

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). 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:

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)

Section 1 – Summary					
Funding Year:	2021-22	Project Title:	Professional Education Simulation Fellow (Non-Medic) to embed and integrate SBE and TEL into non-medic education and development to change the culture of SBE for sustainable education.		
Funding Required from HEE:	£20,000	Organisation to receive funds:	Gloucestershire Hospitals NHS Foundation Trust		
Total project value:	£41,204	Other Funding Bodies:	Gloucestershire Hospitals NHS Foundation Trust	Value:	£21,204
NHS Priority:	In hospital (inc. urgent & emergency care)	Main staff group impacted:	Multi-disciplinary Teams	Primary aim:	Improve patient experience
Start Date:	03/01/2022	End Date:	30/12/2022	Revised End Date:	Select date
Project Manager - Name and Title:	Maria Smith, Head of Professional Education Kate Williams, Professional Education Practitioner		Email Address:	Maria.smith12@nhs.net Kate.williams26@nhs.net	
Project Manager - Organisation:	Gloucestershire Hospitals NHS Foundation Trust		Contact Number:	0300 422 6225	
Provide a short summary for the use of these funds including the output:	To appoint a Professional Education Simulation Fellow (non-medic Band 6 AfC) fixed term for 12 months, to research into the benefits of Simulation Based Education (SBE) and Technology Enhanced Learning (TEL), to plan, deliver and evaluate the integration of SBE in all established non-medic education throughout				

		the Trust; from student clinicians, clinical inductions, Preceptorship programmes (NRNs,AHP's,Midwives), International Recruitment, HCSWs Care Certificate programme, in response to incidents involving non-medics to ward based practice development teaching. To work collaboratively towards a Quality Improvement project to increase and provide a more structured MDT approach to simulation based learning for HCSW, TNA's, NA's, Nurses, AHP's, Specialist Practitioners, Physicians Associates, and involving input from medics, ensuring that all learning objectives within SBE are accounted for. To promote a culture change to embracing SBE within non-medical education and MDT learning so that this will continue past the project period and become a sustainable education method.			
Geographical Area Covered:		<input checked="" type="checkbox"/> HEE Region: South West <input checked="" type="checkbox"/> ICS: Gloucestershire <input type="checkbox"/> Training Hub: Please Select <input type="checkbox"/> Other... <i>please overwrite...</i>			
HEE Star:	Upskilling	COVID-19 Related:	No	People Plan:	5. Growing and Training our Future Workforce
<i>For ICS projects:</i> Is this project aligned to all ICS Diversity and Inclusion Plans?					N/A
Please provide, if appropriate, a short summary:					
<i>For HEE projects:</i> Is this project aligned to the HEE SW Diversity, Inclusion, & Participation Business Plan?					N/A
Please provide, if appropriate, a short summary:					
Does this project contribute to widening participation in the healthcare workforce?					Yes
Please provide a short description:		This project is to provide access to SBE to all non-medical clinical staff. To widen participation of SBE in all learning environments from in classroom based cohorts to ward based education and development. Recognising and learning from the already established access to SBE to medical colleagues and widening this activity to all clinical staff within the Trust.			
Is Expert by Experience (EBE) included within this project?					No
If yes, how? If not, please explain why?					

PID Completed By: (Name, Email, Job Title & Organisation)	Maria Smith. Maria.smith12@nhs.net , Head of Professional Education, Apprenticeships and Careers, GHNHSFT. Kate Williams, kate.williams26@nhs.net , Professional Education Practitioner, GHNHSFT		26/07/2021
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HEE SW PPMO Internal use only:

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?	
Background / Need:	<p>There is a recognised lack of simulation based education (SBE) directed or purposely designed towards nursing and other allied health professionals in our Trust currently. There is a well-established SBE culture for our medical colleagues and our need is to establish the same culture within the largest workforce of our Trust and the benefits this provides the staff, patients and Trust.</p> <p>Access and provision of SBE to the non-medical workforce is limited due to lack of staff expertise currently within the Trust. A Professional Education Simulation Fellow would directly benefit non-medical health professionals and provide them with increased access to SBE which would benefit clinical practice, managing safety and risk, enhanced technical and non-technical skills and ultimately patient care.</p> <p>As a Trust we have been able to secure internal funding to match the funding provided by the HEE Simulation bid to a total of £41,204. This can be confirmed by the executive sponsor's letter attached to this bid.</p>
Rationale:	<p>SBE aims to reduce anxiety of clinicians when faced with clinical scenarios and increase clinical knowledge, multiple studies have proven this to be more effective than traditional teaching methods namely; <i>Azimirad, M, et al (2021). British and Finnish nurses' attitudes, practice, and knowledge on deteriorating patient in-service education: A study in two acute hospitals. Nurse Education in Practice. 54 (1)</i></p> <p>This recent study demonstrates the preferred method of education for Nursing Staff is in-service</p>

Section 2 – Briefly outline why this funding is required?

education in the form of Simulation Scenarios; additionally the study found that in service education provided to general ward staff positively impacted their ability to use escalation skills when using an early warning scoring system. This supports the aim to bring Simulation Based Education in-situ to the wider Trust and to those who currently do not have access to this.

Bliss, M and Aitken, L. (2018). Does simulation enhance nurses' ability to assess deteriorating patients?. Nurse Education in Practice. 28 (1), p20-26.

This study demonstrates that SBE was perceived by nurses to improve their own ability in identifying deteriorating patients. The participants described how their knowledge was transferred to clinical practice, with the overall perception that this led to improved patient care.

SBE also eliminates learning by 'trial and error' during actual clinical practice which can have detrimental effects on both staff and patients with potential implications for the Trust.

The introduction of a Professional Education Simulation Fellow would enable us to improve patient safety and outcomes through SBE focused primarily towards the integration of SBE and TEL within all non-medical educational activities.

The appointed Professional Education Simulation Fellow would also be working closely with a nominated Professional Education Practitioner within the education and development service to complement a Silver Quality Improvement Initiative involving the introduction of MDT simulation based activities. The Silver Quality Improvement Project is part of the Gloucestershire Safety and Quality Improvement Academy and involves mentorship from a Quality Improvement Mentor over a 12 month period to provide structured research training and introduction to PDSA cycles (Plan, Do, Study, Act) and Audits. The function of the Academy is to support staff in identifying an area of improvement in their area, or for the wider Trust, and to enable them to initiate change in practice through research education. The Professional Education Simulation Fellow will be integral to

- the PDSA cycles,
- delivering the training,
- building confidence in SBE to other educators in the Trust,
- identifying areas where SBE can develop
- the collection of data and evaluation of how SBE is being integrated into non-medical education and the benefits to the non-medical workforce.

They will also be part of the project team to present the findings and to communicate the project evaluation to the network and other conferences.

The purpose of this SBE Research Silver QI project to run in conjunction with this appointment is

Section 2 – Briefly outline why this funding is required?

	<p>to improve the recognition and escalation of deteriorating patients within the non-medical workforce. This includes developing key SBE learning outcomes for HCSW, TNA's, NA's, Nurses and AHPs. The overarching aim of the project is to identify behaviours conducive to MDT working and encourage clinical staff from all disciplines to adopt behaviours learned through traditional classroom training alongside simulation based activities. This will showcase how the MDT function, (which includes technical and non-technical human factors) directly impacts patient outcome.</p> <p>Currently the only SBE occurring from a MDT perspective in our Trust occurs on an ad-hoc basis and in-situ in either the Emergency Department or Intensive Care which is historically led by medics with the primary focus on medical educational and learning needs and outcomes rather than a MDT or non-medical focus. This occurs less than two or three times per annum.</p> <p>This project aims to widen access to MDT SBE in both a classroom environment and in-situ within the wider Trust with a focus in areas whose need for identifying and escalating deteriorating patients are greater due to lack of familiarity with unpredictable high acuity patients.</p> <p>This silver QI initiative and the appointment of a Professional Education Simulation Fellow aims to explore the importance of non-technical skills and human factors and the significance of these skills during MDT working. Through increasing and widening access to SBE we aim to educate and improve awareness of and utilisation of these skills in health care professionals primarily from a non-medical background. Non-technical skills based training is not currently a mandatory or optional training opportunity in our Trust and the appointed Professional Education Simulation Fellow would be essential in helping improve and implement this training through SBE. Non-technical skills training will also link with the wider Human Factors based awareness and education that we are working to develop and implement for non-medical health care professionals.</p> <p>Current opportunity for those from a non-acute clinical area to attend SBE opportunities is extremely limited, both in a classroom based environment and from an in-situ perspective. The Professional Education Simulation Fellow would work alongside the Professional Education Practitioners and the Practice Development Nurses/Midwives and AHP's in order to widen access to this type of training and to encourage interest and attendance to SBE within all their activities.</p>
<p>Scope (including benefits to the wider healthcare network across the South West)</p>	<p>We aim to work with University of Gloucestershire, which is the HEI within our One Gloucestershire ICS, to include the needs of students and ongoing training from student clinician to new registrant (NRN, AHP etc) in SBE. We also aim to share best practice with our Gloucestershire Health and Care Trust partners, servicing community and mental health service users within Gloucestershire, as part of our ICS education focus. This will enable us to work</p>

Section 2 – Briefly outline why this funding is required?

collaboratively to improve SBE for both Trusts and the wider ICS. This will also fall within the HEESWSN Multi-Agency work stream and within our One Gloucestershire ICS Simulation Group.

Our intention will be:

- To promote and showcase the ability to widen access to SBE within all educational activities from low to high fidelity in the non-medical workforce and to embrace the culture change needed.
- To feedback and share the learning taking place and the activities and research that has been gained throughout the project with the wider South West Simulation Network and beyond.
- To attend conferences to promote and present the findings and results especially involving the aspect of Quality Improvement for Patient Safety via posters and presentations.
- To have a dedicated focus on the integration of SBE and TEL within the Professional Education and Development of non-medical workforce to create a sustainable change in education and development culture for our non-medical workforce.

The Professional Education Simulation Fellow would be integral to the involvement within the ICS Simulation Group to ensure the sharing of best practice and sharing learning opportunities.

The objectives of the project are as follows;

- To increase and widen access to SBE for non-medical health care professionals both from an in-situ perspective and classroom based approach and integrate into education programs already in place.
- To implement SBE training for the wider Trust to include a more MDT approach to learning via MDT simulations to ensure all learning requirements are taken into consideration.
- To implement Human Factors training initiatives within all our education practices in collaboration with the Human Factors faculty. Of which the Professional Education Practitioners are part of. This includes non-technical skills education across the Trust from the induction of students to Preceptorship and through to specialist training.
- For the Professional Education Simulation Fellow to partake in a Silver Quality Improvement Initiative alongside a Professional Education Practitioner who has commenced the early stages of this project. This initiative is currently titled; 'Improve the identification and escalation of deteriorating patients through multi-disciplinary simulation'. This will involve behavioural marker analysis and non-technical skills training alongside proposed high fidelity simulation with a standardised patient.

Section 2 – Briefly outline why this funding is required?

	<ul style="list-style-type: none"> • To be involved in and to help facilitate the use of SBE within current Trust initiatives namely; the various Health Professional Preceptorship Programs, the Health Care Support Worker development programme and Health Care Assistants Acute Skills training days. • To assist in the use of simulation training applications through the use of iPads and other TEL and to ascertain/improve our ability to move forwards with virtual simulation training which we currently do not have access to, with involvement from the elearning technologists. • To participate in 'Simulation Train the Trainer' sessions whereby other clinical members of staff from a non-medic background can provide in-situ simulations for their teams, specifically the educators within the Trust and Practice Development staff. • To represent and enhance non-medic SBE and TEL development within the new Education Council being developed. <p>The Professional Education Simulation Fellow would be mentored by the Project Leads, Maria Smith, Head of Professional Education and a member of the HEESWSN, and Kate Williams, Professional Education Practitioner who leads on SBE and TEL for education and development also a member of the HEESWSN. There will also be included membership to AsPIH, participation in the HEESWSN, and a funded place on the Simulation Train the Trainer course at Bristol.</p>
<p>Alignment to other strategies (including Information about how the project aligns with Trust and HEESWSN objectives (including the five HEESWSN workstreams):</p>	<p>By having the opportunity to appoint a Professional Education Simulation Fellow from a non-medic discipline allows us to align and work towards our Trusts Strategic Objectives: 2019 to 2024 and our Journey to Outstanding.</p> <ul style="list-style-type: none"> • Outstanding Care: - Ensuring that we provide best patient safety and care via researched and evidenced educational programmes and the use of SBE • Compassionate Workforce: - By developing and retaining staff through the change culture of education and development moving with the evidenced benefits of SBE and TEL • Quality improvement: - Utilising this QI initiative to evidence the current lack of SBE in non-medic education and the plan to integrate this form of education with evaluation as to the benefits gained. • Digital Future: - Recognising the move towards virtual simulation and TEL and being part of that move and digital journey. • Driving Research: - Utilising this appointment to aid in the research into the use of SBE and culture change for the education and development of the largest workforce within the Trust via this specific QI Initiative.

Section 2 – Briefly outline why this funding is required?

The Professional Education Simulation Fellow will create more awareness, understanding and involvement of the utilisation of standardised patient (SP) use within SBE. The use of the SP is to be evaluated within the Silver QI Initiative and fed back to the HEESWSN SP work stream. We are already part of the HEESWSN standardised patient work stream and this will enable trials of SP use to be used within the SBE provided, utilising students and staff. Feedback to the work stream will create a sharing of best practice.

The primary focus of this Professional Education Simulation Fellow is to incorporate SBE within Multi-Disciplinary approach to learning requirements for all clinicians, rather than focusing on the learning outcomes for one discipline of healthcare professional. A collaborative learning process in SBE rather than singular discipline focus, whilst ensuring that non-medical workforce is recognised as integral to the learning outcomes and success of the debriefing process.

An element of this appointment would be to work alongside a research aspect both within a QI initiative and with a research opportunity to publish results and findings to share best practice.

To align to the ever growing innovation and virtual simulation potential using digital technologies. This appointment will be working with our eLearning technology department in increasing the awareness of and use of TEL. This also falls within the Trust strategies of a Digital Future.

This appointment would be able to align with:

- Multi-agency simulation activity; as we are working with our ICS partners to utilise the learning and benefits from this project feed into the ICS Simulation Group. Discussions have taken place as to how this appointment could assist with the creation of wider Multi-Agency simulation based activity in the ICS which has been recognised by all parties that there is a lack of, this has been communicated with the work stream lead.
- Research; as part of the appointment the QI initiative will look into the evidenced based approach to SBE for the non-medical workforce and how the outcomes benefit patient care, with the use of human factors teaching and communication between healthcare professionals.
- Virtual simulation, digital technologies and innovation; the simulation fellow will be working collaboratively with the eLearning technologists as to how to increase the use of TEL within our education. This can be fed back to the network work stream lead. There are discussions as to how the simulation fellow could work towards virtual simulation activities for virtual education.
- The use of standardised patients forms part of the QI and the evolution of use fed back to the work stream.

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 **		
	Milestones	Anticipated Cost
High Level Costings Breakdown:		£
		£
		£
		£
	TOTAL:	£Total
What will be measured or evidenced to demonstrate impact of this investment?		
How will this project be evaluated to understand the benefits realised from the investment?		

End of Part 1 (Brief PID)

Section 4 – How and what will be measured to demonstrate <u>benefit</u> / impact?							
Please outline what <u>SMART</u> 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	Primarily all non-medical clinical health care staff. (HCSWs, TNAs, NAs, AHPs, PAs, NRNs, Students, RGNs)	<p>By widening access to SBE in all educational settings for non-medical clinical staff groups.</p> <p>An increased awareness of the benefits of SBE and the advances in TEL within the education and development remit.</p> <p>To improve staff knowledge, psychomotor skills and decision making.</p> <p>Creating a positive move forward with culture change of SBE being for ALL health care professionals not medical centric learning.</p>	Qualitative Benefits (Unquantifiable)	Within 3 months of project start	<p>Increase in attendance to SBE within already established courses.</p> <p>A number of new SBE events being undertaken.</p> <p>Increased engagement of SBE within Practice Development.</p> <p>Wide based surveys measuring the confidence index of staff who have attended SBE.</p>	<p>Pre project scope of confidence index of staff.</p> <p>Pre project analysis of the numbers of SBE events available.</p> <p>Pre project survey of non-medical involvement in any current SBE. (limited)</p>	<p>All non-medical clinicians will have a widened access to SBE within course, CPD development activities, clinical skills teaching, preceptorships courses and in-situ SBE.</p> <p>Increased awareness of SBE from non-medical staff.</p> <p>A change in culture where SBE is seen as integral educational method.</p>

2	The wider project is an MDT approach to learning.	By increased collaborative learning within simulation based education, inclusive to all health professionals with focus on each individual learning needs and objectives.	Qualitative Benefits (Unquantifiable)	Within 6 months of project start	An increase in the number of new MDT SBE events being undertaken.	Current numbers of MDT SBE events outside of ALS/ILS courses or testing of response teams.	A change in culture where SBE is seen as integral educational method.
3	Patient Care	By decreasing clinician's anxiety levels in decision making and reducing decision making errors. Creating an increase in more collaborative education for all healthcare providers that transfers to better patient care. An increased awareness of Human Factors that impact patient care.	Qualitative Benefits (Unquantifiable)	Mixed	Via DATIX events – measured against current numbers. Patient satisfaction feedback. Increase in confidence of staff post SBE of clinical, and human factor scenarios	Start with current near misses as registered on the DATIX risk system. Working with the human factors investigations team.	Improved patient care through clinical staff having undertaken SBE as part of the educational culture of learning. Providing specific SBE as a result of DATIX in relevant areas.
4	HEESWSN and wider	By the project leads and Sim Fellow presenting at network meetings and conferences about the learning and research that has taken place.	Qualitative Benefits (Unquantifiable)	Within 3 months of project start	Feedback via the network and other Trusts. Feedback from the One Gloucestershire ICS	Currently no baseline as not occurring.	A number of conferences and meetings attended to present with feedback throughout.

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
		Non-accredited training	Select date	Select date	£		
		Choose an item.	Select date	Select date	£		

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
1. Appoint Professional Education Simulation Fellow	03/01/2022	30/12/2022	£41,204	£	£	£	Not yet started
2. Train the Trainer Course	03/01/2022	31/03/2022	£366	£	£	£	Not yet started
3. Complete silver QI	03/01/2022	31/05/2022	£0	£	£	£	Not yet started
4. GANTT Chart	03/01/2022	07/01/2022	£0				Not yet started
5. Internal Trust Presentation	03/01/2022		£0				Not yet started
6. Network Conference	03/01/2022		£50	£	£	£	Not yet started
			£41,620	£	£	£	

Section 7 - Project Evaluation – Dissemination – Sustainability

Description of how monthly progress review will be carried out	Weekly meetings between Project Leads and the Professional Education Simulation Fellow (Teams/F2F) Measuring against the GANTT chart for milestones Meeting with Network Mentor Monthly updates to take to Network Project Meetings and Network Meetings
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<p>Provide a summary of the evaluation methodology that will be used to evaluate this project:</p>	<p>Quantitative evaluation will be numbers of SBE events, DATIX received, numbers of students having access to SBE.</p> <p>Qualitative evaluation will be staff safety climate questionnaires. Surveys regarding confidence index, a perceived v actual improvement in clinical practices, increased awareness of human factors, a positive culture change to SBE and TEL within the organisation for non-medic education and development.</p>		
<p>Will evaluation be internal or external? <i>(If over 100K, external evaluation required)</i></p>	<p>Internal</p>	<p>Name of external organisation conducting the evaluation:</p>	<p>N/A</p>
<p>Please provide details of how you will measure the impact:</p>	<p>Staff surveys, DATIX, SBE events, questionnaires, communication bulletins, silver QI</p>		
<p>How will the findings/successes/lessons learned from this project be shared?</p>	<p>HEESWSN Network meetings, HEESWSN Project meetings, Presentations at:</p> <ul style="list-style-type: none"> • Conferences • ASPIH • Webinars • One Gloucestershire ICS Simulation Group • Education Leads Meeting (ICS) • Workforce development meetings • Senior Education Team Meetings • Education and Learning Committee • Education and Development Council • Nursing and Midwifery Excellence Council • Publications • Social Media promotion via the Education Twitter handle • Trust Global Communications • QI Graduation and Poster Presentation – local and national • Education department connections with other Trusts 		

<p>How will the learning from this project / investment be continued over-time? (i.e. sustainable / business as usual / mainstream)</p>	<p>Developing a change in education culture for non-medic development that SBE and TEL is integral to achieving learning objectives. To spend the project period developing strength of simulation educators within the Trust, and developing the educators with debriefing tools. Ensuring that the Professional Education Simulation Fellow integrates within the Professional education team to enhance the ability to seek out new SBE initiatives and research. Collaboration with the Professional Education Practitioner leading in SBE and TEL to ensure that the SBE and TEL initiatives continue as business as usual for education and development practices. To embed the benefits of TEL with the elearning technologists.</p>
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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?

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 1 (low) – 5 (high)	Likelihood	Total risk score Severity x likelihood	Mitigating action	Risk Status
1	Lack of staff available in clinical setting which may negatively impact ability to meet work load	26/07/2021	2	2	4	<ul style="list-style-type: none"> Establishing safe working numbers. Ensure SBE events are agreed prior to arrival. SBE are held at optimal times dependent on clinical need. 	Open
2	We are unable to appoint a simulation fellow	03/01/2022	4	1	4	We would continue to go to recruitment but delay the project start	Open
3	Train the Trainer course unavailability	26/07/2021	1	1	2	To replace attendance to a suitable alternative	Open

End of Part 1 (Full PID for larger investments)

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

Section 9 – Progress against the Project Plan						
<p><i>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</i></p>						
Period Covered:	Please select	Spend to date:	£	Confidence Delivery Status:	Please select	
Please review the following sections and tick when completed:	Section 4 – Benefits <input type="checkbox"/>	Section 5 – Upskilling <input type="checkbox"/>	Section 6 – Plan <input type="checkbox"/>	Section 7 – Evaluation <input type="checkbox"/>	Section 8 – Risk <input type="checkbox"/>	
Progress Update: <ul style="list-style-type: none"> • 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.

Section 10 – Evaluation Evidence Checklist			
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?	<input type="checkbox"/>	Select date	
Has work been completed to map the impacts of this project to anticipated and achieved benefits?	<input type="checkbox"/>	Select date	
Has work been completed to detail how this change will now be incorporated into Business as Usual?	<input type="checkbox"/>	Select date	

HEE SW PPMO Internal use only:

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

Change Control Record

Change Control (add additional rows as required)				
Section	What has been changed?	Date of change	Change made by	HEE Project Lead Approval (Date Approved)
		Select date		

Additional Application Questions:

<p>Description of implementation methodology and timeline of the project</p>	<p>Once funding has been received: Advert to go out for recruitment January to have appointed the Simulation Fellow A GANTT chart attached to the proposal outlines a dynamic timeline. The first 2 weeks are induction into the department and orientation of the equipment By March the fellow will have already undertaken training to deliver simulation based education. Bronze QI, if not already achieved prior to appointment will have been undertaken by March. Silver QI work with an appointed Project Lead will be commenced. PDSA cycles undertaken to look at the educational sessions currently in place and how SBE could be utilised. Presentations made at the Education Forum and within the Education and Development Council to work collaboratively with educators in the Trust.</p>
<p>Organisational resources to support project (Consider – mentoring arrangements, equipment, place of work, access to work computer)</p>	<p>The Professional Education Simulation Fellow would be based with the Professional Education Department at Gloucester Royal. They would be mentored by both Project Leads and the mentor support provided by the network. They would be provided with a laptop and will have full access to the simulation equipment that the Post Graduate Medics use within the Trust. They will also have access to mentoring from the eLearning technologists with regards to assistance around the TEL perspective. A funded place on a simulation train the trainer's course will be provided at Bristol and full membership paid to AsPiH funded by the department. They will have regular meetings set up throughout the project with the Project Leads, the Quality Improvement Academy for the QI project and Line Manager (Project Lead) for a 6 month and 12 month appraisal. The fellow would have arrangements to be trained on the iRIS Platform.</p>
<p>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)</p>	<p>We are fully supported by the Associate Director for Education and Development for this Professional Education Simulation Fellow who is acting as the executive sponsor of the project. The appointment of the fellow will have support, guidance and management via the Professional Education Team and guidance and support from the eLearning technologist. As the fellow would be working to create a culture of SBE in the non-medic workforce</p>

	they will receive support and guidance from the Post Grad simulation tutors and clinical teaching fellows as to how they have integrated SBE into medical education.
Outline of the chosen fellow, technician and/or other staff (Consider Level/grade, current role, background. Please provide details of their working week)	The position of Professional Education Simulation Fellow would be from a non-medical background. We are keen that this opportunity is open to registered nurses, AHP's and midwives from inside the Trust or from within the wider ICS on a fixed term/secondment basis. They would be seconded at a band 6 AfC. They would need to apply and be interviewed and be measured against a person specification. They must be from a clinical background with a history of teaching and use of simulation based activity as a participant and or facilitator. Their working week would be Mon-Fri office hours with the ad hoc out of hours requirement to reach staff who are night shift workers. This would only be by prior agreement and TIL arranged.
Details of named mentor for the Fellow with a summary of their experience in simulation, quality improvement, human factors and patient safety	Maria Smith – Head of Professional Education. Previously Resuscitation and Simulation Manager. Member of the HEESWSN and on the HEESWSN Executive Group. BASIM course in 2017. PGCE Medical Education, Human Factors faculty within the Trust and trained as a Human Factors train the trainer. Sponsor of Silver QI projects and have undertaken QI training.
Agreement that training on the iRIS platform will take place within 1 month of fellow/technician commencing post	Arrangement will be made for both the Professional Education Simulation Fellow and the Professional Education Practitioner to be trained on the use of the iRIS platform as soon as their commencement of the post.
Agreement that all documents, scenarios and training items used during the project will be placed on the iRIS platform	It is agreed that any scenarios, documents and training items used within the project by the fellow will be placed on the iRIS platform.
Agreement that contact will take place with the HEESWSN Network Liaison at least monthly	It is agreed that monthly meetings with the HEESWSN liaison will be arranged for the entire project duration with more meetings and catch ups as agreed between the fellow, liaison member and project lead to ensure communication and progress.
Agreement that quarterly progress reports will be filed with HEESWSN via the Network Liaison	It is agreed that quarterly progress reports will be completed and filed with the HEESWSN liaison. That the progress will be measured against a GANNT chart.
Agreement that the fellow/technician and/or project lead will attend quarterly Network Meetings and other meetings for funded projects where possible	It is agreed the fellow and project lead will attend ALL network meetings including the project meetings and quarterly network meetings whereby a progress report can be shared to the network.
Agreement that the Fellow and Project	It is agreed that the fellow and project lead will complete a detailed annual/end of

<p>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)</p>	<p>project report. They will present the project outcomes and the HEESWSN Simulation Network Conference and will be proactively looking at other simulation events whereby this project can be promoted.</p>
<p>Cost of project (staffing costs, other costs, total costs)</p>	<p>The cost to this project is the staffing cost of the fellowship. As this is a non-medic fellowship they will be a band 6 AfC. The costing has been based on the middle of Band 6, If the appointed member of staff is currently Band 5 the bottom of Band 6 figures would count. This will be unknown until the appointment.</p> <p>The costing of this is for staffing is:</p> <p>Middle of Band 6 Salary £33176 Ers Pension £4770 Ers NI £3258</p> <p>Total 41,204</p> <p>Bottom of Band 6 Salary £31365 Ers Pension £4510 Ers NI £3108</p> <p>Total £38983</p> <p>Expenses will be picked up by the Education Department if any are incurred such as attending conferences, attendance to the train the trainer course for their development, and presentations. All equipment will be provided and no cost incurred to the project.</p> <p>£366 – Train the Trainer Course £50 - expenses for presentations</p>

END OF APPLICATION