**ICB and Training Hub Case Study form**

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| **Name of applicant:** | Click or tap here to enter text. |
| **Email of applicant:** | Click or tap here to enter text. |
| **Organisation:** | Click or tap here to enter text. |
| **Co-Authors and Affiliations:** | Choose an item. |

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| **Type of project being presented:** | Research  Service evaluation  Quality improvement |
| **Programme title:** | Click or tap here to enter text. |

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| **Brief Summary**  (Maximum 50 words) | Click or tap here to enter text. |
| **Programme Description** (maximum 250 words) | Click or tap here to enter text. |
| **Ambitions and Rationale** (Maximum 250 words) | Click or tap here to enter text. |
| **Activities and Contributions** (Maximum 100 words) | Click or tap here to enter text. |

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| **Results**  (Maximum 100 words) | Click or tap here to enter text. |
| **Reflections on Personalised Care**  Maximum 150 words | Click or tap here to enter text. |
| **Impact** (on health and care professionals, patient/public, health and care services - Maximum 150 words) | Click or tap here to enter text. |
| **References** | Click or tap here to enter text. |

By ticking the box, you confirm ethical and/or organisational approvals (if required) have been obtained prior to sharing this work.

By ticking the box, you confirm GDPR principles have been followed for this work.

By completing this submission, you agree to the case study being shared for promotional, advertising and other purposes

Yes, I agree

I consent to my case study being uploaded and shared on the PCI website.

Yes

No

Please send this form back to: [info@personalisedcareinstitute.org.uk](file:///C:/Users/hdunn/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/BY0D4VMA/info@personalisedcareinstitute.org.uk)

Thank you!