

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:	Creating a SIM programme to support End of Life care		
Funding Required from HEE:	£28000	Organisation to receive funds:	St Margaret's Hospice, Somerset		
Total project value:	£35000	Other Funding Bodies:	Hospice	Value:	£7000
NHS Priority:	Cross System (ALL)	Main staff group impacted:	Multi-disciplinary Teams	Primary aim:	Improve staff experience of providing care
Start Date:	01/10/2021	End Date:	30/09/2022	Revised End Date:	Select date
Project Manager - Name and Title:		Sarah Ireland Head of Learning and People Development		Email Address:	Sarah.ireland@st-margarets-hospice.org.uk
Project Manager - Organisation:		St Margaret's Hospice	Contact Number:	07718485467	
Provide a short summary for the use of these funds including the output:		To design and deliver a SIM programme to support excellent practice in End-of-Life care within the Hospice to all staff involved in patient care. This programme will include the wider community through introducing SIM to complement current support to care Homes, district nurses and the voluntary sector			
Geographical Area Covered:		<input type="checkbox"/> HEE Region: South West <input type="checkbox"/> ICS: Somerset <input type="checkbox"/> Training Hub: Somerset <input type="checkbox"/> Other... please overwrite...			
HEE Star:	Upskilling	COVID-19 Related:	No	People Plan:	6. Capacity and Capability to Deliver the New

					Operating Model for 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:		The hospice is an expert in the field of End-of-Life care and collaborates and works in partnership with all sectors. SIM will enable us to use different techniques in learning, encouraging and empowering staff from the hospice and other sectors such as care homes to have a voice in the quality of care delivered, as well as consolidating their knowledge and skills.			
Is Expert by Experience (EBE) included within this project?					No
If yes, how? If not, please explain why?					

<i>PID Completed By:</i> <i>(Name, Email, Job Title & Organisation)</i>	Sarah Ireland Head of Learning and People Development Sarah.ireland@st-margarets-hospice.org.uk St Margaret's Hospice	Date:	30/07/2021
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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:

St Margaret's Hospice is recognised for excellent End of Life care that is delivered across Somerset providing support in the community and in our specialist In Patient Unit. Currently simulation is rarely used within Hospice practice and the benefit of integrating simulation into all our education and learning activities is clear. The hospice needs capacity and expert mentoring in order to 'kickstart' a consistent simulation learning programme.

The complexity of the patients we support is increasing and our staff need to constantly upskill with new and different skills. Our work supporting the private and social care sector suggests that there has been a significant increase in the number of people that they have supported at the end of their lives, especially during the pandemic. This has resulted in an identified need to support this sector with their end-of-life training needs. SIM provides a different approach to learning which will complement what we already do and provide the opportunity to practice skills in a secure and safe way that is also relevant and up to date.

For example:

- Using a SIM approach will help us practice difficult conversations which will result in an improved experience for patients, carers and families
- Clinical skills – simulation will help us keep skills current and increase confidence to deliver care
- SIM approaches will enable us to use real clinical scenarios in training, giving staff an immersive experience and opportunity to use learning in 'real time'

Rationale:

The funding available, specifically to support simulation learning, will increase capacity in the Education and Learning team to support staff across the Hospice and importantly the expertise and community of practice. This will enable the hospice to maximise the opportunities to support our own staff and then also work in partnerships with our community. It has the potential to reach a wide audience across different sectors and disciplines which will help to raise the standards of end-of-life care for all.

Objectives:

1. To design and deliver a Simulation programme to hospice staff which will focus on both clinical skills and human factors relating to end-of-life care and to integrate a simulation approach into key development programmes creating a broader culture of learning.

Section 2 – Briefly outline why this funding is required?

	<ol style="list-style-type: none"> 2. To work with the key community partners to develop and deliver joint simulations which will support care homes, district nurses and other care providers, to recognise dying, the importance of communication and to deliver higher quality end of life care 3. To run a joint simulation with SW hospices in order to share learning and encourage simulation as a core practice
<p>Scope (including benefits to the wider healthcare network across the South-West)</p>	<p>The project will enable the hospice to better work in partnership across the breadth of NHS (providing awareness and recognition of different roles and services e.g. district nurses) and the voluntary/social care sector including care homes</p> <p>The hospice will share learning with all hospices in the South-West through the SW hospice educators’ group – currently no SW hospice has a simulation programme.</p> <p>The project will also support the Somerset placement capacity project by sharing learning opportunities across the social care sector and directly involving students on placement</p> <p>Our multi-disciplinary teams within the hospice will be actively engaged in the project, including clinical staff from in patient unit, community, 24-hour advice line, physiotherapists, occupational therapists, social workers, complementary therapists, lymphoedema specialists, spiritual care, housekeeping and hotel services, ward clerks and anyone else involved patient care</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>This proposal aligns and compliments the Hospice’s organisational values and strategy and builds on our core and technical competencies. It aligns with our education and quality approaches and continues to build a culture of learning and safety within the organisation. The project is aligned with the HEESWSN workstreams: Multi-agency Simulation Activity, Research and Virtual Simulation, Digital Technologies and Innovation</p> <p>The project also supports the Somerset-wide End of Life education strategy</p>

**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 **

High Level Costings Breakdown:	Milestones	Anticipated Cost
		£

Section 3 – ** Only Complete for PIDs with a Total Value of less than £10,000 **		
		£
		£
		£
	TOTAL:	<u>£Total</u>
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 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	Hospice staff	<p>Increased confidence in practice</p> <p>Increased skills and relevant knowledge</p> <p>Increased opportunities to reflect on learning and share learning</p>	Qualitative Benefits (Unquantifiable)	Mixed	<p>Feedback from staff/patients/carers</p> <p>Clinical audits/safety thermometer</p> <p>Evaluation of sessions</p>	Skills audit at beginning of project	<p>Increased staff confidence and competence</p> <p>Staff happy to share skills and knowledge through education and training</p> <p>Change in behaviours and attitude in relation to learning</p> <p>Impact on patient and family satisfaction and staff retention</p>
2	Students on placements	<p>Increased confidence in practice</p> <p>Increased skills and relevant knowledge</p>	Qualitative Benefits (Unquantifiable)	Mixed	<p>Feedback from students and HEIs</p> <p>Feedback from staff, patients and carers</p>	<p>Initial student assessment</p> <p>Feedback</p>	Increased number of placements

		Increased opportunities to reflect on learning and share learning					Broader learning experience
3	Staff in cares homes, community settings	Increased confidence in practice Increased skills and relevant knowledge Increased opportunities to reflect on learning and share learning	Qualitative Benefits (Unquantifiable)	Mixed	Feedback through existing networks and from individuals including Larch teams etc	Feedback ECHO baseline Requests for care homes	More specific learning requests Increased engagement in ECHO Stronger 2 way relationships
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
Team Leader	Hospice	Non-accredited training	04/10/2021	29/08/2022	£500	2	
Advanced communication	Hospice/SFT	Non-accredited training	06/12/2021	29/08/2022	£2000	4	

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.	Appointment of part time simulation learning educator (with on costs)	04/10/2021	04/10/2022	£20000	£	£	£	Not yet started
2.	Delivery of 2 integrated simulations per month	25/10/2021	31/10/2022	£5000	£	£	£	Not yet started
3.	Delivery of training courses	18/10/2021	27/07/2022	£2500	£	£	£	Not yet started
4.	Delivery of joint simulations (Somerset ICS/SW hospices)	16/06/2022	17/07/2022	£500	£	£	£	Not yet started
				£28000	£	£	£	

Section 7 - Project Evaluation – Dissemination – Sustainability

Description of how monthly progress review will be carried out	The monthly review will be written by the project manager, having collected data from key stakeholders within the hospice (participants in simulations and other learning activities) and from the wider system. Monthly learning workshops for the project will allow time and space to reflect and review progress with the project team.		
Provide a summary of the evaluation methodology that will be used to evaluate this project:	Appreciative inquiry/critical incident approaches Interviews Focus groups Pre and post training evaluation		
Will evaluation be internal or external? <i>(If over 100K, external evaluation required)</i>	Internal	Name of external organisation conducting the evaluation:	

<p>Please provide details of how you will measure the impact:</p>	<ul style="list-style-type: none"> • Clinical audits (compliance, cultural norms) • Patients and carers (communication) in difficult conversations • Staff (resilience, skills, leadership, team work) appraisal feedback • Relevant changes in policy and procedures • Increase in requests for simulation based training • Education and learning is more embedded into every day practice • More effective working relationships with at least 10 care homes or other community actors • More opportunity for joint working resulting in less duplication
<p>How will the findings/successes/lessons learned from this project be shared?</p>	<p>Existing networks at Somerset, regional and national level Hospice UK annual conference Somerset EOL education programme board conference/training sessions</p>
<p>How will the learning from this project / investment be continued over-time? (i.e. sustainable / business as usual / mainstream)</p>	<p>The education and Learning team will have responsibility to deliver parts of the project and the post will be included into the 22/23 budget. Simulation will be integrated into the education and learning modalities for the whole hospice. Simulation included in all the key hospice training programmes (developing yourself as a manager, Spiritual care, bereavement care, team leader)</p>

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 engagement from staff and lack of staff capacity	Select Date	1	3	3	Awareness raising engagement plan	Open
2	Lack of engagement from the Community and lack of capacity	Select Date	1	3	3	Working with existing networks	Open
3	Inability to appoint project staff	Select Date	1	3	3	Revision of JD/skills set needed	Open

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 <i>(add additional rows as required)</i>				
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>	<ul style="list-style-type: none"> To design and deliver a Simulation programme to hospice staff which will focus on both clinical skills and human factors relating to end-of-life care and to integrate a simulation approach into key development programmes creating a broader culture of learning. To work with the key community partners to develop and deliver joint simulations which will support care homes, district nurses and other care providers, to recognise dying, the importance of communication and to deliver higher quality end of life care To run a joint simulation with SW hospices in order to share learning and encourage simulation as a core practice <p>The project will start by October 2021 and be completed by end of August 2022</p>
<p>Organisational resources to support project (Consider – mentoring arrangements, equipment, place of work, access to work computer)</p>	<p>Office space in education office Mentoring through SIM team at Musgrove and by doctors already using SIM Laptop and all other equipment available</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>Letter attached - the application is sponsored by the Clinical Director Joy Millikan and supported by the Head of Clinical Services, Head of Therapies and by the Doctor leading on Education at the hospice.</p>
<p>Outline of the chosen fellow, technician and/or other staff (Consider Level/grade, current role, background. Please provide details of their working week)</p>	<p>Job outline attached Simulation learning educator (3 days per week) spinal point 29 £33,300 pro rata. This post is on the same grade as the Clinical Educator. The hours will be flexible.</p>
<p>Details of named mentor for the Fellow with a summary of their experience in simulation, quality improvement, human factors and patient safety</p>	<p>N/A</p>

Agreement that training on the iRIS platform will take place within 1 month of fellow/technician commencing post	Yes agreed
Agreement that all documents, scenarios and training items used during the project will be placed on the iRIS platform	Yes agreed
Agreement that contact will take place with the HEESWSN Network Liaison at least monthly	Yes agreed
Agreement that quarterly progress reports will be filed with HEESWSN via the Network Liaison	Yes agreed
Agreement that the fellow/technician and/or project lead will attend quarterly Network Meetings and other meetings for funded projects where possible	Yes agreed
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)	Yes agreed
Cost of project (staffing costs, other costs, total costs)	TOTAL funding required from HEE £28,000 (£20,000 salaries and on costs - £8000 for Simulations and training) Contribution by hospice to project £7000 (Project management, training and support)

END OF APPLICATION