**Perioperative Team of the Year Award**

**In memory of Siobhan Rankin**

**Application Form**

Please complete this form as clearly and concisely as possible ensuring all sections are complete. To qualify for the Perioperative Team of the Year Award, at least one team member must have a valid AfPP membership i.e. have been a member of AfPP for a minimum of 12 months and all membership fees must be up to date at the time of application.

This award is for theatre teams of up to 15 individuals working in Anaesthetics, Scrub, Surgery and Recovery, at any level or role who can be awarded up to £2,000.

**Purpose of Award**

The winning team will receive up to a £2,000 educational bursary to be used by the team within a designated 12-month period. The bursary must be spent on education, resources, courses or programmes which enable team members to meet personal development goals.

**Criteria for Application**

* The lead applicant must be an AfPP member, with a maximum of 15 team members to be listed
* Submissions must fall into one of the three categories listed: Safety, Innovation or Best Practice
* Submissions must be the original work of the team applying
* The 'exercise' to which the application relates must have been undertaken within the last 12 months
* A report must be submitted by the winning team following presentation of the award or completion of the project, for possible inclusion in the AfPP Journal of Perioperative Practice or Innovation, People and Practice or e-bulletin. (The report must be supplied in electronic format)
* Funding must be claimed within 12 months of the grant being awarded and must not be retrospective
* AfPP must be informed if the funding awarded is no longer required

**Examples of previous applications**

* **Innovation*:*** Introduction or new way of using a new medical device, leading to a change in working practice which results in enhanced patient care
* **Best Practice:**New ways of sharing best practice to illustrate a more efficient working perioperative environment
* **Safety*:***Introduction of equipment, procedure or practice which improves the protection of the patient and/or theatre staff

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| **SECTION 1: Personal Details** | | | |
| **Salutation:** Mr/Mrs/Miss/Dr/Other | | **Forename:** | |
| **Surname:** | | | |
| **Home Address:** | | | |
|  | | | |
|  | | | **Postcode:** |
| **Telephone No:** | | | |
| **AfPP Membership No:** | | | |
| I agree to abide by the criteria for general applications to AfPP and confirm that the information I have provided is true and complete. | | | |
| **Signed:** | **Date:** | | |

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| **SECTION 2: Team Details** | | | |
| **Team Member’s Name** | **AfPP Member** | **Membership Number** | **Job Title** |
| 1 | Yes/No |  |  |
| 2 | Yes/No |  |  |
| 3 | Yes/No |  |  |
| 4 | Yes/No |  |  |
| 5 | Yes/No |  |  |
| 6 | Yes/No |  |  |
| 7 | Yes/No |  |  |
| 8 | Yes/No |  |  |
| 9 | Yes/No |  |  |
| 10 | Yes/No |  |  |
| 11 | Yes/No |  |  |
| 12 | Yes/No |  |  |
| 13 | Yes/No |  |  |
| 14 | Yes/No |  |  |

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| **SECTION 2 continued** | |
| I agree to abide by the criteria for the Perioperative Team of the Year Award and confirm that the information I have provided is true and complete. | |
| **Signed (Proposer):** | **Date:** |
| **Signed (Theatre Manager):** | **Date:** |
| Please highlight the category for which you are submitting your application:   * **INNOVATION** * **BEST PRACTICE** * **SAFETY** | |

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| **SECTION 3** |
| Please explain your initial aims in undertaking this exercise, giving examples of its planning and execution (Max 500 words – appendices may be attached and will not be included in the word count). |
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| Explain how this exercise has benefited patient safety and improved the perioperative environment in which you work (Max 300 words – appendices may be attached and will not be included in the word count). |
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| **SECTION 4** |
| Please attach details of all supporting material: i.e.   * Presentations * Reports * Documentation * Points of reference |
| |  | | --- | | **SECTION 5** | | Please give a brief summary of how, if successful, the grant would be spent (max 200 words). | |  | |

Please email completed application form back to [**awards@afpp.org.uk**](mailto:awards@afpp.org.uk)

Awards are granted to members in good faith, however, if the lead applicant should leave the Association in less than one year of receiving their award, they will be liable to refund the monies in full. Applications will continue to be accepted until the award is successfully granted.