**SCHEME C: Application form**

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| **Application form /innovation Awards / Maximum funds available £30,000** | | | |
| Please refer to the Guidance notes before completing the form | | | |
| **Main Applicant** | **Title** | **Full Name** | |
|  |  | |
| **Preferred contact details** | **Phone number** | **Correspondence Address** | **Email** |
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| **CSP member No:** *If applicable* |  | | |
| **HCPC registration No:** | **Number** | **Start Date** | **Expiry Date** |
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| **Qualifications with dates & Education provider** | **Date** | **Qualification** | **Education Provider** |
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| *Please reproduce this section for any co-applicants* | | | |
| **Co-applicant 1** | **Title** | **Full Name** | |
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| **Preferred contact details** | **Phone number** | **Correspondence Address** | **Email** |
|  |  |  |
| **CSP member No:** *If applicable* |  | | |
| **HCPC registration No:** | **Number** | **Start Date** | **Expiry Date** |
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| **Qualifications with dates:** | **Date** | **Qualification** | |
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| **Co-applicant 2** | **Title** | **Full Name** | |
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| **Preferred contact details** | **Phone number** | **Correspondence Address** | **Email** |
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| **CSP member No:** *If applicable* |  | | |
| **HCPC registration No:** | **Number** | **Start Date** | **Expiry Date** |
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| **Qualifications with dates:** | **Date** | **Qualification** | |
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**A PROGRAMME OF INNOVATION / Notes:**

There is no single universally accepted definition of Innovation, and so for the purposes of this award, we are using two complementary definitions of the word:

1. “An idea, service or product, new to the *NHS* which significantly improves the quality of health and care wherever it is applied.” (Reference below)

* 1. Please substitute your own context/setting for the term ‘NHS’
  2. Reference Document: ‘Innovation, Health and Wealth, Accelerating Adoption and Diffusion in the NHS’; Authored by: Department of Health, NHS Improvement and Efficiency Directorate, Innovation and Service Improvement; 5 December 2011. <file:///C:/Users/44773/OneDrive/Documents/HEE%20GLO%20Volunteer%20work/Innovation%20Health%20and%20Wealth%202011.pdf>

2. “The Introduction of something new and valuable.”

* 1. Reference document: ‘What is Innovation?’ by Niklaus Gerber, 20 August 2018 <https://medium.com/@niklausgerber/exploring-innovation-a-beginners-guide-into-different-models-terminologies-and-methodologies-6f20c20fcee4>

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| 1. **Title of Innovation Programme** |  | |
| 1. **Total amount of funding requested** |  | |
| 1. **Justification for how this Innovation Programme will help the PPEF achieve its main objective –** | | |
|  | | |
| 1. **Summary details of the proposed Innovation Programme – please also provide a detailed proposal, including references; using the headings below, as well as others that are appropriate for your planned programme of work** | | |
| 1. **Purpose of the proposed Innovation Programme** |  | |
| 1. **Background to the proposed Innovation Programme** |  | |
| 1. **Expected start and end dates** | **Start date** | **Expiry Date** |
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| 1. **Governance process and oversight** |  | |
| 1. **Who is the Innovation Programme for?** |  | |
| 1. **Where will the Innovation Programme be carried out?** |  | |

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| 1. **How will you evaluate the impact of your Innovation Programme?** |
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| 1. **How, and with whom, do you plan to share the findings from the evaluation of the Programme?** |
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| 1. **What do you plan to do next, in this field, following completion of this Innovation programme** |
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| 1. **How do you plan to involve patients, carers, and the public (and other stakeholders as appropriate) in this programme of work?** |
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| **13. Timeframe/milestones and costs.** Please provide a separate summary spreadsheet or Gantt chart which gives an overview of your planned Innovation Programme with timeframes, milestones, and costs. Please include the following headings, as well as any others that are appropriate for your programme of work.   * Cash Flow – indicate how costs will be spread over the project on a quarterly basis   + Staffing (include evidence of relevant pay-scales/costs, showing how any costs have been determined)   + Equipment (with evidence of costs)   + Consumables (with evidence of how any costs have been determined)   + Travel and Subsistence (with evidence of how any costs have been determined)   + Analysis of data (with evidence of how any costs have been determined)   + Dissemination of findings (with evidence of how any costs have been determined) |
| **14. Declarations:** Please provide signed evidence from two (2) senior persons in the organisation who will be overseeing the Research Programme and managing its finances.   1. One letter should confirm details of the finance provided in Q13, and 2. The second letter should state that the organisation is committed to supporting this whole programme of work.   ***Note:*** This is the organisation to whom the funds will be paid, in a staged way – according to the timeframes/cost information provided in Q13; and subject to receipt of satisfactory update reports along the way. The timing of these reports will be agreed with successful applicant(s). |

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| **Brief Summary Curriculum Vitae of Lead Applicant and up to four (4) Co-Applicants**  (Please use one sheet each – reproduce/copy template as needed) | | |
| **Full Name** | |  |
| **Formal Educational Qualifications**  *(Please copy from earlier section of this form)* | | **Title of Qualification** |
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| **Post-Registration studies relevant to the application** | |  |
| **Please list current post, and all those held since 2017 i.e. during the last 5 years, with dates** | |  |
| **Please list publications since 2017 i.e. during the last 5 years, with full details** | |  |
| **Please list Conference participation i.e. platform presentations and Posters, since 2017 i.e. during the last 5 years, with full details** | |  |
| **Please briefly describe any other significant achievements during your career, which you feel are relevant to this application** | |  |
| * For Programmes which involve gathering research data - I agree to comply with the standards set out in the NHS Health Research Authority, see link below. <https://www.hra.nhs.uk/planning-and-improving-research/> * I agree to the PPEF holding my personal details in accordance with GDPR regulations. | | |
| **Date** |  | |
| **Full Name** |  | |
| **Signature** |  | |
| **Job role** |  | |
| **Name current Employer, if relevant** |  | |

**4. CHECKLIST for all applications:**

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|  | **Item** | **Completed** |
|  | 1. Read General Terms, Conditions and Guidance Notes for PPEF Silver Jubilee Award Applications |  |
|  | Completed General Section 1.0 – Details of Lead Applicant |  |
|  | Completed Templates for up to 4 Co-applicants |  |
|  | Completeda Summary Spreadsheet or Gantt Chart or something similar with Timelines, Milestones, Costs and Cash flow by quarter, as an additional paper(s) |  |
|  | Signed declarations on formal headed paper/email showing support from:   * 1. Two (2) senior members of the organisation overseeing the work and managing the finance, one of whom should have responsibility for finance e.g. a Finance Director or equivalent, as additional papers |  |
|  | Short summary Curriculum vitae of Lead Applicant and up to four (4) Co-applicants using the Template provided |  |