**New Project Proposal Form**

Please complete the following form with details of your project proposal as comprehensively as possible. The italicised text provides guidance; please overwrite with your response.

This form will be considered by the All Wales Therapeutics and Toxicology Centre (AWTTC) in line with their current and future work programme. The All Wales Medicines Strategy Group (AWMSG) aims to share best prescribing practice and medicines management within NHS Wales; however, AWTTC has limited capacity to take on additional workload, and projects may therefore be prioritised depending on service need. The final decision will be that of the AWTTC Management Board. AWTTC will inform you of the outcome as soon as possible.

**Please note:**

1. Your document may form part of AWPAG/AWMSG meeting documentation; as such, you will be invited to present your item to attendees. You may assume all members will have read the document; therefore, it will only be necessary for you to verbally highlight salient points.
2. All documentation will be circulated to attendees ten days prior to the relevant meeting.
3. You may be required to answer questions raised by members.

**Project outline**

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| **Proposed title** |  |

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| **Summary of project** |
| *Please provide a concise summary of the project, considering:*   * *Purpose* * *Potential value for the NHS and patients in Wales* * *Impact on NHS Wales (this should include potential resource and workforce impacts)* * *Intended audience (e.g. clinicians or patients and carers)* * *Setting (e.g. primary/secondary care)* * *Proposed project outcomes (including how the outcomes will be measured, and how patient outcomes may be improved)* * *Process for audit/monitoring implementation* * *Any educational opportunities* * *Any opportunities to involve patients and/or the public in its development* * *Any relevant references or documents (including details of any relevant guidance, e.g. NICE, SIGN, Department of Health, 1000 Lives – as links/attachments to email)* |

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| **Endorsement or acknowledgement** | | | |
| Please select whether you are requesting your resource be considered for AWMSG ‘Endorsement’ or ‘Acknowledgement’. More information on how these processes differ can be found in the [AWMSG Medicines Optimisation Framework](https://awttc.nhs.wales/medicines-optimisation-and-safety/medicines-optimisation-guidance-resources-and-data/medicines-optimisation-framework/). | | | |
| Endorsement |  | Acknowledgement |  |
| **Project category** | | | |
| Please indicate whether this project will fall into any of the below categories:   * Prescribing guideline * Patient information leaflet * Audit * Educational resource materials * Prescribing analysis * Other format. Please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| **Meeting strategic goals** |
| How does this proposed project align with the goals set out in the current [AWMSG Strategy](https://awttc.nhs.wales/use-of-site/about-us1/medicines-strategy-for-wales-and-annual-reports/medicines-strategy-for-wales/) and strategies such as Welsh Government’s [‘A Healthier Wales’](https://gov.wales/healthier-wales-long-term-plan-health-and-social-care)? *This information may be used to appropriately prioritise the work within AWTTC’s and AWMSG’s wider work programmes.* |

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| **Evidence** |
| **Clinical effectiveness**  Please list any references to support the clinical effectiveness of the proposed resource and the advice within it.  *List clinical effectiveness evidence references here.* | |
| **Cost-effectiveness**  Where possible, please list any references to support the cost-effectiveness of the proposed resource or the advice within it.  *List any relevant cost-effectiveness studies, burden of illness studies, and/or health-related quality-of-life studies here. If you are not aware of any, please state as such.* | |

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| **Implementation** |
| What are your thoughts on how this proposed resource may be successfully implemented? *If applicable, what are the current plans for its implementation?* |

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| **Prescribing decision support software messages** | | | |
| Prescribing decision support software (e.g. ScriptSwitch®, OptimiseRx®) may be utilised to aid implementation of this resource in primary care. Are there any messages for primary care prescribing decision support software platforms that AWTTC could help develop, to accompany the resource and support its implementation? | | | |
| Yes |  | No |  |
| *If you have responded ‘Yes’, please include suggestions for prescribing decision support messages relevant to this resource.* | | | |

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| **Research** | | | |
| AWTTC may wish to research the proposed resource and the impact of its implementation. Would you be happy to collaborate with us in this process, which could result in a joint publication with AWTTC? | | | |
| Yes |  | No |  |

**Equality and health impact**

Please complete the following table and provide as much information as possible on how this project may disproportionately impact (positively or negatively) people based on any of the following characteristics.

| **Characteristic** | **Potential impact (positive or negative)** |
| --- | --- |
| Age |  |
| Persons with a disability (as defined in the Equality Act 2010) |  |
| People of different genders |  |
| People who are married or who have a civil partner |  |
| Women who are expecting a baby or are on a break from work after having a baby, or who are breastfeeding |  |
| People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers. |  |
| People with a religion or belief or with no religion or belief. |  |
| People who are attracted to other people of:   * the opposite sex (heterosexual); * the same sex (lesbian or gay); * both sexes (bisexual). |  |
| People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design. |  |
| People according to their income related group. |  |
| People according to where they live. |  |
| Consider others who face health inequalities:   * Looked after and accommodated children and young people. * Carers: paid/unpaid, family members. * People who are homeless or those who experience homelessness: people on the street; those staying temporarily with friends/family; those in hostels/B&Bs. * Those involved in the criminal justice system: offenders in prison or on probation, ex‑offenders. * People with addictions and substance misuse problems. * People who have poor literacy. * People living in remote, rural and island locations. |  |

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| **Acknowledgement – Equality and health impact assessments** | | | |
| If you are seeking Acknowledgement (see page 1), it is a requirement that an Equality and Health Impact Assessment (EqHIA) has already been carried out for the proposed resource(s). Has an EqHIA already been completed? | | | |
| Yes |  | No |  |
| *If you have responded ‘No’, please state here any reasons you may have for not completing an EqHIA or why you think one is not required.* | | | |

**Sustainability**

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| **Sustainability agenda** |
| *Please give details of how your proposed project may have an impact on the sustainability agenda of NHS Wales or contribute to the goals as set out in the* [*NHS Wales Decarbonisation Strategic Delivery Plan*](https://gov.wales/nhs-wales-decarbonisation-strategic-delivery-plan)*.* |

**Collaboration**

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| **Collaborators** |
| *Please give details of any other collaborators on this project.* |

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| **External organisation involvement** |
| *Are you working with any other groups or organisations in the development of this project? Have any other organisations been approach for support and, if so, have they provided a response?* |

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| **Expected input from AWTTC/AWMSG** |
| *Please provide comprehensive information on what support you may require, e.g.:*   * *Comment on content* * *Support with writing and/or editing* * *Support for consultation/dissemination* |

**Process**

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| **Current status** | |
| Please select one of the following options. | |
|  | Proposal for consideration |
|  | Document already drafted (please attach along with this form) |
|  | Review of existing AWMSG-endorsed resource |
|  | Other |
| *If ‘Other’, please provide details here.* | |

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| **Timescale for document submission** |
| *As stated in the* [*AWMSG Medicines Optimisation Framework*](https://awttc.nhs.wales/medicines-optimisation-and-safety/medicines-optimisation-guidance-resources-and-data/medicines-optimisation-framework/)*, if the project proposal is accepted and the project lead is developing the resource (or it has already been developed) a draft document should be shared with AWTTC within six weeks of the proposal having been accepted. Please state here if this will not be possible.* |

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| **Suggested consultees** |
| *Please name any relevant stakeholders that should be involved in consultation.* |

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| **Copyright** | | | |
| As standard, at the point of publication copyright of AWMSG-endorsed resources will sit with AWTTC. For the project you are proposing, do you foresee any issues with this? | | | |
| Yes |  | No |  |
| *If you have responded with ‘Yes’, please provide more information here*. *AWTTC can explore the options of ‘joint copyright’ if required.* | | | |

**Contact details – Project lead**

*If this project is to be progressed via AWPAG and AWMSG, the project lead as identified below will be expected to present the project at the AWPAG meeting (private) and the AWMSG meeting (public).*

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| **Name** |  |

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| **Position** |  |

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| **Department** |  |

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| **Address** |  |

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| **Telephone** |  |

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| **Email address** |  |

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| **Declarations of interest** |  |

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| **Date** |  |

**Contact details – Project contact**

*If different to project lead.*

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| --- | --- |
| **Name** |  |

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| **Position** |  |

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| **Department** |  |

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| **Address** |  |

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| **Telephone** |  |

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| **Email address** |  |

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| **Declarations of interest** |  |

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| **Date** |  |

Your completed request form should be sent to [awttc@wales.nhs.uk](mailto:AWTTC@wales.nhs.uk).

Should you have any queries, please contact AWTTC on 029 202182 6900 or email [awttc@wales.nhs.uk](mailto:AWTTC@wales.nhs.uk).