South Yorkshire Innovation Showcase 2024

**Innovative Practice Form**

Thank you for you interest in submitting your proposal to the South Yorkshire Innovation Showcase. For full details of this event, please see [the programme pack](https://www.sybinnovationhub.net/wp-content/uploads/sites/4/2024/05/South-Yorkshire-Innovation-Showcase_Programme-Pack.pdf).

If you have any questions about the process, please contact Andrew Woodcock [a.woodcock2@nhs.net](mailto:a.woodcock2@nhs.net)

To submit your proposal, please complete all sections below and return to[**sy.innovation@yhahsn.com**](mailto:sy.innovation@yhahsn.com)

Please use the subject ‘South Yorkshire Innovation Showcase’ when submitting your proposal.

If you have any queries about the application process, please contact [a.woodcock2@nhs.net](mailto:a.woodcock2@nhs.net)

**Lead Contact and Organisation**

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| --- | --- |
| **Full name:** |  |
| **Email address:** |  |
| **Job Title:** |  |
| **Organisation name:** |  |
| **Organisation type:** | Choose an item. |
| **Postal address of applicant organisation:** |  |
| **Phone number:** |  |

**Project Details**

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| **Please indicate which of the** [**Bold Ambitions**](https://syics.co.uk/application/files/6816/8666/8429/015307_SYB_South_Yorkshire_Integrated_Care_Strategy_Doc.V20.pdf) **the initiative relates to**  *Please select all that apply* | |
| 1. Focus on development in early years so that every child in South Yorkshire is school ready |  |
| 1. Act differently together to strengthen and accelerate our focus on prevention and early identification |  |
| 1. Work together to increase economic participation and support a fair, inclusive and sustainable economy |  |
| 1. Collaborate to value and support out entire workforce across health, care, VSCE, carers, paid and unpaid. Developing a diverse workforce than reflects our communities |  |
| 1. ‘Other’ cross-cutting initiatives/open category (e.g. digital, data, governance, environmental sustainability) |  |

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| **Please indicate in which place in South Yorkshire the initiative is delivered**  *Please select all that apply* | |
| Barnsley |  |
| Doncaster |  |
| Rotherham |  |
| Sheffield |  |

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| **Name/title of the initiative:** |
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| **Project start date** | *dd/mm/yyyy* |
| **Project end date** | *dd/mm/yyyy* |

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| **How is the initiative currently funded?**  *Please include details of the duration of this funding* |
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| **EXECUTIVE SUMMARY - please provide an overview of the initiative below. This should capture the aims, key organisations involved, delivery to date and the main benefits achieved so far**  Please note – this information may be used to summarise the initiative in external communications  *(Maximum 200 words)* |
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| **PROJECT PROPOSAL – please use this section to share further details about the initiative you are submitting.**  *(Maximum 500 words)* |
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**Declaration**

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| **Applicant eligibility (please tick all boxes)** | | |
| I confirm that I have obtained the approval of my line manager / Head of Department to complete this application, and that they are supportive that all information share in this application is accurate | |  |
| If selected, I confirm I am willing and able to attend the Innovation Showcase event on Tuesday 24th September to represent the initiative | |  |
| If selected, I confirm I am willing to be contacted by NHS South Yorkshire ICB or other regional colleagues around opportunities to share and celebrate the initiative | |  |
| If submitting a collaborative proposal from multiple organisations, I confirm that I have agreement and support of any delivery partners in completing this application and putting forward the initiative | |  |
| **Line Manager / Head of Department name** |  | |
| **Line Manager / Head of Department email address** |  | |