates a measurable reduction in inequalities, a significant impact on the population or the region, and improved access to resources that promote health.
8- Sustainability and scalability	The project demonstrates sustainable onboarding, the capacity to evolve, and large-scale deployment that has been completed or is currently underway.
9- Contribution of digital technology, data and AI	Data, digital tools or AI are onboarded into practice and demonstrably contribute to the adjustment, monitoring, evaluation or impact of prevention efforts.

2. Jean-Paul Marsan Innovation Award – Transforming Complex, Integrated and Value-Creating Care Pathways

This award recognizes initiatives that transform care and service pathways in complex settings in a concrete, integrated and measurable way, in order to better meet the scalable needs of service users and organizational realities. It highlights projects that improve coordination across the entire care continuum—from prevention to specialist care and social services—while reducing fragmentation, delays, duplication and inefficiencies.

It promotes solutions that simplify navigation, strengthen continuity and improve the clarity of pathways for users and their loved ones. The initiatives stand out for their ability to adapt to complex situations (comorbidities, social factors, frequent transitions, multiple stakeholders and settings) and to offer concrete, integrated responses, thereby supporting a more seamless and coherent experience.

From a value perspective, this award recognizes initiatives that improve the outcomes that truly matter to individuals, their loved ones and communities, whilst optimizing the usage of resources across the entire continuum. Value is understood as the improvement in outcomes relevant to service users in relation to the resources mobilized, costs avoided, the reduction of low-value interventions, and the system's capacity to learn, adapt and improve over time.

The selected projects demonstrate measurable improvements in access, outcomes, experience and the optimal usage of resources. They are based on effective coordination between multiple stakeholders and facilitate scaling up by integrating with legacy systems. The use of data, digital technology or artificial intelligence is considered a lever when it makes a tangible contribution to improving pathways and creating value.

Key elements

A strong application is factual, precise and evidence-based.

- Describe the problem that existed prior to the project and its causes.
- Identify who was affected and indicate whether users were involved in the process and at what stage.
- Explain why the customer journey was complex.
- State what has changed in the process.
- Explain how this project is innovative or significantly different from previous practices.
- Identify the partners involved and their roles in the project, as well as the coordination mechanisms.
- Explain how the project was implemented.
- Provide the results achieved or those that are beginning to emerge, as appropriate.
- Identify the mechanisms for measuring results and the measurement process.
- Outline the risks, consequences, unforeseen issues and resolution mechanisms.

- Explain how issues of equity, accessibility and cultural safety have been addressed.
- Demonstrate whether the model can be sustained, transferred or scaled up, as appropriate.

The application must include:

- ✓ a description or diagram illustrating the process before and after;
- ✓ a table of key performance indicators;
- ✓ an explanation of the measurement method;
- ✓ a summary of the risks associated with implementation and mitigation strategies;
- ✓ a description of the conditions for sustainability and transfer.

Criteria

1. Documented problem, population and pathway (baseline)

- Describe the current issue, including its causes, scope and significance.
- Identify the characteristics of the target population or client group and their needs, particularly in complex backgrounds.
- Describe the background of complexity and the current pathway: main gaps, unmet needs (e.g., gaps, delays, fragmentation and duplication).
- Explain the experience of users, carers, professionals and the community.
- Support the problem statement with **measurable baseline** data (access, outcomes, resource usage).
- Present a mapping of the journey before and after.
- Quantify the observed gaps and their impacts on individuals and the system.

2. Operational response to complexity

- Describe the sources of complexity, how these realities are identified and taken into account, data on needs, avoidable disruptions, etc.
- Outline the concrete response tailored to the complexity of the situation (clinical, social, organizational).
- Describe the operational model for managing complexity and the mechanisms for coordination among the multitude of providers, organizations or sectors.
- Explain how the response is tailored to different levels of need: adapting interventions to people's actual pathways.
- Demonstrate how the project has identified the systemic dynamics underlying pathway disruptions: feedback loops, bottlenecks, thresholds, interdependencies between actors, implicit rules, incentives, information asymmetries or varying local capacities.

3. Redesign and integration of new pathway

- Demonstrate a concrete transformation of pathway(s) compared to previous practices (fluidity, continuity, clarity) and include a diagram of pathway(s) before and after.
- Illustrate how the pathway has been redesigned to simplify navigation for users and their families, and how this is implemented in practice.
- Illustrate the onboarding of changes into the service continuum: a model of integrated services across organizations, sectors and service levels.
- Demonstrate how roles, workflows, handover and navigation have evolved and led to a reduction in delays, duplication and inefficiencies.

4. Human experience, carer experience and self-determination

- Explain how the project improves the experience of the various stakeholders.
- Present data on the experience of users and their families.
- Demonstrate how the project takes into account people's participation, overall health and self-determination.
- Present indicators on the experience of teams.
- Illustrate improvements in the care relationship, continuity of care and measures of shared decision-making.

5. Equity, accessibility and cultural safety

- Identify how the project improves and addresses complexities and inequalities in access, experience, continuity and outcomes (measures, adaptations, strategies).
- Demonstrate how services are adapted to the complex realities of fragile and vulnerable populations (aging, chronic conditions, marginalized people, etc.).
- Demonstrate how social, cultural or territorial dimensions are taken into account.
- Determine how impact is analyzed and taken into account.
- Where possible, projects must include at least one outcome indicator that is meaningful to users or their carers, such as functional independence, quality of life, symptom control, the ability to remain in the desired living environment, the burden on carers, trust, understanding of the care plan, perceived safety or self-management capacity.

6. Outcomes, value and use of resources

- Present the types and indicators of usage and the outcomes measured (clinical, functional or psychosocial).
- Demonstrate an improvement in the usage of resources.
- Include user-reported outcomes and experience indicators.
- Demonstrate efficiency gains, avoided costs or improved productivity.

7. Implementation and collaboration

- Describe the measures put in place (plan, structure, roles, approaches) to coordinate stakeholders and foster their cross-professional collaboration, thereby achieving the intended outcomes.
- Demonstrate how the project is onboarded into existing practices and organizations.
- Provide concrete examples of cross-professional and cross-sector collaboration.
- Demonstrate the impact on service continuity and information sharing.

8. Learning, sustainability, risks and scaling up

- Indicate whether the project can be sustained, improved and transferred, as well as the conditions for doing so.
- Outline the measures put in place by your project to measure, monitor and ensure continuous improvement (dashboard, register, education support, etc.).
- Outline the lessons learnt and adjustments made.
- Describe the risks and mitigation strategies, as well as your management mechanisms.
- Demonstrate the contribution to system transformation.

EVALUATION CRITERIA – EMERGING PROJECT

2. Jean-Paul Marsan Innovation Award – Transforming Complex, Integrated and Value-Creating Care Pathways

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KPIs

EMERGING PROJECT	
CRITERIA	
1- Documented problem, population and pathway (baseline)	The application provides a clear description of the baseline situation, identifies the target population and documents the main gaps in the delivery system.
2- Operational response to complexity	The project has a clear complexity model, defined target profiles, early coordination mechanisms and evidence demonstrating that the model can adapt to different needs.
3- Redesign and integration of new pathway	The project demonstrates a sustainable redesign involving multiple teams, organizations or sectors, with documented changes to workflows and systematic usage over time.
4- Human experience, carer experience and self-determination	The project includes meaningful co-design or feedback mechanisms, as well as early indications that the pathway is easier, clearer or more supportive for users, carers, communities or teams.
5- Equity, accessibility and cultural safety	The project embeds equity from the outset, with defined priority groups, measures in place for subgroups and early adaptations aimed at reducing barriers.
6- Outcomes, value and use of resources	The project provides a targeted set of early indicators, a clear measurement method and plausible evidence of emerging value.
7- Implementation and collaboration	The project benefits from strong commitment from sponsors, a realistic implementation plan, clear governance and initial evidence demonstrating its practical feasibility.
8- Learning, sustainability, risks and scaling up	The project demonstrates active learning, clear subsequent steps, defined risks, early monitoring of uptake and a credible plan for sustainability or future broadcasting.

ASSESSMENT CRITERIA – TRANSFORMATIVE PROJECT

2. Jean-Paul Marsan Innovation Award – Transforming Complex, Integrated and Value-Creating Care Pathways



TRANSFORMATIVE PROJECT	
CRITERIA	
1- Documented problem, population and pathway (baseline)	The project provides robust baseline data, demonstrates the scale of the problem and uses this data to support a credible assessment of progress over time.
2- Operational response to complexity	The project demonstrates sustained and structured management of complex pathways, with evidence of a reduction in unmet needs, a reduction in disruptions, or improved coordination between different settings.
3- Redesign and integration of new pathway	The project demonstrates a sustainable redesign involving multiple teams, organizations or sectors, with documented changes to workflows and systematic usage over time.
4- Human experience, carer experience and self-determination	The project demonstrates a measurable improvement in the experience of users, carers, the community or professionals and shows that this experience is integrated into governance or continuous improvement.
5- Equity, accessibility and cultural safety	The project provides disaggregated results and demonstrates an improvement in scope, access, experience, continuity or outcomes for disadvantaged or marginalized groups.
6- Outcomes, value and use of resources	The project delivers sustainable and significant outcomes using pre- and post-data with a comparison group or an external benchmark, or a sustainable longitudinal change relative to the baseline over a period of at least 12 months.
7- Implementation and collaboration	The project demonstrates mature governance, stable collaboration, onboarding into standard workflows, and a proven ability to manage implementation challenges over time.
8- Learning, sustainability, risks and scaling up	The project demonstrates sustainable adoption, active continuous improvement, sustainable governance or funding, as well as risk management and evidence of replication, transfer or scaling up.



CATEGORY – 2026 COMPETITION
**HUMAN-CENTERED CARE AND TRANSFORMATION
OF HEALTHCARE**

3. Innovation Award – Putting People and Quality First

This award recognizes initiatives that use innovation to place people at the heart of care and services, by enhancing the quality of interactions and the relationship between users and staff. It highlights projects that demonstrate how transformative innovation tangibly improve practices, not by adding complexity, but by simplifying pathways, improving continuity of care and creating care that is more seamless, coherent and meaningful.

In a context marked by rapid changes in technology, information systems and automation, this award recognizes initiatives that succeed in preserving and strengthening the human dimension of care and services. It highlights projects capable of integrating these developments whilst fostering meaningful professional relationships, a better understanding of needs and an experience more attuned to the realities faced by users.

It recognizes initiatives—whether organizational, clinical, social or digital—that support professional judgment, facilitate teamwork and enrich the user experience without overburdening practices or undermining the human dimension of care. In particular, projects may address the evolving needs of certain client groups requiring greater proximity, support and human continuity, notably people living with chronic conditions, comorbidities, mental health vulnerabilities, or those who have survived previously fatal illnesses but remain vulnerable and require tailored long-term follow-up.

The projects stand out for their ability to strengthen the quality of the relationship, to recognize the user as an engaged participant, and to promote approaches where care, social services and human support complement one another in a coherent and practical way.

The selected projects demonstrate measurable improvements in terms of quality, accessibility, equity, efficiency and experience. They help to create tangible value for service users, teams and the system by sustainably improving practices and pathways, whilst meeting real needs in constantly changing environments.

Key elements

- Clearly explain the challenges faced by users and describe the experience, relationships, access and quality of care and services within the organization of care and services prior to the project.
- Describe the innovation project and demonstrate how it simplifies or humanizes care and services rather than adding complexity.
- Show how users, families, care teams and social services are involved in an ongoing relationship or interaction that is strengthened by the implementation of the innovation project.
- Describe the changes made to work organization, practices and team support.
- Link the initiative to a measurable health outcome, including results, experience, equity, access, quality and effectiveness.
- Provide key performance indicators (KPIs) with a baseline value, a purpose, a source and a monitoring plan based on a timeline and the person responsible.
- Explain how the initiative can be sustained, adapted, developed or used in other contexts.

What makes a strong project

- ✓ It puts users back at the centre of their healthcare and services.
- ✓ It improves relationships between users, families, and healthcare and social services teams.
- ✓ It uses innovation to simplify and humanize care rather than adding unnecessary complexity.
- ✓ It supports professional judgment and the team's commitment to users.
- ✓ It improves quality, access, continuity, outcomes, experience, equity and efficiency through reliable evidence.
- ✓ It measures concrete outcomes and uses these results to improve the initiative.
- ✓ It can be sustained, scaled up, adapted, used or developed to promote high-quality, person-centred care in other settings.

Criteria

1. Relevance of human-centred issue

- Describe the challenges faced by **service** users in their **real-life, meaningful** interactions **with care and support teams** (experience, relationships, continuity, perceived complexity).
- Demonstrate a detailed understanding of the needs of service users, their relatives and the teams.
- Support the analysis with data or field observations.
- Illustrate the current impacts on the quality of the relationship or care pathways.
- Demonstrate the link between the problem and value creation in healthcare.

2. Human-centred innovation and transformation of user experience

- Demonstrate an innovation that **strengthens the relationship between the user and the team.**
- Tangibly improve **the experience of care and services.**
- Demonstrate the simplification of interactions and pathways.
- Demonstrate the personalization of interventions.
- Show how innovation frees up time for meaningful interactions.

3. Continuity of care and services, consistency and simplification of pathways

- Improve **relational and organizational continuity.**
- Reduce complexity, disruptions and inconsistencies in patient journeys.
- Illustrate the fluidity and clarity of pathways.
- Demonstrate better coordination between stakeholders.
- Show a reduction in unnecessary steps or avoidable transitions.

4. Professional judgment, team support and transformation of working practices

- Support **professional judgment and team autonomy.**
- Transform practices without increasing the workload or dehumanizing the work.
- Demonstrate the freeing up of clinical and relational time.
- Demonstrate improved cross-professional collaboration.
- Show the impact on staff experience and working conditions.

5. Quality, access, outcomes and value-based healthcare (VBHC)

- Demonstrate impacts on the following:
 - The user experience
 - Health outcomes or well-being
 - Appropriate access to care and services
 - Quality and continuity
- Illustrate efficiency gains or better usage of resources.
- Demonstrate effects on the smooth flow of care pathways.
- Linking outcomes, experience and resources.

6. Equity, accessibility, dignity and responsible use of resources

- Respect the principles **of equity, dignity and accessibility.**
- Demonstrate responsible and appropriate usage of resources.
- Demonstrate adaptation to vulnerable populations.
- Demonstrate consideration of diverse needs.
- Present practices that promote inclusion and social justice.

7. Measuring impact, experience and effectiveness

- Present indicators to measure concrete impact.
- Document the experiences of users and teams.
- Include the following elements:
 - PREMs (user and team experience)
 - Interpersonal skills, trust, understanding
 - Results and efficiency
- Demonstrating long-term monitoring and continuous improvement.

8. Sustainability, influence and development

- Demonstrate the project's capacity to **be sustained over time**.
- Identify its potential for development and influence.
- Demonstrate replicability in other contexts.
- Demonstrate the contribution to the transformation of practices.
- Outline mechanisms for sharing and transfer.

EVALUATION CRITERIA – EMERGING PROJECT

3. Innovation Award – Putting People and Quality First

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

EMERGING PROJECT	
CRITERIA	
1- Relevance of the Human-Centered Problem	The project demonstrates a credible and well-documented understanding of a real human need experienced by users, families, or care teams. The issue is clearly defined, and its impacts on experience, relationships, care pathways, or quality of care are identified.
2- Human-Centered Innovation and Transformation of the User Experience	The proposed innovation demonstrates concrete potential to humanize, simplify, or personalize care and services. The project presents a relevant innovative approach capable of improving the experience of both users and teams.
3- Continuity of Care and Services, Coherence, and Simplification of Pathways	The project demonstrates potential to improve the fluidity, coordination, or continuity of care and service pathways. It proposes mechanisms aimed at reducing certain disruptions, complexities, or inconsistencies experienced by users.
4- Professional Judgment, Team Support, and Transformation of Work Practices	The project promotes initial team engagement and supports professional judgment. It demonstrates the ability to improve practices or work interactions without unnecessarily increasing complexity or workload.
5- Quality, Access, Outcomes, and Value in Health Care	The project demonstrates promising early effects — or credible demonstrated potential — on quality, user experience, access, continuity, or efficiency of care and services.
6- Equity, Accessibility, Dignity, and Responsible Use of Resources	The project integrates principles of equity, accessibility, dignity, and inclusion from the design stage onward. It demonstrates sensitivity to the needs of vulnerable populations as well as a relevant and responsible use of resources.
7- Measurement of Impact, Experience, and Effectiveness	The project presents structured indicators and a credible evaluation approach to monitor outcomes, the experience of users and teams, and effects on efficiency or quality over time.
8- Sustainability, Influence, and Dissemination	The project demonstrates realistic potential for sustainability, growth, or adaptation to other contexts. It presents credible opportunities for dissemination, influence, or transfer of knowledge and learning.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

3. Innovation Award – Putting People and Quality First

PLEASE REFER TO THE
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INFORMATION
ON THE
KPIs

TRANSFORMATIVE PROJECT	
CRITERIA	
1- Relevance of the Human-Centered Problem	The project addresses a significant issue that is clearly demonstrated and experienced on a large scale. It demonstrates a deep understanding of the human, organizational, and relational impacts on users, families, and teams.
2- Human-Centered Innovation and Transformation of the User Experience	The project demonstrates a concrete and measurable transformation of the user experience and care or service practices. The innovation sustainably improves the quality of interactions, personalization, and the human dimension of care pathways.
3- Continuity of Care and Services, Coherence, and Simplification of Pathways	The project generates observable impacts on the fluidity, integration, and continuity of complex care pathways. It demonstrably reduces disruptions, delays, duplication, or inconsistencies between stakeholders and services.
4- Professional Judgment, Team Support, and Transformation of Work Practices	The project demonstrates a significant transformation of organizational and professional practices. It sustainably supports clinical judgment, improves interdisciplinary collaboration, and contributes to more effective and human-centered working conditions.
5- Quality, Access, Outcomes, and Value in Health Care	The project demonstrates major measurable outcomes related to quality, access, experience, continuity, health outcomes, or efficiency. It clearly establishes the value created for users, teams, and the health system.
6- Equity, Accessibility, Dignity, and Responsible Use of Resources	The project demonstrates concrete effects on equity, accessibility, and dignity in care and services, particularly for vulnerable populations. It illustrates responsible resource management and contributes to a more relevant and sustainable use of the health system's resources.
7- Measurement of Impact, Experience, and Effectiveness	The project is supported by robust measurement and monitoring mechanisms demonstrating evidence-based results related to experience, clinical outcomes, relational quality, efficiency, and continuous improvement.
8- Sustainability, Influence, and Dissemination	The project demonstrates sustainability, transferability, and the ability to create lasting influence on practices, organizations, or policies. It presents structured mechanisms for dissemination, knowledge sharing, and large-scale deployment.



CATEGORY – 2026 COMPETITION
**SYSTEM INTELLIGENCE AND
OPERATIONAL EXCELLENCE**

4. Innovation Award – Artificial Intelligence

This award recognizes initiatives that use artificial intelligence as a strategic lever to improve decision-making, support action, anticipate certain needs or risks, enhance patient journeys, and optimize the performance of the health and social services system. It highlights practical and concrete applications of AI that create measurable value or demonstrate credible potential for value.

It promotes solutions that integrate AI into real-world contexts of care, services, management, or organization, taking into account reliability, explainability, ethical usage of data, security, privacy, equity, and human oversight. AI is viewed as a tool to better understand, predict, decide, prioritize, or act, rather than as a technological end in itself.

Selected projects must demonstrate, depending on their stage of maturity, a relevant contribution to decision-making, patient pathways, the patient experience, professional practice, data governance, value measurement, and sustainability. Emerging projects will be evaluated based on their potential, credibility, and preliminary results, while transformative projects will be evaluated based on their demonstrated impact, actual adoption, and ability to drive sustainable transformation.

Key elements

A strong application must clearly outline the AI value journey. It must explain the targeted problem, the AI's function, the intended users, the decisions or actions influenced, the implementation approach, governance, risks, human oversight, and the value created or expected.

- ✓ Clearly describe the targeted clinical, organizational, operational, administrative, or systemic problem, the users involved, the project's stage of maturity, and the rationale for deployment into healthcare or social services.
- ✓ Explain the function of the AI and specify the usage of predictive AI, generative AI, decision support, automation, personalization, or a combination of these functions.
- ✓ Demonstrate, where relevant, how AI helps predict, anticipate, detect earlier, stratify risks, prioritize, guide, or support interventions in care or service pathways.
- ✓ Describe how AI is or will be integrated into actual workflows, service pathways, professional responsibilities, human oversight, and governance.
- ✓ Provide available pre-conformance evidence, model performance metrics, the approach to explainability, known limitations, and monitoring provisions.
- ✓ Document data sources, data quality, privacy, security, consent, access controls, and responsible data sharing.
- ✓ Identify issues related to ethics, equity, bias, performance by subgroups, accessibility, language, and potential unintended consequences.
- ✓ Demonstrate the expected, preliminary, or demonstrated value for patients, families, professionals, teams, the organization, or the system using relevant indicators.

- ✓ Present key performance indicators along with available baseline values, targets, current or expected results, data sources, time periods, responsible parties, and, where relevant, stratification by equity.
- ✓ Explain adoption, education, human oversight, escalation mechanisms, waiver options, accountability, and safe usage limitations.
- ✓ Describe how the initiative will be maintained, updated, monitored, improved, and deployed responsibly over time.

Criteria

1. Contribution to Decision-Making and Real-World Value for Healthcare

- Demonstrate how the initiative improves or could improve the quality, relevance, safety, or effectiveness of clinical, organizational, operational, or population-level decisions.
- Demonstrate the clarity of the decision-making problem, the users involved, and the actions influenced by the results, recommendations, alerts, or content produced by the AI.
- Show how AI creates added value for care, services, business operations, access, experience, or system performance.
- Explain how the initiative contributes to relevant decisions in real-world contexts, rather than serving as an isolated technical demonstration.

2. Predictive Capability, Anticipation, Action Support, and Pathway Improvement

- Demonstrate how the initiative contributes or could contribute to predicting trajectories, early risk detection, anticipating needs, or prioritizing clinical, organizational, or operational situations.
- Demonstrate how the results produced by AI support better monitoring, decisions, actions, guidance, or alerts in care or service pathways.
- Show how AI contributes to more seamless, coordinated, continuous, personalized, or proactive care pathways, without limiting the criteria to predictive models alone.
- Specify, where relevant, target events, time horizons, alert thresholds, planned actions, and expected or observed effects on access, continuity, prevention, or coordination.

3. Real-World Implementation and Complexity Management

- Describe how the AI initiative is or will be integrated into actual healthcare or service practices, workflows, and environments.
- Demonstrate how the project addresses clinical, organizational, technological, human, and operational complexity.
- Specify professional responsibilities, human oversight, escalation mechanisms, and implementation constraints.
- Explain how the implementation promotes adoption without increasing fragmentation, workload, or dangerous workarounds.

4. Transparency, Explainability, Reliability, and Robustness of Models

- Demonstrate the transparency and explainability of the AI model or AI-based function, based on the intended users and the level of risk.
- Demonstrate the observed or expected reliability, robustness, and stability of the model's performance in the relevant backgrounds and populations.
- Document the quality of pre-conformance, monitoring, version control, and performance drift management.
- Specify the limitations, uncertainties, and conditions for appropriate usage for users and decision-makers.

5. Data Governance, Security, Ethics, and Equity

- Describe the quality, provenance, governance, and validation of the data used to train, configure, operate, or evaluate the AI.
- Document privacy and security, consent, access controls, and data protection practices.
- Explain ethical governance, accountability, bias and equity assessment, and responsible oversight of AI.
- Demonstrate how the project protects users and populations while enabling safe learning and improvement.

6. Impact on People, Experience, and Professional Work

- Demonstrate how AI improves or could improve the experience of patients, families, caregivers, professionals, teams, or the organization.
- Describe the initiative's effect on professional work, workload, judgment, trust, autonomy, and accountability.
- Explain how automation or generative AI reduces low-value-added tasks without creating new burdens or risks.
- Specify user involvement in design, implementation, evaluation, and improvement, as well as mechanisms for human oversight.

7. Measuring and Demonstrating the Impact of Value-Based Healthcare (VBHC)

- Present a multidimensional assessment of observed or expected impacts using a value-based healthcare approach.
- Describe indicators related to outcomes, patient experience, safety, access, effectiveness, equity, and resource usage.
- Document baselines, purposes, data sources, time periods, and the interpretation of available results.
- Explain the attribution or contribution logic and how the results are used for the usage of the AI initiative and its implementation.



8. Sustainable Integration, Scaling Up, and Reproducibility

- Describe the capacity or potential for sustaining the AI initiative after its initial deployment.
- Demonstrate the feasibility of assumptions or plans for scaling up, replication, and broader implementation.
- Identify the operational, human, financial, technical, governance, and vendor conditions necessary for sustainability.
- Demonstrate how learning, monitoring, and improvement mechanisms support responsible long-term usage.

EVALUATION CRITERIA – EMERGING PROJECT

4. Innovation Award – Artificial Intelligence

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

EMERGING PROJECT	
CRITERIA	
1- Contribution to decision-making and real value for healthcare	The emerging project demonstrates exceptional decision-making value for its stage of maturity, with a clear link between AI outcomes and the potential for better decisions, safer care, improved services, or better system performance.
2- Predictive capability, anticipation, action support, and pathway improvement	The emerging project demonstrates exceptional potential for predictive or anticipatory contributions, integrated with a framework for supporting action and improving care pathways, with proposed actions and expected or preliminary effects on access, continuity, prevention, coordination, prioritization, or care pathway management.
3- Real-world implementation and complexity management	The emerging project is credibly anchored in actual care or service business operations, with proportionate management of complexity, human oversight, support for adoption, and safeguards against fragmentation or unsafe usage.
4- Transparency, explainability, reliability, and robustness of models	The AI model or function demonstrates exceptional explainability and robustness for its stage of maturity, with solid pre-conformance validation, clear limitations, planned monitoring of drift, and transparency appropriate for users.
5- Data governance, security, ethics, and equity	The project demonstrates exemplary governance in responsible AI, with documented data quality, rigorous privacy and security controls, management of fairness and bias, clear accountability, and sustainable oversight
6- Impact on people, experience, and professional work	The emerging project demonstrates exceptional human value for its stage of maturity, with credible potential to enhance the user experience and professional work, while preserving users' judgment, autonomy, trust, responsibility, and engagement.
7- Measuring and demonstrating the impact of value-based healthcare (VBHC)	The emerging project demonstrates exceptional VBHC impact measurement for its stage of maturity, with robust indicators, a credible attribution logic, an analysis that accounts for equity, and planned usage of results to improve the initiative.
8- Sustainable integration, scaling up, and reproducibility	The emerging project demonstrates an exceptional pathway toward sustainable and responsible scaling up, with clear governance, resources, monitoring, update mechanisms, and criteria for potential replication in other contexts.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

4. Innovation Award – Artificial Intelligence



TRANSFORMATIVE PROJECT	
CRITERIA	
1- Contribution to decision-making and real value for healthcare	The AI initiative delivers exceptional, well-supported decision-making value, with a clear link between AI outcomes and better decisions, safer care, improved services, or better system performance.
2- Predictive capability, anticipation, action support, and pathway improvement	The initiative demonstrates exceptional predictive or anticipatory value, integrated with a focus on supporting action and improving care pathways, featuring relevant outcomes, clearly defined actions, and measurable improvements in access, continuity, prevention, coordination, prioritization, or care pathway management.
3- Real-world implementation and complexity management	The AI initiative is firmly embedded in actual healthcare or social services operations, with rigorous management of complexity, human oversight, adoption support, and safeguards against fragmentation or unsafe usage.
4- Transparency, explainability, reliability, and robustness of models	The AI model or function demonstrates exceptional explainability and robustness, with solid pre-conformance, clear limitations, monitoring of drift, user-appropriate transparency, and reliable performance under real-world conditions.
5- Data governance, security, ethics, and equity	The project demonstrates exemplary governance in responsible AI, with validated data quality, rigorous privacy and security controls, management of fairness and bias, clear accountability, and sustainable oversight.
6- Impact on people, experience, and professional work	The AI initiative demonstrates exceptional human value, enhancing the experience and professional work while preserving the judgment, autonomy, trust, responsibility, and meaningful involvement of the users concerned.
7- Measuring and demonstrating the impact of value-based healthcare (VBHC)	The initiative demonstrates exceptional VBHC impact measurement, with robust indicators, credible attribution, equity-conscious analysis, and clear usage of information to improve outcomes, experience, safety, access, and efficiency.
8- Sustainable integration, scaling up, and reproducibility	The AI initiative presents an exceptional pathway toward sustainable and responsible scaling, with sustainable governance, resources, monitoring, and update controls, as well as clear criteria for replication in other contexts.

5. Innovation Award – Digital transformation

This award recognizes initiatives that use digital technology as a strategic lever for transformation, rather than as an end in itself, in order to deliver tangible improvements in healthcare value, particularly in terms of quality, accessibility, patient experience and efficiency. It highlights projects that transform the delivery of care, coordination and system performance through relevant integration rooted in real-world practice.

It promotes solutions that improve access, equity and the user experience whilst strengthening coordination, continuity and integration of care pathways. The initiatives stand out for their ability to optimize processes, reduce inefficiencies (such as duplication or administrative burden) and support the work of teams, by drawing on concrete uses of digital technology, particularly for decision-making, navigating complex pathways and organizing workflows.

The selected projects demonstrate genuine adoption, interoperability and a measurable impact on care pathways and organizational performance. They contribute to more efficient usage of resources, governance and data quality, as well as the sustainable transformation of the system. Digital technology is seen as a strategic catalyst for improving practices and outcomes whilst facilitating scaling up and integration with legacy systems.

Key elements

A strong application must demonstrate how digital technology acts as a lever for strategic transformation in real-world healthcare or social care contexts. It must link the digital function to the transformation and coordination of care pathways, interoperability, adoption, governance, measurable value and contribution to the system. It must highlight the transformation pathway, the adoption model, governance, interoperability and measurable value.

- ✓ Clearly describe the problem identified in the healthcare or social services sector, the alignment of priorities, the users concerned, the transformation purpose and the logic of systemic integration.
- ✓ Explain the digital lever and why it is the appropriate mechanism for the envisaged transformation.
- ✓ Describe functional interoperability, reliable data, security, privacy and governance.
- ✓ Demonstrate measurable improvement and how the initiative changes and improves practices, organizations, patient journeys, coordination or care pathways.
- ✓ Document interoperability, integration, data quality, security, privacy and governance.
- ✓ Demonstrate actual adoption by teams, alignment with workflows, education, support and the impact on working conditions.
- ✓ Describe the operational model, sustainability plan, risk management, resources and accountability.

- ✓ Provide evidence of quality, access, experience, effectiveness, and value for the team, the organization and the system.
- ✓ Describe key performance indicators, including benchmarks, targets, current results, data sources, distribution according to equity criteria, and the authorities and officers responsible.
- ✓ Outline the system's transferability, deployment conditions, scaling strategy and contribution.

Criteria

1. Digital transformation and added value for healthcare and social services

- Present the usage of digital technology as a strategic lever for transformation, rather than an end in itself.
- Clearly demonstrate the transformation in care, services, organizations or the patient journey.
- Show how the project enhances the value of healthcare and social services, particularly in terms of quality of care and services, accessibility and the experience of patients and service users, as well as the effectiveness and capacity of teams.

2. Relevance of the issue, systemic integration and health system priorities

- Explain how the project addresses a problem that is clinically, organizationally, access-related, equity-related, operationally or systemically relevant.
- Demonstrate the analysis that supports an understanding of the problem and its alignment with the network's or system's priorities.
- Demonstrate whether the initiative is integrated into real-world healthcare and social care settings.
- Indicate how the solution takes into account systemic dependencies, complexity and the implementation background.

3. Coordination of care and service pathways, access, equity and user experience

- Explain how the coordination, fluidity and integration of care pathways are enhanced (diagrams).
- Justify how navigation through complex care or service pathways is facilitated (reduced transfers, improved follow-up, better visibility of pathways or clearer navigation).
- Demonstrate how the project contributes to access, equity, continuity and user experience, including telehealth where applicable.
- Demonstrate significant benefits for patients, families, carers, communities, professionals and organizations (measurement reports, user satisfaction, accessibility, language or equity indicators).

4. Interoperability, integration, data quality, security and governance

- Identify how the project promotes system interoperability and integration across workflows, systems, teams or organizations.
- Demonstrate how the quality, privacy and security, and governance of data used or produced by the digital solution are controlled.
- Demonstrate how the project ensures that data-driven clinical or organizational decision-making is reliable and actionable.
- Identify the requirements for robust technical, operational and governance arrangements to ensure safe digital usage.

5. Team adoption, impact on workflows and working conditions

- Demonstrate the adoption of the digital initiative by teams in real-world backgrounds.
- Show the impacts and how the project causes modifications to workflows, capabilities, productivity, workload, collaboration and the teams' experience.
- Identify how the project reduces inefficiencies such as duplication of effort, unnecessary administrative tasks, rework or low-value-added steps, and enhances teams' decision-making capacity as well as working conditions.

6. Feasibility, operational model, governance and sustainability

- Outline a feasible implementation plan, including appropriate resources, risks, milestones and dependencies.
- Demonstrate the maturity of the operational model, governance, ownership and accountability.
- Identify the planned means to support sustainable adoption through education, support, maintenance, funding (assumptions regarding budget, staffing, vendors, procurement, funding or lifecycle management) and continuous improvement.
- Outline how technical, clinical, organizational, human and operational risks, as well as confidentiality, are managed.

7. Value measurement and rigorous evaluation

- Demonstrate how the value created by digital transformation is measured across the dimensions of quality, access, experience, efficiency, team and system (table of key performance indicators or KPIs, benchmarks, targets, current results, timeframes, data sources, responsible parties).
- Demonstrate the robustness of the benchmarks, purposes, current results, timeframes, data sources and accountability.
- Outline your in-process evaluation mechanisms and the links to learning, adaptation and improvement.
- Use indicators to show evidence that results guide decisions regarding optimization, governance, sustainability and scaling up.



8. Transferability, deployment strategy, scaling up and contribution to the system

- Identify your transferability and deployment strategy, and the conditions required for dissemination, adaptation, integration and sustainable usage in other contexts.
- Demonstrate the potential or capacity for responsible scaling up and highlight how the project stands out in terms of its innovative potential and its ability to shape the digital health transformation of Quebec's health care system.
- Indicate whether it represents a significant step forward for Quebec and a transferable and scalable model for other institutions or regions in Quebec.
- Identify whether the project contributes to the overall improvement of the system's performance, to network learning or to digital transformation capacity.

EVALUATION CRITERIA – EMERGING PROJECT

5. Innovation Award – Digital Transformation

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

EMERGING PROJECT	
CRITÈRES D'ÉVALUATION	
1- Digital transformation and added value for healthcare and social services	The emerging project demonstrates exceptional potential for digital transformation, with a clear value proposition and a credible initial trajectory that goes beyond the technology itself.
2- Relevance of the issue, systemic integration and health system priorities	The emerging project demonstrates exceptional relevance and systemic fit, with a solid understanding of the problem and credible integration potential.
3- Coordination of care and service pathways, access, equity and user experience	The emerging project demonstrates exceptional potential to improve the coordination of care pathways and services, access, equity and user experience through digital transformation.
4- Interoperability, integration, data quality, security and governance	The emerging project demonstrates an exceptional ability to drive an interoperable, secure, regulated and data-driven digital transformation.
5- Team adoption, impact on workflows and working conditions	The emerging project demonstrates exceptional potential for adoption and added value for team workflows, with early indicators and credible support mechanisms.
6- Feasibility, operational model, governance and sustainability	The emerging project demonstrates exceptional feasibility and readiness for governance, with robust resources, effective risk management and a sustainable adoption strategy.
7- Value measurement and rigorous evaluation	The emerging project demonstrates exceptional readiness in terms of measurement, with reliable early-stage indicators and a robust approach to digital value assessment.
8- Transferability, deployment strategy, scalling and system contribution	The emerging project demonstrates exceptional potential for deployment and scalability, with clearly transferable components and practical conditions for responsible dissemination.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

5. Innovation Award – Digital Transformation

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

TRANSFORMATIVE PROJECT	
CRITERIA	
1- Digital transformation and added value for healthcare and social services	The project demonstrates exceptional digital transformation and proven value in the fields of health and social services, with a lasting impact beyond mere technological deployment.
2- Relevance of the issue, systemic integration and health system priorities	The project demonstrates exceptional systemic relevance, with proven integration into the network's priorities and complex real-world backgrounds.
3- Coordination of care and service pathways, access, equity and user experience	The project demonstrates exceptional measurable improvement in terms of coordination, access, equity, the smooth flow of care pathways or services, and user experience.
4- Interoperability, integration, data quality, security and governance	The project demonstrates exceptional functional interoperability and large-scale integration, with mature data quality, security and governance.
5- Team adoption, impact on workflows and working conditions	The transformative project has demonstrated exceptional adoption by teams, with proven improvements in workflow, capacity for action, workload and working conditions.
6- Feasibility, operational model, governance and sustainability	The project demonstrates exceptional operational maturity, governance, sustainability and sustained adoption in real-world contexts.
7- Value measurement and rigorous evaluation	The project demonstrates exceptional measured value and robust evaluation, with clear evidence of quality, access, experience, effectiveness, team and system impact.
8- Transferability, deployment strategy, scalling and system contribution	The project demonstrates exceptional scalability and contribution to the system, with a proven broadcast strategy, sustainable deployment and measurable value for the network or system.

6. Innovation Award – Logistics and Supply Chain

The Innovation Award – Logistics and Supply Chain aims to recognize exemplary initiatives that harness innovation and the transformation of logistics and supply chain processes to benefit healthcare, generating tangible and sustainable value for users, professionals, teams, and healthcare services.

Against a background of increasing complexity in healthcare systems, vulnerable supply chains and interdependence between care settings, this award recognizes initiatives that strengthen the system's resilience and adaptability.

This award highlights that excellence in logistics and procurement is not limited to compliance or traditional operational indicators. It is based on innovation that:

- transforms practices and processes to create measurable value in healthcare;
- enhances the user experience and outcomes;
- improves safety, access and the quality of care for patients;
- optimize organizational efficiency and agility;
- promotes the responsible and sustainable usage of human, technological and financial resources;
- stimulates international, cross-sector, cross-professional and inter-organizational collaboration, as well as co-creation with stakeholders;
- supports the resilience of critical supply chains and the continuity of services.

The projects submitted are strategic levers for improving clinical findings, the user experience and outcomes, as well as the efficiency of healthcare and services while strengthening the resilience of responsible supply chains. They must demonstrate a measurable impact on business operations and outcomes. This means the ability to ensure the right product is in the right place at the right time, with a focus on the safety of care and access to services. The expected sharing and inspiration must reflect the transferability of learning and the ability to replicate benefits, as well as to influence both locally and internationally.

Key elements

- ✓ Describe the logistics, procurement or supply chain challenge and explain why the project is important to the value of healthcare.
- ✓ Demonstrate how the transformed practices and processes promote reliability of the 'right product, in the right place, at the right time'.
- ✓ Explain how resource availability, critical supply chains, service continuity, safety, access and quality are improved, and share the measurable impacts on patient safety, access to care, quality, continuity, user experience and service resilience.
- ✓ Document the active involvement of the team or teams, logistics/procurement expertise, co-development, organizational learning and a culture of continuous improvement.
- ✓ Describe the cross-functional and cross-organizational partnerships between clinical teams, procurement departments, logistics, IT, vendors, distributors and other stakeholders, and detail the governance and information-sharing mechanisms.
- ✓ Provide evidence on financial aspects, efficiency, productivity, resource usage, the business model and value/resources.
- ✓ Illustrate how issues of vulnerability, equity, social acceptability, sustainable development, environmental impact and responsible procurement are addressed.
- ✓ Indicate the key performance indicators used, baselines, targets, current results, timeframes, populations or backgrounds, data sources, stratification by equity, and those responsible.
- ✓ Outline transferability, conditions for success, limitations, investments, prerequisites, governance, education, indicators and knowledge transfer mechanisms.

Criteria

1. Value creation and process improvement

- Demonstrate an innovative solution that transforms the performance of the health supply chain.
- Describe the generation of measurable value for stakeholders in the health and social services ecosystem (reduced lead times, increased reliability, safety, continuity of care, etc.).
 - Be evidence-based and adapted to the local or regional background.
 - Integration of key quality dimensions: safety, accessibility, continuity, humanization, equity and efficiency.
 - Incorporate the dimensions of value assessment: clinical, population-based, organizational, socio-cultural and economic.
 - Report on monitoring and measuring impact across service pathways and organizational processes.
 - Demonstrate the contribution to the effective availability of the resources necessary for the delivery of care.

2. Human capital and a culture of improvement

- Illustrate how the skills and expertise of logistics and procurement teams are valued.
- Demonstrate how autonomy and shared leadership are encouraged to stimulate innovation/transformation in line with local specificities.
- Explain how approaches to organizational learning, co-development, continuous improvement and the sharing of best practices are implemented, both internally and with other organizations. Describe the active participation of teams in the design, implementation and monitoring of the project.
- Explain how the learning system approach and the broadcasting of innovations are promoted.

3. Financial performance and efficiency

- Demonstrate responsible and sustainable strategic management of human, material, technological and financial resources.
- Demonstrate how costs and productivity are optimized while maximizing outcomes for users and the health ecosystem.
- Illustrate the creation of a viable and replicable business model capable of generating sustainable value for other organizations or regions.
- Clearly identify the efficiency or productivity gains resulting from the initiative.

4. Collaboration and sustainable partnerships

- Describe strong cross-functional and cross-organizational partnerships (clinical teams, procurement, logistics, IT, vendors, distributors, etc.).
- Highlight mechanisms for coordination, information sharing and supply chain optimization that contribute to the resilience of critical supply chains across the health system.
- Demonstrate how all stakeholders are engaged into the co-creation of logistics and supply solutions, as well as how an organizational culture based on trust, openness, transparency and shared learning is fostered.

5. Actual impact and potential for transfer and expansion

- Report on tangible results for stakeholders and the organizations involved, as well as how these were achieved.
- Describe the potential for scaling up in other organizations or regions.
- Specify the conditions for success, limitations, necessary investments and prerequisites for transferring or replicating the project in a different background.
- Propose and perform integration of sustainability levers: tools, governance, education, performance indicators and knowledge transfer.
- Demonstrate approaches to inspire other sectors to use innovation in procurement/logistics as a lever for organisational transformation.
- Demonstrate improvements in actual access to care and continuity of services.
- Share the contribution to the development of a learning system based on data and the standardization of best-of-breed practices.

EVALUATION CRITERIA – EMERGING PROJECT

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6. Innovation Award – Logistics and Supply Chain

EMERGING PROJECT	
CRITERIA	
1- Value Creation and Process Improvement	The project proposes a new or uncommon approach. It experiments with levers of transformation such as automation, shared responsibility, or transparency in the supply chain. It ensures measurable value creation for users and the healthcare system.
2- Human Capital and Culture of Improvement	The project fosters team engagement and recognition of professional expertise. It begins to inspire other teams or departments, both internally and in other organizations. It promotes the sharing of lessons learned and best practices among various employees.
3- Financial performance and efficiency	The project is showing initial tangible results: reduced wait times, improved quality and safety, optimized resources, a better user experience, team well-being, access to care, and smoother patient pathways. It promotes the continuity and availability of critical resources.
4- Collaboration and sustainable partnerships	The project addresses a concrete challenge related to healthcare service and care pathways: smoothness, safety, accessibility, and efficiency. It aligns with local, cross-functional, and ministerial priorities. It adapts its actions to the realities of its environment. It takes into account issues of vulnerability, equity, social acceptability, and sustainable development within the supply chain
5- Real Impact and potential for transfer and expansion	The project demonstrates a medium-term vision, with concrete opportunities for growth and adaptation. It includes mechanisms for learning lessons, adjusting practices, and sharing results with other teams, as well as for inter-organizational knowledge sharing. It specifies the conditions for transferability or replication through data and documentation. It incorporates sustainability levers such as participatory governance tools or training to support continuity.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

6. Innovation Award – Logistics and Supply Chain

PLEASE REFER TO THE
APPENDIX SECTION
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TRANSFORMATIVE PROJECT	
CRITERIA	
1. Value Creation and Process Improvement	The project implements a systemic transformation of logistics and procurement practices, creating measurable added value for services and users. It demonstrates a new and innovative approach by going beyond and transforming current practices, with a positive impact on access to and continuity of care and services. It relies on drivers of organizational change: integration of digital tools, co-management, and distributed governance.
2. Human Capital and Culture of Improvement	The project is recognized as a best practice or inspiring model in professional forums, publications, conferences, etc. It generates a ripple effect within the organization or externally (region, network) and is disseminated as a model. It enhances the legitimacy of logistics and procurement professionals as agents of transformation and drivers of value.
3. Financial performance and efficiency	The project delivers compelling and sustainable results regarding safety, user experience, and team well-being. It enhances overall efficiency through improved performance and better utilization of human, social, and economic resources.
4. Collaboration and sustainable partnerships	The project addresses a strategic or systemic challenge within the healthcare network. It targets key areas: streamlining care pathways, reducing overload, humanizing care, and improving access to care and services. It demonstrates an inclusive, equitable, and sustainable approach. It fully integrates sustainable development considerations and the potential environmental impacts of procurement and logistics practices.
5. Real Impact and potential for transfer and expansion	The project presents a clear strategy for scaling up, standardization, transfer, or replication in other settings. It is equipped to be sustainable, transferable, and/or adaptable to different contexts (resources, governance, indicators, and training).

7. Innovation Award – High Value-Added Health Technology

This award recognizes concrete technologies and infrastructure that have a proven track record of creating value in healthcare by improving care pathways, patient autonomy, and the sustainability of the system. It highlights solutions integrated into real-world settings and evaluated not for their novelty, but for their ability to generate a tangible, measurable, and sustainable impact in complex healthcare contexts.

It promotes technologies that improve health outcomes, quality of life, and the user experience, while strengthening users' autonomy and self-determination. The initiatives stand out for their concrete support of healthcare providers, interdisciplinary coordination, and delivery of care, helping to reduce gaps, inefficiencies, and organizational complexities within care pathways.

Selected projects demonstrate their contribution to the performance, efficiency, and sustainability of the healthcare system. They include medical devices, biomedical technologies, clinical equipment, home monitoring or care technologies, as well as tools to support caregivers and aid clinical or organizational decision-making.

Note: Innovations that are primarily digital or based on artificial intelligence are excluded, as they are covered by other categories; this is to maintain a focus on technologies that have a direct impact on care pathways and settings.

Key elements

The project must demonstrate how the technology creates measurable value in real-world healthcare settings. It must establish a link between the technical function and user autonomy, the work of healthcare providers, care pathways, and the safety and sustainability of the system.

- ✓ describe the technology, the specific health problem it addresses, and the user population it serves;
- ✓ explain why it is clinically, functionally, organizationally, or economically relevant;
- ✓ demonstrate real-world deployment (pilot sites, usage contexts, or sustainable integration);
- ✓ provide evidence of utility for users, family members, caregivers, professionals, and organizations;
- ✓ describe the effects on autonomy, quality of life, life trajectories, and care pathways;
- ✓ demonstrate how professionals' work, coordination, decision-making, or workload is affected;
- ✓ provide evidence regarding safety, ethics, regulation, privacy, security, and responsible usage, where applicable;
- ✓ Identify key performance indicators (KPIs) with baseline values, targets, data sources, equity-based distribution, and responsible parties;
- ✓ Explain transferability, known constraints, sustainability, and conditions for scaling up.



Criteria

1. Value Creation in Healthcare

- Explain how the technology creates value through clinical findings, functional outcomes, experiential outcomes, organizational outcomes, or usage of resources.
- Demonstrate the link between the value created and health and life trajectories, beyond mere novelty.
- Explain the relevance of expected or demonstrated outcomes for users, family members, professionals, and organizations.
- Demonstrate the measurable, sustainable, and meaningful nature of the value delivered in complex healthcare settings, as well as data on resource usage such as length of stay, avoided visits, time saved, or cost savings.
- Demonstrate, as appropriate, functional outcomes such as independence, mobility, abilities, autonomy, or compensation.

2. Managing Complexity and Real-World Deployment

- Explain how the technology functions in real-world clinical, organizational, social, and multi-stakeholder backgrounds.
- Demonstrate an understanding of implementation constraints, workflow variability, and usage backgrounds.
- Explain the pre-conformance validation process conducted to assess the device's ability to function in various settings, such as the home, hospital, community, or specialized settings.
- Present data regarding risks, usage, support, education, maintenance, or operational readiness.
- Demonstrate robustness in the face of case variability, different backgrounds, users, teams, or patient profiles, complex trajectories, and non-linear pathways.

3. Contribution to health and life trajectories

- Show how the technology improves continuity, transitions, follow-up, or care pathways (pathway diagrams, descriptions of workflows, or pre- and post-care trajectories).
- Identify how disruptions, unnecessary delays, avoidable steps, or gaps in care are prevented.
- Demonstrate how it performs implementation across the various stages of a care, health, or life journey.
- Provide examples of implementation in different care settings or living environments and feedback from users, families, caregivers, or professionals on the improvement of care pathways.

4. Contribution to professionals' day-to-day work

- Demonstrate how the technology supports the day-to-day work of professionals and its impacts (time savings, elimination of redundant tasks, decision-making, coordination, clarity of roles, etc.).
- Validate acceptance by teams and alignment with interdisciplinary practice.
- Present data on workload, efficiency, administrative burden, or operational friction.

5. Human dimension, global health, and self-determination

- Demonstrate how the technology promotes autonomy, choice, participation, agency, and quality of life (measures related to the experience of patients, users, families, or caregivers; data regarding accessibility, ease of usage, acceptability, and adaptability).
- Describe how users, family members, caregivers, or communities are involved in development, usage, feedback, or improvement.

6. Safety, Ethics, and Responsible Use

- Demonstrate clear consideration of safety, ethics, regulatory compliance, responsible usage, and risk management.
- Validate acceptability by users and professionals.
- Specify active monitoring and risk mitigation in the context of real-world usage.

7. Measuring and Demonstrating Real-World Impact

- Present the impact indicators defined and adapted for the usage of the technology in real-world conditions (key performance indicator table including the baseline, purpose, current result, time period, data source, and people responsible).
- Demonstrate the quality of data collection, the frequency of monitoring, and comparisons over time.
- Document results under real-world conditions.
- Validate the usage of data for decision-making regarding learning, improvement, adoption, and sustainability (data from pilot projects, initial results, before-and-after comparisons, or real-world follow-ups).

8. Transferability, Scalability, and Sustainability

- Demonstrate the technology's ability to be adapted, replicated, maintained, and deployed at a larger scale in a responsible manner.
- Explain the potential for transferability, the constraints and conditions for success, as well as the potential for sustainability.
- Validate the interest, adoption, or implementation by other sites, sectors, organizations, or regions.
- Ensure sustainability.

EVALUATION CRITERIA – EMERGING PROJECT

PLEASE REFER TO THE
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7. Innovation Award – High Value-Added Health Technology

EMERGING PROJECT	
CRITERIA	
1- Value creation in healthcare	The project defines a compelling value proposition, a target population, a differentiating contribution, and early indicators or a credible measurement plan.
2- Managing complexity and real-world deployment	The project demonstrates credible roll-out in the field, pilot-site usage, functional differentiation, and a clear understanding of implementation constraints.
3- Contribution to health and life trajectories	The project demonstrates a credible and expected improvement in the pathway, a reduction in disruptions, or better local coordination from the early stages of implementation.
4- Contribution to professionals' day-to-day work	The project identifies a genuine professional weakness, shows early signs of simplification or time savings, and enjoys initial acceptance by the team.
5- Human dimension, global health, and self-determination	The project demonstrates significant user involvement from the outset, an expected benefit in terms of autonomy, and credible evidence of initial experience.
6- Safety, ethics, and responsible use	The project has successfully completed risk analysis and mitigation measures, and has provided credible initial evidence regarding acceptability or compliance.
7- Measuring and demonstrating real-world impact	The project defines indicators from the outset, has data collection tools in place, and provides credible initial results or pilot data.
8- Transferability, scalability, and sustainability	The project identifies transferable backgrounds, known constraints, and credible potential for scaling up, generating early interest beyond the initial framework.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

7. Innovation Award – High Value-Added Health Technology

PLEASE REFER TO THE
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TRANSFORMATIVE PROJECT	
CRITERIA	
1- Value creation in healthcare	The project demonstrates measurable real-world value, including robust clinical, functional, experiential, organizational, and/or systemic impacts.
2- Managing complexity and real-world deployment	The project demonstrates sustainable roll-out, regular usage, deployment across multiple sites or units, and robustness in complex real-world conditions.
3- Contribution to health and life trajectories	The project demonstrates a significant reduction in care gaps, improved continuity of care, and measurable benefits at the care pathway level.
4- Contribution to professionals' day-to-day work	The project demonstrates a measurable reduction in workload, improved coordination, team satisfaction, or an improvement in collective performance.
5- Human dimension, global health, and self-determination	The project demonstrates a measurable improvement in autonomy, quality of life, satisfaction, empowerment, or lived experience.
6- Safety, ethics, and responsible use	The project demonstrates proven safety, regulatory compliance, incident monitoring, and active risk management under real-world usage conditions.
7- Measuring and demonstrating real-world impact	The project demonstrates concrete impact through measured results, continuous monitoring, and evidence-based data used to inform decisions regarding improvement and adoption.
8- Transferability, scalability, and sustainability	The project demonstrates deployment across multiple sites or regions, sustainable usage over time, and adoption or readiness on the part of other organizations.



CATEGORY – 2026 COMPETITION
INTEGRATED RESEARCH AND ACCELERATED IMPACT

8. Innovation Award – Translational Research

This award recognizes translational research projects—in the broadest sense—that effectively bridge the gap between knowledge generation and its practical application, by transforming scientific findings or field-based insights into tangible improvements in care, services, and the performance of the healthcare system. It highlights initiatives demonstrating a structured, seamless, and intentional transition from research to action, with the aim of creating measurable value in healthcare. It should be noted that this award covers—and refers to as “projects”—research initiatives centred on an idea or a product, as well as the creation of innovative organizations that support the effective transfer of research results to clinical applications.

The projects recognized demonstrate a clear path from discovery to implementation, bridging the gaps between research, practice, decision-making, and implementation. They stand out for their ability to accelerate access to relevant innovations—treatments, diagnostics, technologies, practices, or organizational models—while generating measurable impacts on outcomes, user experience, and system efficiency.

The selected initiatives demonstrate actual adoption or are in the process of being consolidated, as well as a lasting contribution to the transformation of the healthcare system. They may fall within clinical, organizational, technological, or social domains and are supported by rigorous mechanisms for measurement, transfer, and larger-scale deployment.

Translational research serves as a vital link between basic research and practical applications. It enables users to benefit more quickly from innovative solutions, while fostering the development of expertise, know-how, infrastructure, and innovation ecosystems that generate scientific, organizational, and socioeconomic benefits for society.

This award recognizes the achievements of groups that have successfully advanced a discovery, technology, practice, or organizational capacity from the research stage to clinical or operational applications. Also eligible are teams that have developed infrastructure, organizational adaptations, or deployment capabilities enabling the administration and integration of innovative solutions for the benefit of patients and the Quebec healthcare system.

Submitted projects must rigorously demonstrate how translational research improves—or is in the process of improving—care, population health, or the efficiency of the health care system. Proposed innovations must address real and significant needs, stand out for their distinctive nature, and contribute to resource optimization, positive socioeconomic impact, and the visibility of Quebec research at the local, national, and international levels.

Key elements

A strong translational research project demonstrates that this type of research can bridge the gap between knowledge and application, or between practice and research, in a way that improves care, services, practices, and system performance.

- ✓ Describe the real and priority need, the populations or systems involved, and explain why this issue is important today.
- ✓ Explain the scientific rationale, methodology, pathway to translation, and limitations.
- ✓ Show what is innovative or different compared to existing research, practices, services, or models.
- ✓ Describe how the project integrates with real-world practices, care pathways, decision-making, organizations, or systems.
- ✓ Address complexity at all levels: pathways, populations, teams, organizations, and implementation backgrounds.
- ✓ Provide evidence regarding ethics, equity, compliance, accountability, and responsible governance.
- ✓ Complete the key performance indicator (KPI) table by including baseline values, targets, current results, data sources, breakdowns by equity criteria, and responsible parties.
- ✓ Demonstrate the adoption and transformation of pathways, the impact on the system, and the usage of results for improvement, where applicable.
- ✓ Identify transferability, adaptability, deployment conditions, sustainability requirements, and the rationale for scaling up

Criteria

1. Priority need, scientific advancement and quality, innovative nature

- Explain the priority issue, needs assessment and data, target populations, and gaps in services or practices to be addressed.
- Demonstrate the contributions and respective roles of stakeholders, including patients, families, professionals, governance bodies, decision-makers, communities, and organizations, as well as consideration of the needs of users and other relevant professionals.
- Demonstrate high quality in the field of applied health research: scientific quality, methodological rigour, and the credibility of the research's foundations, as well as the soundness of the transfer logic—from knowledge to application or from practice to research.
- Demonstrate scientific advancement and improved effectiveness of the solution through translational research using a rigorous scientific approach.
- Describe the measurement methods and results demonstrating translation or the path toward it.

2. Relevance of the innovation and differentiation

- Justify this applied usage of research to address a significant health challenge.
- Illustrate the technology's uniqueness and competitive edge compared to similar approaches that exist or are under development globally. Provide a description of the innovation's " "—that is, what is new, improved, combined, or applied differently.
- Provide evidence of proof of concept, pilot project pre-conformance, adoption, or implementation, as well as evidence of a differentiated contribution in clinical, organizational, social, technological, or practical terms.
- Demonstrate the innovation's importance to health value and its implementation, as well as its impact on improving the delivery of higher-quality health care and services.
- Illustrate its contribution to equitable and accessible healthcare, particularly for vulnerable populations or in remote regions.

3. Socioeconomic impact and Quebec leadership in translational research

- Highlight significant clinical (or other) impacts addressing unmet health-related needs and, where applicable, the transformation of practices and care pathways, as well as system performance (medical and other).
- Demonstrate the optimization of healthcare system resource usage and current or projected cost savings.
- Highlight positive effects: business development, job creation, the development of expertise, and student education.
- Illustrate the contribution to advancing the development of treatments, products, or services resulting from Quebec research.
- Show how the impact of expertise in translational research applicable to health is highlighted.

4. Potential for expansion

- Present a detailed plan for scaling up, long-term sustainability, and continuity.
- Demonstrate potential for adoption and expansion across Quebec and beyond.
- Demonstrate the potential to shift care paradigms.
- Explain how ethical principles, equity, compliance, responsible conduct, and inclusion are addressed.

EVALUATION CRITERIA – EMERGING PROJECT

8. Innovation Award – Translational Research

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EMERGING PROJECT	
CRITERIA	
1- Innovative Nature	Demonstrates the innovative and promising nature of an approach, technology, treatment, model, or practice under development, supported by credible and structured scientific foundations. Presents the advancement of differentiating or original elements compared to existing or developing approaches, particularly through the usage of new methodologies, interdisciplinary collaborations, cutting-edge technologies, or other means. Illustrates a clear translational logic between knowledge generation and initial prospects for practical application.
2- Relevance	Addresses a real, priority, and documented need within the healthcare system, a specific patient population, or a specific care pathway. Demonstrates the scientific, clinical, organizational, social, or technological relevance of the project in light of the current issues addressed by the research. Involves stakeholders, including users, from the design phase through the project's development. Demonstrates the potential to improve access, equity, or the quality of care and services, particularly for vulnerable populations or remote regions.
3- Impact	Demonstrates preliminary results, compelling indicators, or feasibility data showing potential for clinical, organizational, technological, social, or practical impact. Demonstrates credible potential to improve care, services, patient pathways, or the usage of healthcare system resources. Demonstrates the ability to generate positive outcomes in terms of expertise development, education, collaboration, or the structuring of translational research capabilities. Demonstrates initial evidence of pre-conformance, adoption, pilot implementation, or integration into real-world settings, where applicable.
4- Outreach	Demonstrates emerging recognition or interest from key stakeholders involved in the project. Demonstrates potential to contribute to the outreach of Quebec expertise in translational research applied to health. Demonstrates activities related to broadcasting, collaboration, or knowledge mobilization at the local, national, or international level.
5- Evolution and Potential for Expansion	Presents a structured vision of the project's future development and its path toward concrete applications or implementation on a larger scale. Demonstrates potential for adoption, transfer, or expansion across different settings, organizations, or healthcare contexts. Presents initial considerations or strategies regarding the project's sustainability, scalability, and longevity. Demonstrates potential to contribute to the evolution of practices, organizational models, or care paradigms.

6- Value Creation, Outcomes, and Effectiveness	Presents preliminary results or indicators demonstrating potential for value creation for users, healthcare providers, organizations, or the healthcare system. Demonstrates a structured measurement framework including performance, outcome, or continuous improvement indicators appropriate for the project's early stage. Demonstrates credible potential to improve user experience, health outcomes, efficiency, or the quality of care and services.
7- Social Responsibility	Demonstrates consideration of ethical principles, safety, data privacy, and responsible conduct in research and innovation. Incorporates considerations related to equity, inclusion, accessibility, and social responsibility into the project's development. Demonstrates responsible governance and thoughtful consideration of the project's potential impacts on populations, practices, and the healthcare system.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT



8. Innovation Award – Translational Research

TRANSFORMATIVE PROJECT	
CRITERIA	
1- Innovative Nature	Demonstrates the ability to develop original treatments, products or approaches based on rigorous scientific foundations. Highlights the distinctive and innovative nature of the proposed approaches, particularly through the use of interdisciplinary methodologies and advanced technologies such as artificial intelligence or precision medicine.
2- Relevance	Addresses a real and clearly identified need within the healthcare system or a specific population. Contributes to strengthening Quebec's capacity to develop treatments and products arising from Quebec-based research. Integrates the needs of users and healthcare professionals throughout the development of the proposed solutions. Takes accessibility considerations into account, particularly for vulnerable populations and those living in remote regions.
3- Impact	Demonstrates clinical or other forms of impact through the development of innovative treatments, products, or technologies. Demonstrates an effect on the use of healthcare system resources in the targeted field. Generates socioeconomic benefits, particularly through business creation and the development of expertise. Demonstrates that the proposed treatments and products have been accepted and integrated into standard clinical practice.
4- Outreach	Demonstrates recognition within Quebec's healthcare and research ecosystem, particularly among care teams and users. Demonstrates impact and recognition beyond Quebec.
5- Evolution and Expansion Potential	Demonstrates an anticipated impact on the delivery of higher-quality care and services. Presents a credible plan for scaling and sustainability. Demonstrates that the proposed innovations have long-term sustainability potential, both financially and operationally. Demonstrates a transformative capacity to change care paradigms.
6- Value Creation, Outcomes, and Effectiveness	Demonstrates measurable results and a significant impact on the experience of patients and their loved ones, health outcomes, and the work experience of healthcare professionals. Demonstrates value creation for the healthcare system.
7- Social Responsibility	Ensures that clinical applications adhere to fundamental ethical principles, including patient safety, data protection, and social responsibility toward the communities involved.



CATEGORY – 2026 COMPETITION
HUMAN LEADERSHIP AND EMERGING SKILLS

9. Innovation Award – Next Generation and Emerging Talent

The Hippocrate Award aims to recognize the most innovative initiatives and interventions by emerging talent in the health sector, using an approach centred on the needs of the patient, a population or an organization, and focused on value.

The Next Generation category includes students, recent graduates and new professionals.

Key elements

- ✓ Describe the specific real-world problem for which the innovative project is being developed and explain the relevance of this project.
- ✓ Describe the partnerships and co-creation with health care users, families, professionals, academic partners, communities, networks or organizations.
- ✓ Describe the role of the Next Generation participants and show how they lead, co-lead, design and implement the project.
- ✓ Explain the new model implemented, its impact and how it contributes to value creation.
- ✓ Identify the measurement indicators and the process for measuring results in a manner appropriate to the project's maturity.
- ✓ For emerging projects, demonstrate readiness for implementation, initial results, feasibility and potential for success.
- ✓ For transformative projects, identify demonstrated implementation, measured value, sustainability, transferability and contribution to the system.

Criteria

1. Relevance to a specific problem and value proposition for health care

- As a group of emerging leaders, define a real, priority and documented problem based on data or field observations for a targeted group of health care users or citizens in relation to a specific issue.
- Present the vision and direction of the proposal based on needs identified in the local area and propose a solution that generates value in health care (outcomes, experience, efficiency), illustrating the current impacts on health care users, teams or the system.
- Demonstrate the progression from an idea to a concrete solution and show how the idea is being implemented within the community or an organization, based on an identified need for services related to people's lives, well-being and health, and for which the group of students or graduates has decided to take action.

2. Next generation leadership and appeal

- Implement an innovative, interdisciplinary team comprising a group of students or graduates who may come from a variety of disciplines or academic levels (from undergraduate to PhD, including vocational education).
- Demonstrate the active involvement of the Next Generation (students, graduates, young professionals) by showcasing innovative approaches to leadership or mobilization.
- Outline methods for onboarding health care users or citizens, health system professionals, community partners and other service providers at the heart of the process, in line with the chosen issue.

3. Interdisciplinary collaboration, partnerships and co-creation

- Demonstrate genuine cross-professional and cross-sector collaboration.
- Present the mechanisms for collaboration and coordination among the partners involved (health care users, community and academic partners, health networks).
- Illustrate co-construction approaches.

4. Adaptation of skills for complex health care systems

- Demonstrate that the skills associated with the projects are suited to complex environments (collaboration, systems thinking, navigation, etc.).
- Demonstrate the alignment of the skills developed with the current and future needs of the project and the system in which it operates (digital, data or AI skills).
- Demonstrate the capacity for intervention and cross-professional collaboration in an interdisciplinary and potentially cross-sector background.

5. Feasibility, progress in implementation and onboarding of systems

- Demonstrate concrete implementation or progress by presenting a structured implementation plan.
- Identify the conditions for onboarding into the health care system, and demonstrate ownership by stakeholders.

6. Measurement of value, outcomes, experience and effectiveness

- Present relevant indicators (qualitative and/or quantitative) to demonstrate the impacts and benefits generated by the implementation of the project or a value-creating solution, as well as the observed or expected outcomes regarding improvements in care and services for users, the quality of life of a group of citizens, or the well-being of the population, depending on the initiative.
- Demonstrate a value proposition (outcomes/resources) and performance.
- Outline the resources used and the nature of the costs involved in implementing and maintaining such an initiative.

7. Transferability, sustainability and contribution of the workforce/system

- Demonstrate the project's capacity to be replicated, adapted and onboarded into the system by illustrating its potential for scaling up.
- Identify the conditions for sustainability and deployment by presenting dissemination or transfer mechanisms.
- Demonstrate the contribution to workforce transformation.

EVALUATION CRITERIA – EMERGING PROJECT

9. Innovation Award – Next Generation and Emerging Talent

PLEASE REFER TO THE
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EMERGING PROJECT	
CRITERIA	
1- Relevance to a specific problem and value proposition for health care	The emerging project demonstrates exceptional relevance to the problem, an innovative vision and a compelling pathway to delivering value in health care.
2- Next Generation leadership and appeal	The emerging project clearly demonstrates the leadership potential of the Next Generation, as well as their ability to mobilize others and their influence on career paths.
3- Interdisciplinary collaboration, partnerships and co-creation	The emerging project demonstrates an exceptional approach to partnership and participatory potential for its implementation.
4- Adaptation of skills for complex health care systems	The emerging project demonstrates promising potential for adapting and aligning skills to meet current and future needs.
5- Feasibility, progress in implementation and onboarding of systems	The emerging project demonstrates exceptional readiness for implementation, with a credible plan, early progress and strong potential for onboarding.
6- Measurement of value, outcomes, experience and effectiveness	The emerging project demonstrates exceptional readiness in terms of measurement, with meaningful indicators and a credible plan to demonstrate its value.
7- Transferability, sustainability and contribution to the workforce/system	The emerging project shows exceptional potential for sustainable adaptation, replicability and contribution to the transformation of the workforce by the next generation.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

9. Innovation Award – Next Generation and Emerging Talent

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TRANSFORMATIVE PROJECT	
CRITERIA	
1- Relevance to a specific problem and value proposition for health care	The transformative project demonstrates exceptional and documented relevance, as well as proven value for health care in the context of practical implementation.
2- Next Generation leadership and appeal	The transformative project clearly demonstrates the value of next generation leadership, as well as its capacity to mobilise and its influence on career paths.
3- Interdisciplinary collaboration, partnerships and co-creation	The transformative project demonstrates exceptionally mature partnerships, co-creation and shared ownership in all backgrounds.
4- Adaptation of skills for complex health care systems	The project demonstrates proven adaptation of skills and proven onboarding into practice.
5- Feasibility, progress in implementation and onboarding of systems	The project demonstrates exceptionally successful implementation, onboarding and controlled roll-out across different backgrounds.
6- Measurement of value, outcomes, experience and effectiveness	The project stands out for its exceptional measurable value, rigorous evaluation and the use of results for improvement and dissemination.
7- Transferability, sustainability and contribution to the workforce/system	The transformative project demonstrates an exceptional and sustained contribution, transferability and a proven impact on the workforce or the system across all backgrounds, as well as a realistic approach to budget planning.

10. Innovation Award – Adaptative Workforce, Transformation of Skills and Practices

This award recognizes transformative innovations that transform the organization of work in health and social services to address major workforce challenges, with a focus on creating value, adapting skills, developing new interprofessional collaborations, and improving access. It highlights concrete approaches aimed at optimizing the usage of skills, roles, and team structures within complex and evolving environments.

It recognizes projects that take a structured approach to addressing workforce shortages, burnout, and evolving workforce skills. Initiatives stand out for their ability to deploy the right professional, for the right task, at the right time, while transforming practice frameworks, work organization, and processes to reduce administrative burdens and improve the team experience.

The selected projects demonstrate measurable improvements in access, productivity, and the quality of the team experience. They help strengthen attractiveness, retention, engagement, and co-creation with staff, while promoting skills development and organizational learning. They also demonstrate potential for sustainability, replicability, and scalability, enabling the implementation of sustainable and adaptable models.

Key Elements

A strong project for this award demonstrates that workforce transformation can improve access and value by changing skills, roles, practice frameworks, work organization, team ownership, and deployment conditions.

- ✓ Provide a clear analysis of workforce-related challenges, including the root causes of the changes being implemented, the teams involved, the users affected, and the healthcare needs the project aims to address.
- ✓ Explain how the solution is coherent, practical, and innovative, and how it transforms competencies, roles, practice frameworks, team models, and work organization.
- ✓ Demonstrate how the initiative optimizes the distribution of professional competencies and access to services.
- ✓ Demonstrate team engagement, clarity of roles, governance, ownership, and support for implementation.
- ✓ Describe the impact on administrative burden, workload, collaboration, improvement of the team experience, engagement, retention, and inclusion.
- ✓ Explain the measurable value of the project in terms of quality, access, experience, efficiency, resource usage, impact on the workforce, and contribution to the system.
- ✓ Describe the development of new skills and mechanisms for continuing education and organizational learning, as well as mechanisms that foster new cross-professional collaborations.

- ✓ Identify key performance and monitoring indicators, including their baseline values, targets, data sources, equity criteria, and responsible parties.
- ✓ Identify the conditions for transferability, sustainability requirements, deployment risks, and the scaling strategy.

Criteria

1. Relevance to workforce challenges and understanding of root causes

- Identify the major workforce-related challenges (shortages, access, organization, inefficiency).
- Provide an analysis of the root causes (organizational, professional, and systemic), the background, constraints, and affected groups at the start of the project.
- Establish the link between the problematic issues and access, experience, effectiveness, or equity. Share data establishing these links.
- Document current impacts and explain how the project is relevant to resolving the situation.
- Incorporate demographic, cultural, and territorial dimensions.

2. Consistency and innovation of workforce solution

- Explain how the solution is consistent, innovative, tailored to the scale of the workforce problem, and applicable in a real-world context.
- Explain the alignment between the components of the targeted interventions, the purposes, user needs, and the expected value of the proposed solution (organizational, professional, cross-professional, educational, or technological).
- Demonstrate the transformation of existing models and what is truly new or improved.
- Demonstrate adaptation to on-the-ground realities.

3. Transformation of roles, skills, and practice frameworks

- Demonstrate how the project transforms roles, competencies, responsibilities, and practice frameworks (as applicable).
- Demonstrate how the project supports the development of these new competencies (technical, digital, AI-related, interpersonal, intercultural, and collaborative), improves interdisciplinary collaboration, or leads to changes in practice routines.
- Illustrate the onboarding of new roles (coordination, navigation, advanced practices) and measures for adoption and sustainable changes in practices.

4. Optimizing allocation of and access to skills

- Demonstrate how the project contributes to improving the availability, continuity, and accessibility of services.
- Report on indicators and measures that demonstrate gains in accessibility (wait times, continuity, coverage) and in service capacity, follow-up, and care.

5. Work organization, team experience, and administrative workload

- Describe how the project is modifying work organization, team processes, collaboration, and task workflows, and illustrate the new team models, new pathways, and revised workflows.
- Describe how these changes contribute to improving working conditions for teams.
- Show how the project impacts administrative workload or low-value tasks.
- Describe, using indicators, the effects on engagement, motivation, and retention.

6. Feasibility, engagement, and practical implementation

- Demonstrate the actual and appropriate implementation of the project and service delivery.
- Present a viable operational model for your project (resources, governance, monitoring).
- Describe strategies for engagement and buy-in.
- Illustrate change management and constraints.
- Demonstrate the ability to overcome implementation challenges.

7. Value and results measurement (value-based health care, VBHC)

- Explain whether value is measured in relation to the project (quality, access, user and team experience, system efficiency).
- Identify the key indicators used and the data collected, as well as how they are tracked over time.
- Report on the project's results and value by comparing metrics measured at the start of the process with those obtained recently.

8. Transferability, sustainability, and contribution to system

- Demonstrate the ability to be replicated, adapted, and scaled up.
- Identify the conditions for success and sustainability.
- Illustrate implementations in other backgrounds.
- Demonstrate a contribution to a broader transformation of the system.
- Present a sustainable model (organizational, economic, and practical).

EVALUATION CRITERIA– EMERGING PROJECT

10. Innovation Award – Adaptive Workforce, Transformation of Skills and Practices

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

EMERGING PROJECT	
CRITERIA	
1- Relevance to workforce challenges and understanding of root causes	The emerging project demonstrates exceptional relevance to the problem and a deep understanding of its root causes, with a clear rationale for testing a workforce-related solution in a real-world background.
2- Consistency and innovation of workforce solution	The emerging project presents an exceptionally coherent and innovative workforce management solution with sound logic, clearly identified users, and credible potential for real-world testing.
3- Transformation of roles, skills, and practice frameworks	The emerging project demonstrates exceptional potential to transform roles, competencies, and practice frameworks through a well-designed learning and implementation model.
4- Optimizing allocation of and access to skills	The emerging project shows great promise for implementing a tailored model regarding professionals, tasks, and timing, with credible early access measures.
5- Work organization, team experience, and administrative workload	The emerging project demonstrates exceptional initial design for improving teamwork, reducing workload, and strengthening engagement in real-world practice.
6- Feasibility, engagement, and practical implementation	The emerging project demonstrates exceptional feasibility for rapid implementation, with strong engagement, realistic planning, and clear risk management.
7- Value and results measurement (value-based health care VBHC)	The emerging project demonstrates exceptional preparedness in terms of measurement, with robust early indicators and a credible plan to track workforce transformation and value.
8- Transferability, sustainability, and contribution to system	The emerging project demonstrates exceptional potential for scaling, with clearly transferable components, conditions for deployment, and a credible path to sustainability.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

10. Innovation Award – Adaptative Workforce, Transformation of Skills and Practices



TRANSFORMATIVE PROJECT	
CRITERIA	
1- Relevance to workforce challenges and understanding of root causes	The project demonstrates an exceptional workforce assessment, supported by robust evidence, showing how the proven model addresses root causes and creates sustainable value for healthcare.
2- Consistency and innovation of workforce solution	The project presents an exceptionally coherent and proven workforce management solution, whose innovation results in sustainable changes in practices and measurable value.
3- Transformation of roles, skills, and practice frameworks	The project demonstrates exceptional and sustainable transformation of roles, competencies, and practice frameworks, with proven adoption and organizational learning.
4- Optimizing allocation of and access to skills	The project demonstrates exceptional and measurable optimization of skills allocation, with proven access, continuity, and impact on value.
5- Work organization, team experience, and administrative workload	The project demonstrates exceptional sustained improvement in work organization, team experience, administrative burden, attractiveness, retention, and engagement.
6- Feasibility, engagement, and practical implementation	The project demonstrates exceptional maturity in implementation, with sustainable governance, ownership, engagement, and concrete deployment proven.
7- Value and results measurement (value-based health care VBHC)	The project demonstrates exceptional measured results, with strong evidence of workforce transformation, improved access, team value, and system performance.
8- Transferability, sustainability, and contribution to system	The project demonstrates exceptional sustainability and contribution to the system, with a proven dissemination strategy, sustainable ownership, and measurable impact at a larger scale.



CATEGORY – 2026 COMPETITION
QUEBEC LEADERSHIP ON THE INTERNATIONAL SCENE

11. Innovation Award – Global Solutions, Local Implementation

This award recognizes initiatives developed in Quebec that have demonstrated measurable and sustainable value creation in their original background and have successfully begun implementation elsewhere in Canada and internationally. It highlights projects capable of transferring, maintaining, and adapting their performance across different health systems, taking into account cross-systemic complexity.

It values initiatives that demonstrate strong replicability, an ability to adapt to diverse cultural, organizational, and regulatory backgrounds, as well as rigorous management of differences between backgrounds. The projects stand out for their contribution to transforming practices and systems, as well as their ability to generate concrete, sustainable, and transferable results.

Selected projects are based on prior results measured in Quebec and in at least one background outside our province, covering multiple dimensions of health value. They present rigorous and standardized documentation that allows for the comparison of results (before/after, variation, duration, and population) and demonstrate the sustainability of impacts. They thus help maximize the overall impact on health systems and promote local organizations and entrepreneurs (public and private) in Canada and internationally.

Key Elements

A robust project with international scope and value transfer is a mature model originating in Quebec that has generated measurable value within our province and has replicated or adapted this value in host backgrounds outside Quebec through rigorous governance, measurement, adaptation, and learning. It must allow for easy tracking of the value transfer process, demonstrating what value was created in Quebec, where the model was implemented outside the province, which initiatives were replicated, how adaptations were managed, what the results are, and why the model can serve as a benchmark.

Note: For this first edition of the award, projects related to the various themes of the 2026 Hippocrate Awards and implemented outside of Quebec are eligible in this category, regardless of the theme (AI, technological development, digital transformation, and others). Furthermore, organizations that continue their innovation efforts in our province and wish to submit their Quebec-specific innovation in the project-specific category may do so; however, this second submission will not be considered for the international component but rather for the Quebec-specific component. Submitting two separate applications is therefore possible for this award.

- ✓ describe the original Quebec model, its background, its level of maturity, its onboarding, and evidence of its value;
- ✓ identify each host context outside Quebec and specify the level, duration, and scope of implementation;
- ✓ provide the results from the host background using comparable indicators to the extent possible;
- ✓ explain the differences between the results in Quebec and those in the host backgrounds, as well as how they were addressed;
- ✓ distinguish between the invariant components that preserve the fundamental value and the adaptable contextual components;
- ✓ demonstrate how cultural, regulatory, organizational, clinical, and operational complexity was managed;
- ✓ describe local co-creation, partnership governance, acceptance by professionals, acceptance by users, and ownership by the host context;
- ✓ identify key performance indicators (KPIs) with benchmarks, outcomes, data sources, time periods, equity breakdowns, and responsible parties for Quebec and the host context;
- ✓ demonstrate how data, technologies, AI, and learning loops support the monitoring, steering, comparability, improvement, and evolution of the model;
- ✓ document the scale, sustainability, contribution to best practices, impact on policies or practices, and Quebec's international influence.

Criteria

1. Performance and value creation in Quebec

- Demonstrate a high level of maturity, onboarding, and performance in Quebec; the robustness of clinical findings, experiential knowledge, efficiency, financial, and organizational outcomes in the Quebec background (dashboards, evaluation reports, indicators, limitations, exclusions); and the duration of sustained outcomes.
- Highlight alignment with the principles of value-based healthcare, including outcomes, patient experience, and efficiency.
- Illustrate the consistency between outcomes, experience, and resource usage.
- Demonstrate value at the individual, organizational, and systemic levels.

2. Effective implementation outside Quebec

- Demonstrate actual implementation in one or more international or Canadian backgrounds and the level of deployment.
- Specify the level of deployment (pilot, partial, or full).
- Describe the host backgrounds (country, system, or organization), as well as the diversity and relevance of the backgrounds in which the initiative is implemented outside Quebec.
- Illustrate the duration and scope of the deployment.
- Describe the users, workflows, governance, and business operations in the host contexts, and present activity or usage volumes.

3. Reproducibility and sustainability of value

- Demonstrate the replication or maintenance of value in the host backgrounds.
- Illustrate the system's results in terms of user experience, accessibility, efficiency, or performance in the host background and its sustainability over time.
- Compare results between Quebec and other backgrounds, specifically the stability or variability of performance across systems, populations, and environments.
- Explain the observed discrepancies and their evolution.
- Show the adjustments made to preserve value and maintain performance in host backgrounds.

4. Comparability and methodological rigour of results

- Present results in a standardized and comparable format (before/after, variation, population, and duration).
- Demonstrate the rigour of the methodology used for its usage.
- Illustrate comparisons between backgrounds.
- Demonstrate the quality of the data and indicators.
- Present robust evaluation methodologies.

5. Transferable model and structuring of innovation

- Demonstrate a structured, transferable, and replicable model, indicating that this is not a one-off solution.
- Explain the distinction between essential, invariant components and adaptable, context-specific components.
- Illustrate transfer and dissemination mechanisms, and present structuring and implementation tools as well as success criteria.
- Document the model's ability for usage in different systems.

6. Management of cross-systemic complexity

- Demonstrate how international complexity (cultural, organizational, regulatory, and clinical) is managed.
- Identify differences between settings and their impacts.
- Describe the adaptation strategies implemented (e.g., mitigation mechanisms, risk logs).
- Illustrate the stability of results despite contextual complexity and variability.
- Demonstrate coordination between systems (e.g., governance mechanisms to manage interdependencies and decisions across systems).

7. Local adaptation, integration, acceptance, and ownership

- Demonstrate the adaptations made to the model for local backgrounds.
- Illustrate onboarding into practices and ownership by stakeholders.
- Present adoption or usage rates.
- Illustrate the adjustments made and their impact.
- Demonstrate acceptability by teams and organizations.

8. Governance and international partnerships

- Demonstrate structured and active international partnerships.
- Present a clear governance model: relevance and distribution of centralized versus decentralized responsibilities.
- Illustrate the level of co-creation with local stakeholders and actors in the host systems.
- Demonstrate the diversity and commitment of stakeholders.
- Present coordination and decision-making mechanisms.

9. Data, technologies, AI, and learning loops

- Demonstrate the usage of data and technologies to track, compare, and manage performance.
- Illustrate learning loops and continuous improvement.
- Present standardization and comparability tools.
- Illustrate the usage of AI or analytics to support implementation.
- Demonstrate measurable gains associated with these levers.

10. Impact on the host system, scope, leadership, and global contribution

- Demonstrate measurable impacts on host systems (care, access, efficiency, and organization).
- Illustrate the contribution to a transformation of practices or the system.
- Demonstrate a large-scale or population-level impact.
- Illustrate the role as a reference, leader, or international model.
- Demonstrate a contribution to knowledge dissemination and global innovation.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

11. Innovation Award – International Impact and Value Transfer

PLEASE REFER TO THE
APPENDIX SECTION
FOR ADDITIONAL
INFORMATION
ON THE
KPIs

TRANSFORMATIVE PROJECT	
CRITERIA	
1- Performance and value creation in Quebec	The initiative demonstrates exceptional performance and value creation in line with the value-based health care (VBHC) model in Quebec, with solid, sustainable, mature, and comprehensive evidence of results, experience, and effectiveness.
2- Effective implementation outside Quebec (Canada and International implementation)	The initiative demonstrates exceptional implementation outside Quebec and on an international scale, featuring diverse implementation backgrounds, sustained operations, clear deployment levels, and strong evidence of concrete implementation.
3- Reproducibility and sustainability of value	The initiative demonstrates exceptional replicability and sustainability of value, with solid results in host backgrounds, as well as a transparent analysis of gaps and sustained performance across various systems.
4- Comparability and methodological rigour of results	The initiative demonstrates exceptional rigour and comparability, with robust methods, common indicators, transparent reporting, and credible interpretation of value across different jurisdictions.
5- Transferable model and structuring of innovation	The initiative presents an exceptionally transferable and well-structured innovation model, with documented components, adaptation rules, success criteria, and evidence that the model can be replicated beyond a single background.
6- Management of cross-systemic complexity	The initiative demonstrates exceptional management of cross-systemic complexity, maintaining its performance through proven strategies for addressing regulatory, cultural, organizational, clinical, and operational variations.
7- Local adaptation, integration, acceptance, and ownership	The initiative demonstrates exceptional local adaptation and ownership, with deep onboarding into host systems, strong acceptance by professionals and users, and evidence that local autonomy enhances value rather than diluting it.
8- Governance and international partnerships	The initiative demonstrates exceptional governance and great maturity in international partnerships, with sustainable co-creation, clear decision-making rights, effective coordination, and shared responsibility for added value across different jurisdictions.
9- Data, technologies, AI, and learning loops	The initiative demonstrates exceptional usage of data, technologies, AI, and learning loops to guide implementation, compare value, improve the model, and support responsible evolution across jurisdictions.
10- Impact on the host system, scope, leadership, and global contribution	The initiative demonstrates exceptional impact on the host system, scalable and sustainable value, leadership as an international benchmark, a contribution to international best practices, and a visible influence of Quebec beyond its home territory.



CATEGORY – 2026 COMPETITION
INTERNATIONAL SOLUTIONS WITH LOCAL IMPACT

12. Innovation Award – Global Solutions with Local Impact

This award recognizes international initiatives that have demonstrated proven, measurable, and sustainable value creation and have already been implemented on a significant scale in their local backgrounds. It highlights innovative solutions that have proven effective in the settings and among the populations they serve, and whose potential for applicability, transfer, and adaptation to other backgrounds—including Quebec—is credible, well structured, and brings value to the local population and healthcare system.

It promotes projects capable of addressing complex challenges shared by multiple countries or organizations, particularly regarding access, quality, efficiency, and equity, as well as among fragile and vulnerable client groups or populations. These initiatives demonstrate solid results covering several dimensions of health value (including outcomes, experience, efficiency, and population impact), while proposing a realistic and structured approach to transfer, adaptation, and implementation in collaboration with Quebec and Canadian sponsors.

The scope of attention focuses on the quality of the strategy for adapting to the Quebec context, on understanding the differences between systems and environments, and on the project's ability to engage relevant and committed local sponsors. Recognized initiatives demonstrate a strong capacity for evolution, integration, and collaboration across jurisdictions, taking into account the cultural, organizational, regulatory, and operational realities specific to Quebec and Canada.

This award also highlights the importance of international sharing of knowledge, expertise, and solutions that have proven effective in other jurisdictions. It aims to recognize robust and transferable innovations that provide additional levers to accelerate the transformation of the healthcare system and enrich responses to the increasingly complex challenges faced by many healthcare systems around the world.

Key Elements

A strong application must demonstrate what the solution has achieved internationally, why it is relevant to Quebec, how it will be adapted, who is responsible for its implementation, and how its value will be measured

Note: For this inaugural edition of the award, projects related to the various themes of the 2026 Hippocrate Awards and implemented outside of Quebec are eligible in this category, regardless of the theme (development of service and care pathways, digital transformation, and others). Furthermore, organizations already involved in local projects here, in partnership with Quebec organizations, and for which innovations are underway (emerging or transformative) may also submit their joint project in the specific project category. However, this project will not be evaluated based on its international impact. It is therefore possible to submit two separate applications for this award.

- ✓ describe the original solution and the background in which its value has been demonstrated;
- ✓ provide credible quantitative and qualitative evidence, including limitations;
- ✓ explain the need in Quebec and why the solution is relevant to the background in our province; demonstrate an understanding of and consideration for the complexity, risks, and adaptation needs;
- ✓ highlight the differences between the original and Quebec systems, the essential components of the model and the adaptable components, and explain how adaptation will be managed;
- ✓ identify committed Quebec or local sponsors, and demonstrate their roles and level of commitment;
- ✓ identify the elements of the model that must remain constant and those that can be adapted;
- ✓ provide a phased implementation plan including milestones, responsibilities, learning loops, and risks;
- ✓ identify key performance indicators (KPIs) by specifying baseline values, targets, data sources, and responsible parties, as well as indicators linking international performance to the expected local impact;
- ✓ address aspects related to privacy, data governance, interoperability, responsible AI, and operability, as applicable;
- ✓ demonstrate how knowledge will flow in both directions between the international model and the local implementation background, and how it will strengthen both the local system and the international value network.

Criteria

1. Demonstrated, evidence-based international value

- Demonstrate measurable and compelling results in the international background.
- Provide data covering at a minimum results, experience, and efficiency.
- Demonstrate the reproducibility and consistency of performance across different contexts, populations, and operational environments, as well as the monitoring indicators used (evaluation results, published or internal dashboards or reports, clinical and organizational indicators, comparison with benchmarks, and data from multiple sites, populations, or implementation cycles).
- Demonstrate the stability and sustainability of results over time.

2. Relevance and value for Quebec/local background

- Demonstrate the relevance and suitability of the solution for the priority issues of the Quebec or local health system and explain how the proposed solution complements existing services rather than duplicating or fragmenting them.
- Describe the understanding of the local needs for which the solution is proposed and the understanding of the gaps the solution aims to address: care pathways, access, quality, continuity of care, or resource usage.
- Quantify the potential gains for the system (outcomes, resources).
- Demonstrate alignment with population- or regional-level priorities.

3. Understanding and managing local complexity

- Describe your analysis and consideration of the complexity of organizational, clinical, regulatory, and cultural implementation.
- Identify the main differences between backgrounds and their impacts.
- Explain the project's ability to function within a complex health system without creating new fragmentation, and demonstrate strategies for adapting to and managing local realities.
- Document the risks and levers related to complexity and show how complexity will be actively managed during implementation.

4. Rigour of implementation strategy

- Present a structured, phased, realistic, and measurable implementation plan (phases, milestones, resources).
- Demonstrate organizational and operational feasibility (key steps, decision points, accountability, resource assumptions).
- Describe the deployment timeline (pilot phase, adaptation, and full deployment).
- Outline the conditions for success and critical factors (e.g., learning mechanisms, feedback).

5. Quality of partnerships and local presence

- Demonstrate the existence of genuine and committed local partnerships.
- Specify roles, responsibilities, and governance mechanisms.
- Illustrate the diversity of sponsors and their level of engagement.
- Demonstrate the capacity for cross-sector collaboration.

6. Adaptability and robustness of model

- Demonstrate the model's ability to be adapted without loss of value (e.g., adaptation plan, evidence based on previous implementations).
- Clearly identify the elements that are fixed and those that are adaptable.
- Explain the plan for monitoring the performance of adapted components and the risk control measures aimed at preventing any loss of value.
- Demonstrate the robustness of the results despite adjustments.

7. Contribution of data, technologies, and AI

- Demonstrate the usage of data to measure, monitor, and drive performance.
- Illustrate the actual contribution of technologies or AI to value.
- Present monitoring, decision-support, or coordination tools.
- Demonstrate measurable gains associated with their usage.

8. Expected local value and measurable impact

- Demonstrate the expected short-, medium-, and long-term value for the local background (population, organization, region, scope, results, experience, resources).
- Define indicators and measurement methods to track the impact.
- Present projections (access, quality, and efficiency).
- Illustrate the expected impacts.
- Establish the link between the expected local value and the proven international value of the solution.

9. Scalability and sustainability

- Demonstrate the long-term viability of the model (organizational, financials).
- Identify key success factors, obstacles, and scalability.
- Identify the conditions for ensuring sustainability after implementation.
- Demonstrate the model's stability over time.
- Provisions regarding governance and continuous improvement.

10. Contribution to international value flows

- Demonstrate how the project enriches the local system through proven practices from another background.
- Illustrate the contribution to the circulation of knowledge and practices.
- Demonstrate mechanisms for international sharing, collaboration, or co-development.
- Illustrate the model's ability to inspire or structure other initiatives.

EVALUATION CRITERIA – TRANSFORMATIVE PROJECT

12. Innovation Award – Global Solutions, Local implementation



TRANSFORMATIVE PROJECT	
CRITERIA	
1- Demonstrated, evidence-based international value	The solution is based on solid, replicable international evidence and clearly aligns with the VBHC (Value-Based Health Care) model. It demonstrates a compelling track record of sustainable value creation.
2- Relevance and value for Quebec/local background	The application presents a compelling case for local value, characterized by strong alignment with priorities, a clearly identified unmet need, and credible short- and long-term benefits.
3- Understanding and managing local complexity	The project demonstrates mature management of complexity, with a clear adaptation strategy, risk controls, and evidence that the model can operate safely and effectively within the host system.
4- Rigour of implementation strategy	The implementation strategy is highly credible, with clear governance, phased execution, measurable milestones, learning loops, resource alignment, and concrete evidence of progress.
5- Quality of partnerships and local presence	The project is deeply rooted in the local context, with committed sponsors, shared governance, clearly defined responsibilities, and evidence that local stakeholders are actively participating in its implementation.
6- Adaptability and robustness of model	The model is both adaptable and robust, with clear core elements, tested or credible locator methods, and a compelling plan to maintain value after adaptation.
7- Contribution of data, technologies, and AI	The project uses data, technology, or AI in a mature, well-managed, interoperable, and value-driven manner, which significantly enhances implementation and measurable impact.
8- Expected Local value and measurable impact	The application proposes a compelling and measurable local value model that links proven international value to specific outcomes in Quebec or at the local level, to equity considerations, and to system performance gains.
9- Scalability and sustainability	The project presents a well-developed roadmap toward sustainability and responsible expansion, including resources, governance, deployment capacity, and expansion criteria.
10- Contribution to international value flows	The project serves as a solid bridge between health systems, featuring deliberate mutual learning, concrete transfer outcomes, and a credible long-term contribution to international value flows.

HIPPOCRATE AWARD – TEAM PRESENTATION FORM

Project Information

PROJECT TITLE:	
PROJECT CATEGORY:	
PROJECT LEAD:	
PROJECT IMPLEMENTATION DATE	

Contact Information for the Official Project Lead

The official project lead must be the individual responsible for the project and the person who will attend the recognition event should the team receive the award. Other individuals identified in the application should represent the partners involved in the project or participating organizations (public, private, non-profit, community-based, etc.).

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

- ☐ We authorize the Hippocrate Award to disseminate information about our project through its various communication channels (website, Hippocrate Review, newsletter, or other media used to promote award recipients), as well as to the Ministère de la Santé et des Services sociaux (MSSS) and other associated organizations or authorities.



Information on Project Team Members and Partners

(Add additional rows as needed to reflect all project partners.)

Person 1:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

Person 2:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

Person 3:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	



Person 4:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

Person 5:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

Person 6:

NAME:	
TITLE:	
ORGANIZATION:	
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Person 7:

NAME:	
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ORGANIZATION:	
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Person 8:

NAME:	
TITLE:	
ORGANIZATION:	
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EMAIL:	

Person 9:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

Person 10:

NAME:	
TITLE:	
ORGANIZATION:	
PHONE:	
EMAIL:	

LE PRIX
HIPPOCRATE
INNOVATION CATALYST GENERATING VALUE

APPENDIX

AWARDS KPIs

1. Innovation Award – Integrated Prevention and Sustainable Health

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) that links determinants, prevention activities, sustainable health outcomes, equity, and value creation. The table must clearly indicate what is being measured, over what time period, and how the data will be used for learning and adjustment.

Expected fields (if possible) for the Key Performance Indicators (KPI) table

FIELD	DESCRIPTION
Indicator Category	Sustainable health, determinants, behavior, living environments, equity, population impact, value creation, implementation, etc.
Indicator	Specific measure used to track prevention activities, achievements, outcomes, or impact.
Reference	Starting point before or at the beginning of the initiative.
Objective	The result the initiative aims to achieve.
Current result	The most recent measured result, if available.
Timeframe	Measurement period, reporting cycle, and expected timeframe for the impact of prevention.
Population or context	Target population, territory, community, school, workplace, municipality, region, or other context.
Data source	Survey, administrative data, registry, dashboard, observation, audit, qualitative source, or partner report.
Equity stratification	Relevant subgroup, geographic area, socioeconomic status, language, culture, accessibility, or other equity-related breakdown.
Responsible party	Person, team, partner, or organization responsible for the measure and for monitoring the measures
Use for learning purposes	How the indicator will be used for adjustment, improvement, or knowledge transfer.
Notes and limitations	Known data limitations, cautions regarding interpretation, or dependencies.

Recommended KPI families

KPI FAMILY	EXAMPLES OF INDICATORS
Determinants and risk factors	Prevalence, risk exposure, living conditions, food security, physical activity, social isolation, environmental risks.
Sustainable health	Sustainable behavioral changes, supportive environments, policy or contextual changes, sustained actions over time.
Living environments	Changes within schools, workplaces, municipalities, communities, housing, transportation, or the environment.
Cross-sectoral partnerships	Number and diversity of partners, well-defined roles, participation in governance, coordination activities.
Community and citizen participation	Participation in co-design, community governance, engagement rates, citizen feedback, and continuity of participation.
Patient and family involvement	Measures and timeline for patient involvement.
Self-determination and health literacy	Empowerment, trust, autonomy, collective action, measures of health literacy.
Well-being and overall health	Well-being scores, quality of life, PROMs, mental health, functional status, holistic health indicators.
Citizen experience	Tailored PROMs, satisfaction, perceived accessibility, trust, complaints, compliments.
Preventable outcomes	Avoidable visits, hospitalizations, disease progression, increased risks, delayed onset, complications.
Resource utilization and value	Avoidable care, avoided costs, resource optimization, value of early intervention, pressure on the system.
Equity and impact on the population	Coverage of priority populations, reduction of inequalities, geographic coverage, improved access to support resources.
Implementation and adoption	Sites activated, participation, adherence, adoption rates, staff or partner engagement, duration of use.
Learning and measurement	Metrics tracked, use of the dashboard, longitudinal tracking, before-and-after comparisons, documented lessons learned.
Sustainability and scaling	Integration into policies, ongoing funding, sustainable model, regional deployment, replication in other contexts.
Digital, data, and AI	Data completeness, targeting, monitoring tools, engagement tools, model monitoring, acceptability, and actual use.

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2. Jean-Paul Marsan Innovation Award – Transforming Complex Integrated and Value-Creating Care Pathways

Table of Required Key Performance Indicators (KPIs)

Each application must include a table of key performance indicators (KPIs). This table must focus on indicators relevant to the project and directly linked to the intended improvement of the care pathway.

Activity indicators, such as the number of meetings, workshops, or training sessions, may be included, but they must not replace indicators of outcomes, experience, access, continuity, equity, resource utilization, adoption, sustainability, or balancing effects.

Expected fields (if possible) for the key performance indicators table

FIELD	DESCRIPTION
Key Performance Indicator Family	Access, continuity, outcomes, equity, resource utilization, etc.
Indicator	The specific measure used.
Objective	The result the project aims to achieve.
Baseline	Value prior to the intervention.
Current value or post-intervention value	Result achieved after implementation or at the time of submission.
Period	Period covered by the data.
Denominator or population size	Number of people, cases, sites, professionals, or episodes included.
Data source	Administrative data, survey, medical record analysis, dashboard, financial data, etc.
Comparator or method	Before/after, benchmark, comparison group, qualitative analysis, or other method.
Leading or lagging indicator	Indicates whether the measure reflects initial progress or final impact.
Breakdown by subgroup	Relevant breakdowns by geographic area, language, income, age, disability, Indigenous identity, immigrant or refugee status, or other priority population.
Interpretation	What the result means and what limitations should be considered.

Recommended families of key performance indicators (KPIs)

FAMILY OF KEY PERFORMANCE INDICATORS	EXAMPLES OF INDICATORS
Access	Wait time, time to first contact, completion of referral, time to service initiation.
Continuity	Follow-up conducted, transition time, service interruption avoided, continuity of the provider or team.
Referral	Number of transfers, clarity of the process, ease of navigation as reported by the user.
User experience	PREM, satisfaction, trust, continuity of the relationship, complaints, compliments.
Patient and family	Measures of patient involvement and wait times.
Self-determination	Shared decision-making, autonomy, confidence in care management, health literacy.
Equity and accessibility	Coverage of priority populations, language access, access in rural or remote areas, reduction of inequalities.
Outcomes	PROMs, clinical outcomes, functional status, psychosocial outcomes, quality of life.
Resolution of complex cases	Proportion of complex needs addressed, reduction in unresolved cases, time to case resolution.
Burden on caregivers and family	Caregiver stress, time burden, trust, support received.
Resource utilization	Emergency room visits, hospitalizations, readmissions, length of stay, redundant assessments, avoidable visits.
Financial value	Avoided costs, budgetary impact, cost per episode, resource optimization.
Impact on staff	Workload, clarity of roles, team satisfaction, retention, sick leave, overtime, time to fill positions.
Implementation and adoption	Number of sites, number of professionals involved, adoption rate, retention, duration of use.
Risks and mitigation measures	Unforeseen delays, unequal access, security incidents, increased workload, negative user experience.
Environmental and balancing measures	Travel avoided, reduced consumption of paper or materials, impacts on energy or waste, estimated environmental footprint.

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3. Innovation Award – Putting People and Quality First

Table of mandatory key performance indicators (KPIs)

Applicants must provide a table of key performance indicators (KPIs) that link the project to concrete impacts on people, quality, experience, teams, accessibility, and value. The indicators must include, where possible, baseline values, targets, timelines, the person responsible, and the data source.

Expected fields (if possible) for the Key Performance Indicators table

CHAMP	DESCRIPTION
Indicator Category	Human experience, continuity, quality, access, outcomes, equity, workforce experience, resource utilization, etc.
Indicator	The specific measure used to assess the project's impact.
Objective	The concrete outcome the project aims to achieve.
Baseline	The value or situation observed prior to project implementation.
Current or Post-Intervention Value	The result achieved following implementation or at the time of application submission.
Reporting Period	The period covered by the data presented.
Denominator or Population Size	Number of patients, family members/caregivers, professionals, care pathways, sites, or episodes included in the measurement.
Data Source	Administrative data, PREMs/PROMs, surveys, clinical records, dashboards, HR data, field observations, etc.
Comparator or Methodology	Before-and-after comparison, comparison group, reference pathway, qualitative analysis, mixed-methods approach, or other methodology used.
Leading or Lagging Indicator	Indicates whether the measure reflects early progress or a demonstrated final impact.
Subgroup Breakdown	Relevant stratification by age, sex, language, geography, socioeconomic status, disability, mental health status, Indigenous populations, or any other priority population concerned.
Interpretation	Explanation of the meaning of the results, key learnings, and methodological limitations to be considered.

Recommended families of key performance indicators (KPIs)

FAMILY OF KEY PERFORMANCE INDICATORS	EXAMPLES OF INDICATORS
Human and Relational Experience	User engagement, perceived quality of relationships, feeling heard, trust in care teams, overall satisfaction, continuity of relationships, feeling recognized as a partner in care.
Family and Caregiver Experience	Family satisfaction, participation in decision-making, perceived support, caregiver stress levels, caregiving experience, trust in services.
Personalization and Humanization of Care	Participation in decision-making, adaptation of care plans, care tailored to individual preferences and life circumstances, perceived autonomy, shared decision-making.
Continuity and Care Pathway Fluidity	Transition delays, continuity of care providers, interprofessional coordination, avoided care disruptions, care pathway fluidity, number of steps or referrals avoided.
Access and Service Proximity	Wait times, speed of first contact, access in remote regions, linguistic accessibility, virtual or hybrid access, maintenance of local services.
Quality and Safety of Care and Services	Avoided incidents, reduction in errors, perceived quality, adherence to best practices, psychological safety, improvements in clinical or organizational quality.
Health Outcomes and Well-Being	PROMs, quality of life, functional status, mental health, autonomy, symptom reduction, overall well-being.
Equity, Inclusion, and Social Justice	Reduction of disparities in access or outcomes, coverage of vulnerable populations, culturally safe access, reduction of social or linguistic barriers.
Workforce Experience and Engagement	Team satisfaction, engagement, retention, absenteeism, sense of effectiveness, interprofessional collaboration, reduced administrative burden, increased time available for clinical care.
Practice Transformation and Work Organization	Adoption of new practices, reduction of non-value-added activities, improved coordination, increased use of professional judgment, process simplification.
Resource Utilization and Efficiency	Reduction in avoidable visits, fewer hospitalizations or readmissions, resource optimization, reduction of duplication, improvement in the clinical time-to-administrative time ratio.
Financial and Organizational Value	Avoided costs, budget optimization, efficiency gains, reduced productivity losses, value created for the healthcare system or care teams.
Adoption, Implementation, and Dissemination	Number of sites or teams involved, adoption rate, implementation fidelity, duration of use, dissemination to other settings, knowledge transfer mechanisms.
Sustainability and Transformational Capacity	Maintenance of results over time, integration into routine practice, financial or organizational sustainability, scalability.
Risks and Balancing Measures	Unanticipated additional workload, unintended inequities, digital burden, negative effects on user or workforce experience, unforeseen organizational impacts.

4. Innovation Award – Artificial Intelligence

Required Key Performance Indicators (KPI) Table

Applicants must include a Key Performance Indicators (KPI) table that links the AI initiative to a measurable value. The table must show how the AI's performance, implementation, and impact on healthcare are tracked over time.

Expected fields (if possible) for the Key Performance Indicators (KPI) table

FIELD	DESCRIPTION
Indicator Category	Outcomes, experience, access, safety, effectiveness, equity, adoption, model performance, governance, sustainability, etc.
Indicator	Specific measure used to evaluate the value, performance, implementation, or impact of AI.
Reference	Previous situation, point of comparison, current result, or justified baseline assumption.
Objective	The result the project aims to achieve and the expected timeline.
Current result	The most recent measured result, if implementation has already begun.
Period	Measurement period, reporting cycle, and planned timeline for impact.
Population or context	Target population, service, organization, care pathway, or operational context.
Data source	Source system, survey, registry, audit, model monitoring results, administrative data, or evaluation method.
Equity stratification	Distribution by relevant subgroup, language, geographic area, socioeconomic status, culture, accessibility, or bias/equity.
Accountable	Person, team, organization, or governing body responsible for measurement and monitoring.

Recommended Key Performance Indicator (KPI) Categories

FAMILY OF KEY PERFORMANCE INDICATOR	EXAMPLES OF INDICATORS
Quality and Safety of Decisions	Accuracy of decisions, speed of decisions, compliance with guidelines, dangerous decisions avoided, appropriateness of escalation
Forecasting and anticipation	Risk detection, accuracy of alerts, time saved, deterioration avoided, accuracy of prioritization, anticipation of patient pathways
Access and continuity	wait times, completion of triage, time to care, continuity of follow-up, avoidable transfers, access for priority groups
Outcomes and experience	clinical outcomes, functional outcomes, psychosocial outcomes, PROMs, PREMs, trust, caregiver experience
Patient and family involvement	Measures of patient engagement and timeframes
Professional workload and team experience	time savings, reduction of low-value-added tasks, cognitive load, team satisfaction, adoption, deviation rate, training completion
Model quality and robustness	Validation performance, subgroup performance, drift, calibration, use of explainability, model-related incidents, monitoring completion
Data governance, security, and fairness	Data completeness, data quality controls, privacy controls, access reviews, bias/equity controls, security incidents
Efficiency and resource utilization	staff time, cost per outcome, avoidable visits, resource utilization, throughput, productivity, avoided duplication
Sustainability and scalability	Active sites, sustainable use, governance reviews, update cycles, deployment readiness, replication stages

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5. Innovation Award – Digital Transformation

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) that links digital transformation to the impact on care pathways, interoperability, adoption, governance, value creation, and the system's contribution. The table must demonstrate how digital technology is changing actual practices, services, organizations, or care pathways, and how evidence supports decisions regarding adoption, sustainability, and scaling.

Expected fields (if possible) for the key performance indicators table

FIELD	DESCRIPTION
Key Performance Indicator Family	Quality, access, experience, efficiency, interoperability, adoption, workflow, governance, scaling, etc.
Indicator	A specific metric used to assess the system's digital transformation, value, adoption, implementation, or impact.
Reference	The prior state, the benchmark, the current result, or the justified baseline.
Objective	The result the project aims to achieve and the expected timeline.
Current result	The most recent measured result, if implementation or adoption has already begun.
Period	Measurement period, reporting cycle, and expected timeline for impact.
Population or context	Target population, service, care pathway, team, organization, region, system, or group of digital users.
Data source	Source system, dashboard, audit, administrative data, survey, EHR, platform logs, registry, or evaluation method.
Equity stratification	Breakdown by relevant subgroup, geographic area, language, socioeconomic status, accessibility, digital access, population, or context.
Accountable	Person, team, organization, or governance body responsible for measurement and monitoring.

Recommended KPI families

FAMILY OF KEY PERFORMANCE INDICATOR	EXAMPLES OF INDICATORS
Value of digital transformation	Improved quality, improved access, improved patient/user experience, efficiency gains, team capacity for action, organizational value
Coordination and Care Pathways	Implementation of care pathways, reduction in transfers, continuity, visibility of care pathways, clarity of care pathways, implementation of the care/service plan, speed of follow-up
Access, equity, telehealth and virtual services	Wait times, digital reach, adoption of telehealth, access for disadvantaged groups, digital inclusion, language availability, reduction of barriers
Patient and family engagement	Measures and timelines related to patient engagement
Interoperability and integration	Connected systems, successful data exchange, reduction of duplication, availability of integration, interface errors, workflow integration
Data quality, security, and governance	Data completeness, data accuracy, access controls, privacy incidents, security events, governance measures, audit findings
Team adoption and workflow	active users, adoption rate, training completed, time saved, administrative burden, workload, collaboration, satisfaction
Efficiency and utilization of resources	capacity, productivity, duplication avoided, costs avoided, resource utilization, throughput, value-to-resource ratio
Implementation and sustainability	milestones achieved, mitigated risks, support tickets, maintenance cycle, governance reviews, sustainable use, funding continuity
Organizational and on the system	coordination, integration, reduction of gaps, reduction of duplication, overall performance, impact on the population or at the regional level
Transferability and scalability	sites deployed, deployment conditions met, replication stages, adaptation decisions, preparation for scaling, sustainability of rollout

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6. Innovation Award – Logistics and Supply Chain

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) that links logistics and procurement transformation to healthcare value, resource availability, patient safety, access to care, continuity, efficiency, resilience, team engagement, and transferability. The table must demonstrate how outcomes are measured across care pathways, organizational processes, and supply chain performance.

Expected fields (if possible) for the key performance indicator table

FIELD	DESCRIPTION
Key Performance Indicator Family	Safety, access, continuity, resource availability, resilience, efficiency, team engagement, sustainability, scalability, etc.
Indicator	Specific metric used to evaluate logistics, procurement, supply chain performance, value, impact, or transferability.
Reference	Previous situation, point of comparison, current result, or justified baseline assumption.
Objective	The result the project aims to achieve and the expected timeline.
Current result	The most recent measured result, if implementation has already begun.
Period	Measurement period, reporting cycle, duration of implementation, and expected timeline for impact.
Population or context	Target users, service, care pathway, product category, team, organization, region, network, or supply chain segment.
Data source	Source system, procurement system, inventory system, logistics dashboard, audit, survey, financial data, administrative data, or evaluation method.
Equity stratification	Relevant subgroup, geographic area, service, vulnerability, access, product category, organization, region, or sustainability breakdown.
Responsible	Person, team, organization, or governance body responsible for measurement and monitoring.

Recommended families of key performance indicators (KPIs)

KEY PERFORMANCE INDICATOR FAMILY	EXAMPLES OF INDICATORS
Availability and continuity of resources	stockouts, availability of essential supplies, right product/right place/right time, continuity of care, service disruption avoided
Access, Safety, and Quality of Care	wait times, access to care, safety-related events, product reliability, quality-related incidents, continuity of care pathways, patient safety
Patient and family engagement	Metrics and timelines related to patient engagement
Supply chain resilience	Supplier risk, delivery times, activation of emergency plans, time to restore critical supplies, vulnerability reduction, service continuity
Process and operational efficiency	cycle time, productivity, reduction of duplication, reduction of administrative burden, throughput, workflow reliability, agility
Financial and resource performance	cost optimization, waste reduction, resource utilization, productivity gains, value-to-resource ratio, business model sustainability
Team engagement and learning	team participation, training completion, improvement initiatives, sharing of best practices, engagement, recognition, employee well-being
Collaboration and governance	partner participation, governance meetings, shared decision-making, supplier/distributor coordination, information-sharing mechanisms
Social Responsibility and Sustainability	equity measures, vulnerable populations served, responsible procurement, environmental impact, waste reduction, sustainable sourcing
Transferability and Influence	replication sites, transfer conditions met, lessons shared, publications, professional forums, adoption of best practices, standardization efforts

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7. Innovation Award – High Value-Added Health Technology

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) that links real-world deployment, clinical or functional impact, user and family experience, professional work, safety, value, and scalability. The table must clearly indicate what is being measured, over what time period, and how the data will be used to make decisions regarding adoption, sustainability, or scalability.

Expected fields (if possible) for the key performance indicators table

FIELD	DESCRIPTION
Category of Key Performance Indicators	Clinical, functional, experience, professional work, journey, security, value, adoption, scalability, etc.
Metric	Specific metric used to track the impact of the technology or infrastructure.
Reference	Starting point before or at the beginning of use.
Objective	The result the project aims to achieve.
Current result	The most recent measured result, if available.
Period	Measurement period, reporting cycle, and expected timeframe for impact.
Population or context	Target population, unit, site, household, community, hospital, care pathway, region, or other context.
Data source	Data from a device, clinical record, survey, registry, dashboard, audit, operational system, or partner report.
Equity stratification	Relevant subgroup, geographic area, language, accessibility needs, socioeconomic status, or other equity-related breakdown.
Responsible party	Person, team, partner, or organization responsible for the measure and for monitoring the measures.
Use for learning purposes	How the indicator will be used to make decisions regarding adjustment, adoption, sustainability, or scaling up.
Notes and limitations	Known limitations of the data, cautions regarding its interpretation, or dependencies.

Recommended KPI families

KPI FAMILY	EXAMPLES OF INDICATORS
Clinical Outcomes	Complications, events, stability, rehospitalizations, avoided visits, indicators specific to a disease or medical condition
Functional outcomes	Independence, mobility, abilities, compensation, activities of daily living, functional gains.
Quality of life and experience	PROM, PREM, satisfaction, trust, lived experience, perceived quality of life
Patient and family involvement	Measures of patient involvement and timeframes.
Autonomy and self-determination	Choice, capacity to act, empowerment, participation, autonomy, control over one's healthcare journey or life.
Care pathways and trajectories	Service interruptions, continuity, transitions, follow-up, delays, avoidable steps, gaps in care.
Professional Work	Time savings, reduced workload, decision support, coordination, team satisfaction, workload.
Complexity and real-world integration	Deployment contexts, case variability, implementation constraints, robustness, alignment with workflow.
Security and ethics	Incident rates, risk controls, regulatory compliance, acceptability, privacy, security, confidentiality.
Resource utilization and economic value	Length of stay, avoided costs, efficiency gains, resource allocation, maintenance costs, budgetary impact.
Adoption and usage	Pilot sites, active users, adoption rate, duration of use, usage rate, retention, training completion.
Population impact and equity	People reached, regional impact, equitable access, underserved populations, improvements in accessibility.
Measurement and learning	Defined indicators, monitoring frequency, before-and-after comparison, dashboards, documented lessons learned.
Transferability and scaling	Transferable contexts, constraints, interest from other sectors, deployment across multiple sites, replicability.
Sustainability	Sustainable use, operational model, funding, maintenance, governance, adoption by other organizations.

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8. Innovation Award – Translational Research

Table of Required Key Performance Indicators (KPIs)

Applicants must include a Key Performance Indicators (KPI) table that links progress in knowledge transfer, implementation, value creation, adoption, and system impact. The table must demonstrate how knowledge is applied, how value is measured, and how evidence is used to drive improvement, transfer, and sustainable transformation.

Expected fields (if possible) for the Key Performance Indicators table

FIELD	DESCRIPTION
Indicator Category	Outcomes, experience, access, implementation, adoption, equity, effectiveness, system impact, transferability, etc.
Indicator	Specific measure used to assess progress in transposition, value, adoption, implementation, or system impact.
Reference	Baseline, comparator, current outcome, or justified initial assumption.
Objective	Result the project aims to achieve and the expected timeline.
Current result	The most recent measured result, if implementation or adoption has already begun.
Period	Measurement period, reporting cycle, duration of implementation, and expected timeline for impact.
Population or context	Target population, service, care pathway, organization, professional group, community, or systemic context.
Data source	Source system, research dataset, registry, audit, dashboard, survey, administrative data, or evaluation method.
Equity stratification	Relevant breakdown by subgroup, geographic area, language, socioeconomic status, culture, accessibility, population, or context.
Accountable	Person, team, organization, or governing body responsible for measurement and monitoring.

Recommended families of key performance indicators (KPIs)

FAMILY OF KEY PERFORMANCE INDICATORS	EXAMPLES OF INDICATORS
Progress in knowledge translation	key steps in knowledge translation, validation phase, readiness for implementation, feedback from practice to research, evidence for decision-making
Scientific quality and validation	protocol completion, validation results, data quality, reproducibility, peer review, methodological steps
Access and continuity	wait times, time to access innovation, finalization of referral, access to services, continuity, smoothness of the pathway, clarity of referral
Outcomes and experience	clinical outcomes, functional outcomes, psychosocial outcomes, patient-reported outcome measures (PROMs), patient-reported experience measures (PREMs), quality of life, well-being, autonomy
Patient and family involvement	Measures of patient involvement and timeframes
Adoption of practices and pathways	Active sites, adoption by healthcare professionals, integration into workflow, changes to care pathways, use in decision-making, implemented practices
Team experience and implementation conditions	Workload, collaboration, training, satisfaction, barriers to implementation, readiness, support needs
Effectiveness and resource utilization	resource utilization, avoided or optimized costs, productivity, efficiency gains, value-to-resource ratio
Equity, ethics, and accountability	scope of equity, impact on subgroups, ethical compliance, confidentiality controls, accountability measures, inclusion measures
Organizational and systemic	coordination, integration, reduction of gaps, reduction of duplication, overall performance, impact on the population or at the regional level
Transferability and sustainability	deployment conditions met, replication sites, adaptation decisions, sustainable use, funding, governance, readiness for scaling up

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9. Innovation Award – Next Generation and Emerging Talent

Table of Required Key Performance Indicators (KPIs)

Applicants must provide a table of key performance indicators (KPIs) that links the project to a measurable value. Indicators may be preliminary, projected, or confirmed depending on the category, but the measurement logic must be explicit.

Expected fields (if possible) for the Key Performance Indicators (KPI) table

FIELD	DESCRIPTION
Indicator Name	Name of the indicator in plain language.
Value dimension	Outcome, experience, access, learning, workforce, effectiveness, equity, or contribution to the system.
Reference	Current situation prior to the launch of the initiative or the best available comparator.
Objective	Expected or achieved level of improvement.
Schedule	Measurement period and reporting frequency.
Population or group	Learners, users, families, professionals, teams, service areas, communities, or relevant organizations.
Data source	Survey, administrative data, learner assessments, HR data, operational dashboard, file review, or qualitative data.
Responsible party	Person, team, institution, or partner responsible for data collection and interpretation.
Equity perspective	Indicates whether results are disaggregated by target population, geographic area, learner group, or vulnerability.
Use of Results	How the key performance indicator (KPI) informs decisions regarding learning, adaptation, dissemination, or sustainability.

Recommended Key Performance Indicator (KPI) Families

KPI FAMILY	EXAMPLES OF INDICATORS
Outcomes for individuals	Clinical, functional, psychosocial, quality of life, well-being, autonomy, or safety indicators, as applicable.
Experience and access	PREM, learner/user experience, wait times, continuity, smoothness of the care pathway, clarity of guidance, and access to support.
Team experience and working conditions	Workload, work organization, interprofessional collaboration, satisfaction, commitment, and retention.
Educational model and transition to practice	Internship, mentoring, integration, readiness, quality of supervision, confidence, and measures for transition to practice.
Skill development	Skill development, complexity skills, collaboration skills, digital/data/AI skills as applicable, and evidence of readiness for practice.
Attractiveness and Retention	Interest in career paths, recruitment pipeline, onboarding of new professionals, sense of belonging, intention to stay, or early retention.
Efficiency and Resource Utilization	Use of human, material, or financial resources; avoided costs; optimized resources; productivity; and value-to-resource ratio.
Organizational and systemic impact	Coordination, integration, reduction of gaps or duplication, overall performance, impact on the population or at the regional level, where applicable.
Equity and Inclusion	Reach among underrepresented learners, vulnerable users, rural or underserved communities, accessibility, and inclusive participation.
Patient and family involvement	Metrics and timelines related to patient engagement

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10. Innovation Award – Adaptive Transformation of Workforce, Skills and Practices

Required Key Performance Indicators (KPI) Table

Applicants must include a table of key performance indicators (KPIs) that links workforce transformation, access, team experience, resource utilization, practice change, and system value. The table must clearly indicate what is being measured, over what time period, and how the data will inform decisions regarding implementation, adoption, sustainability, or scaling up.

Expected fields (if possible) for the key performance indicators table

FIELD	DESCRIPTION
Indicator Category	Access, quality, workforce transformation, team experience, effectiveness, retention, equity, sustainability, etc.
Indicator	Specific measure used to assess workforce transformation, access, value, or implementation progress.
Reference	Previous situation, point of comparison, current result, or justified baseline assumption.
Objective	The result the project aims to achieve and the expected timeline.
Current result	The most recent measured result, if implementation has already begun.
Period	Measurement period, reporting cycle, and planned timeline for impact.
Population or context	Profession, team, department, organization, care pathway, region, or target user population.
Data source	Source system, HR data, survey, audit, registry, administrative data, planning system, or evaluation method.
Equity stratification	Relevant subgroup, geographic area, language, profession, context, disadvantaged population, or distribution of access.
Responsible party	Person, team, organization, or governing body responsible for measurement and monitoring.

Recommended families of key performance indicators (KPIs)

KEY PERFORMANCE INDICATOR FAMILY	EXAMPLES OF INDICATORS
Workforce issues and root causes	pressure from unfilled positions, workload, bottlenecks, unmet demand, role-related constraints, service gaps, root cause findings
Skills and role transformation	skills acquired, roles redefined, scope changes implemented, training completed, confidence, adoption of practices
Access and continuity	wait times, turnaround times, service capacity, completion of referrals, continuity, clarity of referrals, avoidable transfers
Outcomes and experience	clinical outcomes, functional outcomes, psychosocial outcomes, PROMs, PREMs, quality of life, well-being, independence
Patient and family involvement	Measures of patient engagement and timeframes
Team experience and working conditions	Workload, collaboration, satisfaction, commitment, retention, inclusion, clarity of roles, measures of working conditions
Administrative burden and efficiency	time spent on documentation, redundant tasks, reduction of low-value-added tasks, productivity, resource utilization, cost optimization, value-to-resource ratio
Implementation and engagement	Milestones achieved, teams trained, adoption, governance meetings, mitigated risks, ownership measures, change readiness measures
Organizational and systemic impact	coordination, integration, reduction of gaps, reduction of duplication, overall performance, impact on the population or at the regional level
Transferability and sustainability	sites adopting the model, deployment conditions met, model adaptations, sustainable use, learning cycles, continuity of funding or governance

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11. Innovation Award – International Impact and Value Transfer

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) that establishes a link between the value created in Quebec and the value replicated in host contexts. The table must clearly indicate what has already been demonstrated, where it has been replicated, how the results are compared, and how the lessons learned facilitate transfer, adaptation, and scaling up.

Expected fields (if possible) for the Key Performance Indicators table

FIELD	DESCRIPTION
Key Performance Indicator Family	Quebec value, implementation in the host context, replicability, comparability, adaptation, governance, learning, scaling up, etc.
Indicator	Specific measure used to assess value, transfer, implementation, impact, or comparability.
Quebec reference or comparator	Reference, comparator, or baseline prior to implementation in the original context.
Outcome in Quebec	Result obtained in Quebec, including the relevant time period and population, when this information is available.
Reference or comparator in the host context	The reference, comparator, or justified hypothesis in the host context.
Result in the host context	The result obtained outside Quebec, including the country, province, system, site, and time period, when this information is available.
Target	The target result for the host context or the next step on the scale.
Period	Measurement period, reporting cycle, duration of implementation, and projected timeline for impact.
Population or context	Target population, organization, region, care pathway, system, country, province, or site.
Data source	Source system, dashboard, registry, audit, evaluation report, administrative data, survey, or published data.
Equity stratification	Relevant subgroup, geographic, linguistic, cultural, socioeconomic, accessibility, population, or system-related distribution.
Responsible party	Person, team, organization, or governance body responsible for measurement and monitoring.

Recommended families of key performance indicators (KPIs)

FAMILY OF KEY PERFORMANCE INDICATORS	EXAMPLES OF INDICATORS
Quebec VBHC Value	clinical outcomes, patient experience, efficiency, maturity, integration, sustainable outcomes, economic value
Implementation outside Quebec	countries, provinces, systems, active sites, deployment level, duration, operational users, progress toward full deployment
Value replicated in the host context	host results, access gains, experience improvements, efficiency gains, sustainable performance, gap analysis
Comparability and rigor	common indicators, adjusted comparisons, data completeness, transparent methods, harmonization of benchmarks, quality of evaluation
Transferable model	documented invariant components, defined adaptable components, reproducibility, coverage of success criteria, deployment conditions met
Cross-system complexity	identified regulatory/cultural/operational differences, mitigation measures implemented, performance stability across different contexts, risk register closure rate
Adaptation and adoption	implemented adaptations, preserved core components, local autonomy, adoption by professionals, acceptance by users, integration into routine practice
Patient and family involvement	Patient engagement measures and timelines
Governance and partnerships	Co-creation activities, partner commitments, governance meetings, shared decision-making, coordination efforts, resolution of escalations
Data, technology, AI, and learning	Dashboard usage, monitoring frequency, data quality, model improvement, learning loop actions, cross-jurisdictional insights
Impact on the host system	access, quality of care, efficiency, organizational effects, practice transformation, impact at the population or regional level
Scale and sustainability	Sustainable use, additional sites, economic viability, deployment conditions met, documented success factors, readiness for dissemination
Leadership and global contribution	publications, guidelines, standards, policy influence, benchmark status, contribution to best practices, Quebec's influence

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12. Innovation Award – Global Solutions, Local Implementation

Table of Required Key Performance Indicators (KPIs)

Applicants must include a table of key performance indicators (KPIs) linking proven international value to expected local value. This table must clearly indicate what has already been demonstrated, what is expected at the local level, and how progress will be measured.

Expected fields (if possible) for the Key Performance Indicators (KPI) table

FIELD	DESCRIPTION
Category of indicators	Access, outcomes, experience, effectiveness, equity, local adoption, partnership, sustainability, etc.
Indicator	Specific measure used to assess the expected international value or local impact.
Reference to the original context	The prior state or baseline in the context where the solution has already demonstrated its value.
Outcome in the original context	The result already achieved internationally, including the time period and population involved, when this information is available.
Reference or assumption for Quebec/the local context	Current local reference, surrogate indicator, estimate, or justified assumption for the host context.
Objective	Outcome that the implementation aims to achieve at the local level.
Current result	Latest measured result if implementation has already begun.
Period	Measurement period, reporting cycle, and planned timeline for impact.
Population or context	Target population, region, organization, care pathway, or service delivery setting.
Data source	Source system, survey, registry, administrative dataset, audit, or evaluation method.
Equity stratification	Breakdown by relevant subgroup, language, geographic area, socioeconomic status, culture, or accessibility.
Accountable	Person, team, partner, or organization responsible for measuring and reporting results.
Notes and limitations	Known data limitations, cautions regarding interpretation, or dependencies.

Recommended KPI families

KPI FAMILY	EXAMPLES OF INDICATORS
Global Value	Improved results, improved experience, increased efficiency, avoided costs, adoption rate, reproducibility across sites.
Local relevance	Priority needs addressed, gaps filled, issues validated by stakeholders, complementarity with existing services.
Implementation progress	Milestones achieved, pilot sites activated, users trained, workflow adoption, time to first local use.
Access and continuity	Wait times, completion of referral, time to service initiation, transfers avoided, continuity of follow-up.
Outcomes and experience	Clinical outcomes, functional outcomes, PROMs, PREMs, safety events, user confidence, caregiver experience.
Patient and family engagement	Measures of patient engagement and wait times.
Efficiency and resource utilization	Staff time, avoided duplication, length of stay, avoidable visits, cost per outcome, productivity.
Equity and accessibility	Languages available, access for disadvantaged groups, geographic coverage, reduction of barriers, culturally sensitive service delivery.
Partnership and local roots	Partner involvement, representation on governing bodies, co-design activities, milestones achieved by partners, and commitments regarding local resources.
Adaptation and resilience	Adaptation decisions made, value-preserving elements maintained, risks mitigated, performance post-localization.
Data, technology and AI	Data completeness, interoperability, dashboard usage, model monitoring, privacy controls, responsible AI checks.
Scalability and sustainability	Deployment readiness, expansion sites, funding continuity, operational model maturity, training capacity.
Knowledge transfer	Shared learning outcomes, dissemination activities, reciprocal exchanges, finalization of the implementation guide.

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