# Health Education England SW Simulation Network

## Simulation and TEL Project Application Form 2021

### Introduction

Health Education South West Simulation Network (HEESWSN) has been allocated funding for projects which will seek to develop multi-disciplinary education through the use of innovative educational technologies across the South West region. Such projects will usually be based around simulation-based education, but might also include e-learning programmes, virtual reality technologies and others.

Funding will usually be in the form of Fellowships for one year, but other projects will also be considered subject to the scoring criteria. Where projects propose to appoint simulation technical staff, priority will be given to projects that utilise Apprenticeship schemes, and which will deliver training pathways in line with the RSCiTech qualification (<https://sciencecouncil.org/scientists-science-technicians/which-professional-award-is-right-for-me/rscitech/>).

The projects must support the development and delivery of multi-professional educational projects and initiatives throughout the South West region within NHS providers, HEIs, social care or other healthcare settings. Any resources developed through these projects must be shared with other NHS providers, for instance using the iRIS platform. All proposed projects must align **with at least one of the 5 Simulation Network**

* **Multi-agency Simulation Activity**
* **Simulation Technicians**
* **Research**
* **Virtual Simulation, Digital Technologies and Innovation**
* **Standardised Patients.**

Project leads must be supported by an executive sponsor from their host organisation and will be expected to submit quarterly reports to HEESWSN. HEESWSN will support the project team with a dedicated mentor drawn from the Network, and the team will be encouraged to share their progress with the other successful project teams at Network meetings.

Project funding will incorporate funds to execute the project (such as a salary for the Fellowship position) and other costs that are deemed necessary. Purchase of simulation equipment will be not usually be funded, but applicants are welcome to incorporate requests for specific items of equipment within the overall bid.

HEESWSN will convene a Simulation Project Selection Committee who will be representative of the Network and will include members from a diverse range of backgrounds. The committee will be tasked with assessing bid applications and the final group of successful bids will be selected based on merit.

**Division and management of the funds**

The intention is to spend the funding supporting Trusts, NHS providers and other healthcare organisations in establishing educational projects with demonstrable human factors, patient safety and quality improvement benefits for multi-professional workers within their organisation and across the SW region, or supporting development of a safe and capable workforce, preventing ill health and supporting healthier lives. Furthermore, HEESW proposes that organisations explore the sustainability of these posts with the intention of permanently funding the role after the 12 month funded post ends.

Simulation Fellowship roles may be drawn from medicine, nursing or other healthcare professional backgrounds. Technician posts funded as part of this funding stream should be open to all eligible applicants and should be linked to Trust Apprenticeship Schemes where possible. Technician posts do not normally have to be filled by individuals with a clinical background, but the range of technician roles is wide and all suggested posts will be considered. Funding will be available for a maximum of £30,000 per project. Priority will be given to projects that target groups or organisations that have limited access to simulation-based education or other TEL interventions.

**Criteria and contractual obligations for bids**

Bidding organisations are obliged to provide suitable professional continuing support for a fellow, technician or other staff member employed as part of the project. It is imperative that there is time set aside that enables the fellow/technician to convene at least **weekly** with a project lead or mentor from their organisation. They should also be provided with appropriate resources to support the project – information and a proposed outline about these must be detailed in the bid.

HEESWSN will provide a named member of the Network who will be the liaison between the Network and each project, and who will provide external mentoring and guidance as well as receiving project reports and updates, as detailed below. We would anticipate that the Network Liaison would have contact with the fellow/technician and project lead on a monthly basis, with quarterly face-to-face meetings, and agreement to this is a fundamental requirement in order to receive funding.

The bid must include a detailed section describing how the fellow/technician and/or the project they undertake will improve the quality of patient services and enhance patient safety, and how this will be shared across the South West region through HEESWSN. All projects will be expected to develop multi-professional and multidisciplinary groups in their work, ensuring full inclusion of medics, nursing, AHPs and other organisation employees.

Full co-operation and participation is required from all organisations, fellows/technicians and mentors with the use of iRIS ([www.irishealthsim.com](http://www.irishealthsim.com/)). This is a web platform to developing, collaborating and sharing of simulation and education resources. All healthcare workers engaged in SBE in the South West region can have access to the system and this will be arranged for all successful applicants if they do not already have access. All scenarios and learning materials developed must be uploaded to the iRIS system for collective use where appropriate.

Whilst all fellows/technicians, project leads and other staff appointed through this funding stream will be employees of the bidding organisation and not of HEESW, it is a prerequisite of the bid that good communication is fostered and maintained with the Simulation Network and the Associate Deans for Simulation.

A detailed quarterly update is required from each project. This is essential to ensure a regular review with risks and issues at the end of each quarter is reported to HEESW via the Network Liaison. An end of project form detailing outcomes and benefits must be completed to demonstrate for value for investment.

Meetings of the HEESWSN will be held quarterly throughout the year, and attendance at these meetings is mandatory. Additional meetings will be organised to support development of the fellows/technicians and project leads within their roles, provide a forum for sharing practice and activity and offer educational development. Projects also undertake to present their project at the annual South West Simulation Network Conference, held in October of each year (next due to be held in October 2022).

A project lead and executive sponsor is a precondition for each bid. Assurances will be required from these individuals that the project has full support from the organisation and all parties involved from each division that the project crosses.

Finally, projects must be novel and not previously funded through the HEESWSN – the funding is strictly for one year only and will not be recurring.

**Guidance on completion of the application form:**

* Applications should clearly outline the planned Human Factors, Patient Safety and Quality Improvement objectives to be addressed through a simulation-based or other TEL educational intervention.
* Priority will be given to projects which include strategies to train disciplines or groups that do not currently have access to this type of training or are based in organisations without established access to this type of training.
* Priority will be given to projects which support clinical placements in health and social care organisations.
* Priority will be given to projects that take a multi-disciplinary approach to training.
* Priority will be given to projects that incorporate innovative technologies or other educational methods.
* Priority will be given to projects that will prevent ill health and support healthier lives.
* Priority will be given to projects that will enhance healthcare resources across the South West region.
* Priority will be given to projects that involve partnerships between organisations and between the NHS and private enterprise.

**Identified professional background of fellow/technician, project lead and other proposed project staff**

* Applications should clearly state the professional background of all staff who are to be involved in the project, or the proposed background of staff that are planned to be recruited. In situations where the fellow/technician has already been identified their details should be included in the application. In most situations it would be expected that the project lead will provide mentorship to the fellow/technician, but if this is not the case then proposals for how the fellow/technician will be mentored should be included. Applications where mentoring arrangements for the fellow/technician have already been identified will be favourably reviewed.

**Organisational resources to support fellowship**

* The bidding organisation should outline the resources available to support the project in terms of infrastructure, support staff including mentoring systems and access to equipment to implement the project. In situations where resources are not yet in place applications should be accompanied with a business plan outlining organisational funds identified and steps being taking to ensure resources will be in place.

**Support from the Organisation leadership**

* Applications should identify how the objectives of the project align with the strategic intent of the organisation. In addition, written support from leadership (an executive sponsor) of the bidding organisation must accompany the application along with information about how the post will be professionally supported.

**Level/grade of Fellow (eligibility for Simulation Fellowships)**

* Positions will be open to all health and care professionals across the Southwest. Please state clearly in the bid application the staff group, grade and/or level of the proposed Fellow. In cases where an organisation’s application for funding has identified the professional background of the proposed Simulation Fellow to be medical, only postgraduate trainees of the level ST4 and above will be considered. Where the organisation has proposed a Fellow from another professional background they must hold a band 6 post or above during the fellowship. SAS and non-training grade medical Fellows should be ST4 equivalent or higher. An exception may be made in situations where the proposal is to employ a simulation technician at a lower band than Band 6, but in this case it would be expected that the technician would not be the Project Lead. Where funding is not sufficient to employ the fellow on a full-time basis, there should be a plan for employing them in a less than full time capacity and making up their hours with clinical work or through other means.

**Scoring of applications**

Applications will be assessed with a score of 1-5 on each of the following criteria:

* Detailed description of objectives and scope of the proposed project
* Potential contribution of project to improve patient safety and outcome
* Potential for the project to increase opportunities for clinical placements in health and care settings
* Clear commitment to the multiprofessional nature of the project and its goals
* Information about how the project/intervention links with Trust and HEESWSN objectives/workstreams
* Potential for benefits to the wider healthcare network across the South West
* Comprehensive description of implementation methodology and timeline of the initiative
* Detailed information about the level of support and resources that will be in place in the organisation to ensure success of the project
* Details of the named mentor for the simulation fellow/technician, including their experience in simulation, human factors, quality improvement and patient safety activities
* Clear and detailed description of how monthly progress reviews will be carried out
* Evidence of support from leadership of proposed clinical implementation area (detailed letter of support to be included)
* Clear plans for the evaluation of impact identified
* Thorough plan for disseminating the results from the project described in detail

**Application process**

Proposals for consideration (including this form and supporting documents) should be sent by email to PenADAdmin.SW@hee.nhs.uk by 12 noon on Friday 30th July 2021. Scoring and evaluation will be completed during August and shortlisted applicants will be notified as soon as possible. Successful projects will receive their funding from HEE in before the end of 2021. Projects should be able to commence before the end of the 2021-22 financial year.

Proposals must be submitted using the pro-forma in this document and will be assessed using the criteria listed above. The decision to shortlist a project proposal will be based upon the quality and relevance of the submitted information on this form. Please complete HEE South West Project Initiation Document (page 5-8 Brief PID value less than £10,000 or Full PID for greater than £10,000, pages 5-15). HEESW PID **must** also be completed, and will form the basis of ongoing project management through HEESWSN if the project is successfully funded (PID Part 2 pages 12-14). In addition, please complete the additional application questions on page 15.

Requests for further information and any queries about the application process should be directed to the Associate Deans for Simulation – Wai-Yee Tse and Dan Freshwater-Turner (wai-yee.tse@nhs.net or dan.freshwater-turner@uhbw.nhs.uk)

Please complete the HEE South West Project Initiation Document and additional application questions (please note that the additional application questions should be completed for **both Brief or Full PIDS**) below:

### Health Education England South West Simulation Network Project Proposal Form 2021-22

**HEE South West Project Initiation Document**

**PART 1 – Initiation and Review - To be completed for Review *(And then updated during Project Delivery as necessary)***

***(Please refer to guidance document to aid completion)***

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| **Section 1 – Summary** |
| **Funding Year:** | 2021-22 | **Project Title:** | Hololens- Bringing simulation to all |
| **Funding Required from HEE:** | £9,650 | **Organisation to receive funds:** | GWH Swindon |
| **Total project value:** |  | **Other Funding Bodies:** |  | **Value:** |  |
| **NHS Priority:** | In hospital (inc. urgent & emergency care) | **Main staff group impacted:**  | Clinical | **Primary aim:** | Improve staff experience of providing care |
| **Start Date:** | Dependent on funding | **End Date:** | Select date | **Revised End Date:** | Select date |
| **Project Manager - Name and Title:** | Dr Chris Jacobs | **Email Address:** | Chris.jacobs@nhs.net |
| **Project Manager - Organisation:** | GWH Swindon | **Contact Number:** |  |
| **Provide a short summary for the use of these funds including the output:** | To fund the implementation and assessment of Microsoft augmented virtual reality device (HoloLens) in high fidelity simulation to a regional hospital simulation department. HoloLens is an augmented reality headset that can allow the user to interact with the simulation environment and participants that remain remote from the simulation suite. Time to introduce, experiment and evaluate would benefit from a funded project that creates sustainability with future deployment and can be effectively designed to be disseminated to regional simulation centres and beyond. |
| **Geographical Area Covered:** | [x]  HEE Region: South West [ ]  ICS: Please Select [ ]  Training Hub: Please Select [ ]  Other…***please overwrite***… |
| **HEE Star:** | Upskilling | **COVID-19 Related:** | Yes | **People Plan:** | 5. Growing and Training our Future Workforce |
| ***For ICS projects:* Is this project aligned to all ICS Diversity and Inclusion Plans?** | Yes |
| **Please provide, if appropriate, a short summary:** | Improving access to simulation |
| ***For HEE projects*: Is this project aligned to the HEE SW Diversity, Inclusion, & Participation Business Plan?** | Yes |
| **Please provide, if appropriate, a short summary:** |  |
| **Does this project contribute to widening participation in the healthcare workforce?** | Yes |
| **Please provide a short description:** | Improving access to simulation |
| **Is Expert by Experience (EBE) included within this project?** | No |
| **If yes, how? If not, please explain why?** |  |

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| ***PID Completed By: (Name, Email, Job Title & Organisation)*** | Dr Chris Jacobs chris.jacobs@nhs.net Research and Innovation Fellow GWH Swindon | **Date:** | 08/07/2021 |

*HEE SW PPMO Internal use only:*

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| **Date Received by HEE PPMO:** | Select date | **HEE REF number:** |  |
| **HEE SRO/PL/SRM/THB&DM:** |  | **HEE Programme/Priority/Theme:** |  |
| **Date Reviewed by HEE:** | Select date | **Review Outcome** | Please Select |

| **Section 2 – Briefly outline why this funding is required?** |
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| **Background / Need:** | Health Education England review entitled ‘preparing the healthcare workforce to deliver the digital future 2019 review’ was predicated on pre-suppositions. In particular, ‘There is remarkable potential for digital healthcare technologies to improve accuracy of diagnoses and treatments, the efficiency of care, and workflow for healthcare professionals, but implementation must only be carried out when there has been robust clinical validation.’ Technology enhanced learning (TEL) allows users to experience immersive simulation from various technological standpoints. For example, augmented technology in a HoloLens creates a mixed reality environment that will allow users to interact with both the real and the augmented. This is in contrast to a virtual reality environment that is entirely computer generated visual-audio experience. The HoloLens device (see image 1) uses LiDAR (Light Detection and Ranging) to map the room in three-dimensions (3D) and to constantly detect users finger and hand movements, enabling interaction with a host of supplementary functions (see image 2). The HoloLens provides a unique teaching tool that can bring students/staff situated remotely and be directly involved in simulation. They can see; first perspective view of the wearer in high definition (see image 1), others on Teams, clinical information, and Bluetooth linking to instruments of examination i.e. Bluetooth stethoscope. The HoloLens infra-red scanning function allows you to place any information (Observations, blood test results, X-rays etc..) anywhere in the room as augmented reality. This allows real-time interaction with the simulation and environment, whilst not needing to step on site (see image 2)Fig 2.Image 1- User wearing HoloLensProfessor Amir Sam acts as a patient for a HoloLens pilot teaching sessionImage 2- What the user see’sOur preliminary pilots utilising HoloLens have been successful and presented at 3 conferences in 2021 (ASME, RCP annual conference and USA). This showed high level of student satisfaction as brought a clinical scenario streamed real time and allowed them to interact with the HoloLens user and patient whilst they were remote as during COVID 19 restrictions. [Augmented reality medical student teaching within primary care | RCP Journals](https://www.rcpjournals.org/content/futurehosp/8/Suppl_1/15)With adoption of TEL there is now an increasing medical education drive to evaluate and quality assure. This foundation of practice requires employing simulation research methods to ensure validity to results and significance for others to review. Additionally, the project lead attends a national HoloLens educational group comprised of over 20 trusts, Health Education England and NHS digital. Projects are shared on this forum and anticipate presenting findings to national colleagues.The HoloLens has been demonstrated to be especially useful in a large number of clinical settings beyond simulation. For example, Intensive care unit- bringing the MDT round with only 1 clinician with the patient in a COVID setting, Accident and emergency resus- students experience real-world first hand clinical exposure without being present, Community care- bringing hospital colleagues virtually to a care home ward round.Additionally, there are several software packages that create a virtual simulated experience that will be explored as part of this bid (see image 3).NHS clinicians given access to online training for treating Covid-19  patientsImage 3 – GigXR software that creates an interactive simulation of patient’s with numerous acute illnesses. A deteriorating COVID-19 patient was made free during the pandemic and projects the patient on to a bed in 3D.This is truly ground breaking technology that is currently been utilised in various industries including health. It is key healthcare simulation plays a part in appraising and developing its potential place for future learners.Project proposers are aware these simulation experiences are not to replace the core onsite simulation. However, providing additional simulation utilising new technology enables levels of clinical exposure (from real environment to the virtual) that ultimately adds to the tapestry of experience that cements learning and clinical reasoning. |
| **Rationale:** | The simulation suite at GWH at inception did not anticipate future demand by many areas of clinical care. This is not a unique scenario, and many undergo expansion. Innovative TEL gives us an opportunity to broadcast simulation that is far greater than a non-interactive video, but via Microsoft teams a large number of students or clinical staff can participate and interact with those in the simulation suite. GWH has invested in the technology and agreed the information governance surrounding the use of HoloLens for teaching, making this bid ready to go live.Aims: We wish to triangulate several research methods in a mixed methods pilot to implement and assess HoloLens in simulation.Objectives: There will be an assessment of acceptability and feasibility for HoloLens integration to a simulation curriculum of; medical students from 3 universities, Foundation Doctors, and plan MDT simulation. Metrics will be developed and focus on several domains, including; human factors, MDT working, and perceived learning.Kolb experiential learning informs us that exposure to a clinical scenario and learning from this can occur in multi-modalities and in ways that we often layer learning. The advantages are clear to us, how this technology benefits the learner, however research methodology is important.This technology creates a number of research questions that need developed and explored:* Can we quantify the learnt experience?
* Does simulation exposure reduce future anxiety to first person simulation and hence, performance?
* How many participants can we have without diluting the experience?
* Could this work with POC simulation?
* How can this improve patient safety and outcome?

GWH simulation footprint is expanding, and we have published hundreds of abstracts in recent years in simulation. Having a funded project creates a springboard for bringing this together as a theme of research for future projects and cementing a research stream with longevity towards a larger corpus of work. We are experienced in innovating simulation at GWH with additional workforce of Clinical Teaching Fellows to support projects. A funded project would align closely with these goals and give Dr Jacobs and collaborators the opportunity to work towards creating a research department in the GWH simulation centre. His Master of Research dissertation (2021) was on simulation and validating gaming measures in the clinical simulation environment and brings research experience to ensure project to completion. He presented some of his work at HEESWSN conference Exeter 2019. These research skills would complement the additional supervision by Dr Natarajan on advanced simulation and the technical skills supported by our experienced simulation technician Dermot McCusker. Dr Jacobs holds an undergraduate education role at GWH in Research and Innovation, which supports this proposal in navigating the quality assurances and governance of implementing new technology.Dr Natarajan is a highly experienced anaesthetist and is our clinical lead to the simulation department. He holds numerous clinical and educational appointments and brings a wealth of knowledge in delivering effective simulation to multi-disciplinary participants and knowledge on human factors and clinical reasoning will establish a strong base for the team.Additional planned support from University of Belfast professor of Simulation, Gerry Gormley (chapter author of Healthcare simulation Research: a practical guide). This will provide the project with quarterly research supervision to ensure sound methodology is followed and advice on employing validated metrics to the more complex questions we intend to answer. |
| **Scope** (including benefits to the wider healthcare network across the South West) | Methodology-An exploratory mixed methods design implemented to meet the aims of the research proposal. Both quantitative and qualitative data will be collected and analysed in two phases (see GANTT chart). Mixed methods studies combine qualitative and quantitative models of research whereby the evidence achieved can be greater than that of a single model.Research protocol of; participants, setting (GWH), sampling will be written and submitted to Open Access Science Framework.Data collection of; demographics, measures, and open-ended survey questions.Existing validated measures;-AIEQ (adapted immersive experience questionnaire), developed by Dr Jacobs and based on existing literature of TEL and immersion.-AIMI (abridged intrinsic motivation inventory), developed by Dr Jacobs and utilises our internal motivational domains as a model of learning.Furthermore, the project will use a mini-delphi method to create a new measure focusing on human factors i.e., anxiety and performance. This will also be an opportunity for involvement of the full simulation team at GWH.Data analysis plan has been written in preparation of the above and thematic analysis will be undertaken of answered survey questions exploring utilisation of TEL and HoloLens in simulation. Final written report will be disseminated to our teaching staff at GWH and then to our regional colleagues. The main findings will be submitted for publication and at simulation conferences (with a view to provide a live performance). |
| Alignment to other strategies (including Information about how the project aligns with Trust and HEESWSN objectives (including the five HEESWSN workstreams): | This project focuses on the HEESWSN objectives of * Research
* Virtual Simulation, Digital Technologies and Innovation

We are planning a trust approved expansion to our Simulation department that will create a dedicated site for simulation education. Preliminary plans see this for early 2022 and will be align with the Trusts agenda in research development following NIHR sponsor site approval in 2021. Our Research and Development manager to GWH supports increasing our research and PI’s as GWH expands on our research commitment going forward. |

**For PIDS with a Total Value less than £10,000 please now complete Section 3.**

**For PIDS with a Total Value greater than £10,000 please now complete Sections 4-8**

| **Section 3 – \*\* Only Complete for PIDs with a Total Value of less than £10,000 \*\***  |
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| **High Level Costings Breakdown:** | **Milestones- Need to break costs in terms of timeline- See GANTT chart** | **Anticipated Cost** |
| Phase 1. Project Conception and Initiation. Includes omnidirectional microphone at £100 | £887.50 |
| Phase 2. Project scenarios and planning | £1,181.25 |
| Phase 3. Project launch and execution. Including 9 months of HoloLens events | £3,150 |
| Phase 4. Project performance analysis | £3,250 |
| Phase 5. Project close. Including conference travel expenses ~£100 | £1,181.25 |
|  |  |
| **TOTAL:** | **£9,650 Total** |
| **What will be measured or evidenced to demonstrate impact of this investment?** | Scenario creation and delivery of regular HoloLens simulation.Data collection that assesses- Human factors, technology acceptability and education.Participant educational satisfaction and learning.Overall, successfully introducing HoloLens simulation to a regular curriculum |
| **How will this project be evaluated to understand the benefits realised from the investment?** | Data analysis and dissemination of results to simulation centres via conferences/meetings and demonstration of the HoloLens to those interested. To create a reproducible model of delivery.  |

 **End of Part 1 (Brief PID)**

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| Section 4 – How and what will be measured to demonstrate benefit / impact? |
| *Please outline what SMART measures / KPIs you will use to monitor and assess the impact of this investment. (add additional rows if needed).* |
| Provide Information for PID to be approved: | Provide Initial Information – then refine during Delivery of Project: |
| Ref | **Beneficiary(s)**(Who will benefit from this project) | **Benefit Type**(How will people benefit from this project) | **Benefit Classification**  | **When do you expect to realise this benefit?** | **How will the anticipated benefit be measured?** | **What is the baseline for comparison?** | **What is the projected outcome / target?** |
| 1 |  |  | Please Select | Please Select |  |  |  |
| 2 |  |  | Please Select | Please Select |  |  |  |
| 3 |  |  | Please Select | Please Select |  |  |  |
| 4 |  |  | Please Select | Please Select |  |  |  |

| **Section 5 – If the project will deliver Training Modules (upskilling), please complete the table below:** |
| --- |
| Course / Module Title | Training Provider | Accreditation Status | Start Date | End Date | Total Cost | Number Plan | Number Completed |
|  |  | Choose an item. | Select date | Select date | £ |  |  |
|  |  | Choose an item. | Select date | Select date | £ |  |  |

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| **Section 6 – What is the Plan to deliver this funding (milestones)?** |
| ***Please list the milestones you plan to deliver with timescales and anticipated costs.******Please also note that evaluation is a mandatory final milestone.*** |
| **PLAN** | **ACTUAL** |
| **Milestones** | **Start Date** | **End Date** | **Anticipated Cost (£)** | **Expenditure (£)** | **Diff (£)** | **Forecast (£)** | **Status** |
|  |  | Select date | Select date | £ | £ | £ | £ | Not yet started |
|  |  | Select date | Select date | £ | £ | £ | £ | Not yet started |
|  |  | Select date | Select date | £ | £ | £ | £ | Not yet started |
|  |  | Select date | Select date | £ | £ | £ | £ | Not yet started |
|  | £ | £ | £ | £ |  |

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| **Section 7 - Project Evaluation – Dissemination – Sustainability** |
| **Description of how monthly progress review will be carried out** |  |
| **Provide a summary of the evaluation methodology that will be used to evaluate this project:** |  |
| **Will evaluation be internal or external?*(If over 100K, external evaluation required)*** | Please Select | **Name of external organisation conducting the evaluation:** |  |
| **Please provide details of how you will measure the impact:** |  |
| **How will the findings/successes/lessons learned from this project be shared?** |  |
| **How will the learning from this project / investment be continued over-time?(i.e. sustainable / business as usual / mainstream)** |  |

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| Section 8 – What are the identified Risks to the delivery of the milestones (section 6), and the potential disbenefits from this project / investment succeeding and how will these be mitigated? |

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| ***Definition: A risk is an event that has not yet occurred but will negatively impact delivery of the investment objectives.*** |
| **Ref** | **Risk Description** | **Date Identified** | **Severity** | **Likelihood** | **Total risk score****Severity x likelihood** | **Mitigating action** | **Risk Status** |
| ***1 (low) – 5 (high)*** |
| 1 |  | Select Date | Select Score | Select Score |  |  | Please select |
| 2 |  | Select Date | Select Score | Select Score |  |  | Please select |
| 3 |  | Select Date | Select Score | Select Score |  |  | Please select |

 **End of Part 1 (Full PID for larger investments)**

**PART 2 – Delivery - To be updated quarterly after PID Approval (During Project Delivery)**

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| Section 9 – Progress against the Project Plan  |

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| ***Please provide the spend (£) for this quarter and assign a confidence delivery status. Where ‘Off track’ or ‘Off track – intervention required’ is selected, an action plan must be provided to improve progress and ensure delivery of this investment*** |
| **Period Covered:** | Please select | **Spend to date:** | £ | **Confidence Delivery Status:** | Please select |
| **Please review the following sections and tick when completed:** | Section 4 – Benefits [ ]  | Section 5 – Upskilling [ ]  | Section 6 – Plan [ ]  | Section 7 – Evaluation [ ]  | Section 8 – Risk [ ]  |
| **Progress Update:*** What have you achieved in this period?
* What has gone well / not well?
* What is the impact?
* What are you looking to achieve next period?
 |  |
| **If ‘Off track’ Amber or Red, what SMART actions are required to improve progress and ensure delivery of this investment?****Please note that this MUST be completed if the project status is Red or Amber.**  |  | **Target Date** | Select date |
|  |  |  |  |
| **Name of Person Completing Update:** |  | **Role of Person Completing Update:** |  | **Completion Date** | Select date |

**PART 3 – Evaluation - To be completed after the Project Deliverables have been achieved.**

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| Section 10 – Evaluation Evidence Checklist |

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| **Please tick to confirm each of the following has been completed and provide the date it was submitted to HEE SW PPMO along with the Name of the document which includes each section.** |
|  | **Complete** | **Sent to PPMO** | **Document Name / Link** |
| **Has evidence of the evaluation including methodology, who completed, and data gathered been documented?** | [ ]  | Select date |  |
| **Has work been completed to map the impacts of this project to anticipated and achieved benefits?** | [ ]  | Select date |  |
| **Has work been completed to detail how this change will now be incorporated into Business as Usual?** | [ ]  | Select date |  |

*HEE SW PPMO Internal use only:*

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| **Date Evidence Received by HEE PPMO:** | Select date | **Evidence location(s):** |  |
| **Date Project Closed:** | Select date | **Closed by:** |  |

**Change Control Record**

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| **Change Control (*add additional rows as required*)** |
| **Section** | **What has been changed?** | **Date of change** | **Changemade by** | **HEE Project Lead Approval****(Date Approved)** |
|  |  | Select date |  |  |
|  |  | Select date |  |  |
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## Additional Application Questions:

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| Description of implementation methodology and timeline of the project | See GANTT Chart |
| Organisational resources to support project (Consider – mentoring arrangements, equipment, place of work, access to work computer) | GWH Simulation department and team.HoloLens equipmentResearch and Innovation approval |
| Brief outline of the support from the Organisation’s leadership and from the leadership of the proposed clinical implementation area (should include a letter of support from an Executive Sponsor) | This project aligns closely with our TEL vision and have invested in HoloLens to explore remote learning. Simulation department are supportive of this project and wish to contribute to the success of demonstrating novel and innovative opportunities of learning from simulation. |
| Outline of the chosen fellow, technician and/or other staff (Consider Level/grade, current role, background. Please provide details of their working week) | Please see our cover letter whereby we are proposing a standalone project. |
| Details of named mentor for the Fellow with a summary of their experience in simulation, quality improvement, human factors and patient safety |  |
| Agreement that training on the iRIS platform will take place within 1 month of fellow/technician commencing post | Agreed |
| Agreement that all documents, scenarios and training items used during the project will be placed on the iRIS platform | Agreed |
| Agreement that contact will take place with the HEESWSN Network Liaison at least monthly | Agreed |
| Agreement that quarterly progress reports will be filed with HEESWSN via the Network Liaison | Agreed |
| Agreement that the fellow/technician and/or project lead will attend quarterly Network Meetings and other meetings for funded projects where possible | We are keen to disseminate what we are learning in HoloLens augmented simulation. Implementation of new technology can benefit from practical advice should others seek to follow on from this project. |
| Agreement that the Fellow and Project lead will complete a detailed annual/end of project report and will present the project outcomes at the HEESWSN Simulation Network Conference (or other similar event) | This is an expected outcome by team |
| Cost of project (staffing costs, other costs, total costs) | Dr Jacobs Research and Innovation Fellow GWH ~0.5PA equivalent (~2 hours a week time). Post CCT General Practitioner and educator at GWH. Role PI. | £5,000 |
|  | Dermot McCusker Simulation Technician GWH~2 hours per week . Role collaborator. | £1,250 |
|  | Dr Natarajan Anaesthetist and Clinical Lead for Simulation GWH ~0.125PA equivalent (~1 hour a week time). Role collaborator | £2,500 |
|  | Prof Gerry Gormley, Professor of Simulation, External appointment. Quarterly research supervision. Role mentor. | £500 |
|  | Travel expenses as anticipate in-person conference attendance to demonstrate device | £300 |
|  | Omnidirectional microphone | £100 |
|  | Total | £9650 |

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| END OF APPLICATION |