Future Funding Grading Rubric

This scale is designed to help assess how well a project aligns with the goals of regional integration, population needs, and the Models of Integrated Care under the RIF (Regional Integration Fund) framework.

Grading Scale (0–5) – General Interpretation

Score	*Narrative Description*
0	Does not meet the criterion at all. No evidence or relevance.
1	Minimal alignment. Very limited or vague evidence.
2	Some alignment, but lacks clarity, depth, or supporting evidence.
3	Moderate alignment. Clear intent and partial evidence, but gaps remain.
4	Strong alignment. Well-evidenced and mostly complete.
5	Fully meets the criterion. Comprehensive, clear, and compelling evidence provided.

Criteria-Based Grading Narratives

1. Regional Integrated Health and Social Care
    a. 0: No integration or collaboration evident.
    b. 3: Some joint working or shared pathways, but not fully integrated.
    c. 5: Demonstrates a seamless, person-centred service across health and social care.

2. Support for Priority Population Groups
    a. 0: No reference to priority groups.
    b. 3: Mentions priority groups but lacks targeted actions.
    c. 5: Clearly designed to address specific needs of priority groups as per RIF and Area Plan.

3. Alignment with Population Needs Assessments and Market Stability Reports
    a. 0: No link to assessments or Area Plan.
    b. 3: General alignment, but lacks direct evidence or citations.

c. 5: Directly responds to identified needs with clear references to assessments and plans.

4. Contribution to One of the Six Models of Integrated Care
    a. 0: No connection to any model.
    b. 3: Indirect or partial contribution.
    c. 5: Strong, direct contribution to a specific model with clear rationale.

5. Preventative Measures and Early Intervention
    a. 0: No preventative focus.
    b. 3: Some preventative elements, but not central to the project.
    c. 5: Prevention and early intervention are core components, clearly articulated.

6. Identifiable Components Relevant to a Model of Integrated Care
    a. 0: No identifiable components.
    b. 3: Some relevant elements, but not clearly linked to a model.
    c. 5: Key components are clearly aligned with and support a Model of Care.

7. Effectiveness of Previously Funded Projects (ICF/TF)
    a. 0: No evidence of effectiveness.
    b. 3: Some anecdotal or partial evidence.
    c. 5: Strong evidence (e.g., evaluations, outcomes) and clear plans for mainstreaming.

8. Contribution to Models of Care and Embedding Phase (Established Projects)
    a. 0: No contribution or embedding plan.
    b. 3: Some contribution, but embedding is unclear or underdeveloped.
    c. 5: Clear pathway to embedding and strong alignment with Models of Care.

9. Commitment to Match Resources and Sustainability
    a. 0: No mention of sustainability or match funding.
    b. 3: Some indication but lacks detail or commitment.
    c. 5: Clear, committed plan for match resources and long-term sustainability.

10. Contribution to System Change
    a. 0: No potential for system change.
    b. 3: Some innovation or change but limited in scope.
    c. 5: Strong potential to drive or support systemic transformation.
11. Project Deliverables Aligned with RIF Outcomes
    a. 0: No deliverables or unclear outcomes.
    b. 3: Deliverables identified but weakly linked to RIF outcomes.

    c. 5: Clear, measurable deliverables that align directly with RIF high-level outcomes.
12. Line of Sight to Model of Care (New Projects)
    a. 0: No connection to a Model of Care.
    b. 3: General alignment but lacks clarity or specificity.
    c. 5: Clear, strategic alignment with a Model of Care and defined objectives.

For reference, here's the full text from WG:

POPULATION LEVEL

1. Will the project deliver regional integrated health and social care, creating an effective and seamless service experience?
2. Will the project support delivery of outcomes for priority population groups as set out in RIF guidance and Regional Partnership Board's Area Plan?
3. Has the project been designed to meet an identified need as a result of the conclusions from the Population Needs Assessments and Market Stability Reports and included in the region's Area Plan?

OPERATIONAL LEVEL

4. Will the successful delivery of the project contribute to the overall delivery of one of the six Models of Integrated Care?
5. Is the project delivering preventative measures by providing early intervention/deescalation solutions across one or more of the Models of Integrated Care?
6. Are there identifiable components from the project that are important to a Model of Integrated Care?

CONTINUATION OF FUNDING LEVEL

7. If it is an established project previously funded under the ICF/TF - is there clear evidence that the project is effective? If effective what plans have been or will be made to mainstreaming the activity?
8. If it is an established project previously funded under the ICF/TF – will it contribute towards the overall delivery of the Models of Care? Will it move to the embedding phase as a result?
9. Is there clear commitment to securing match resources to support the effective embedding and mainstreaming of this project to ensure long term sustainability?

ADDITIONAL QUESTIONS (IF NOT CONSIDERED THROUGH PREVIOUS QUESTIONS)

10. Will the successful delivery of the project contribute towards creating system change?
11. Have project deliverables been identified that are likely to meet the high-level outcomes of the RIF?
12. If it is a new project – is there a clear line of sight between the project objectives and the overall delivery of an associated Model of Care?