# **Project Brief**

***Guidance note:*** *This form should be completed by the assigned project lead or delegated party. The completed form should be saved as a Microsoft Word® document using the following naming convention: YYYYMMDD NCHA Project Brief ‘Title of Project’.*

*The completed form should then be submitted to the NCHA Board –* *info@clinicalhomecare.co.uk*

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| **Project Brief** |
| Project Title:Click here to enter text. |
| Prepared by: Click here to enter text. | Date prepared:Click here to enter text. | Project Sponsor: Click here to enter text. |
| **Project information** |
| Project aim (short description):Click here to enter text. |
| Provide reason for the project: *Identify the problem to be addressed*Click here to enter text. |
| Projected start date: Click here to enter text. | Projected end date:Click here to enter text. |
| **Project scope –** INClick here to enter text. | **Project scope –** OUTClick here to enter text. |
| **Benefits** |
| What is the benefit?Click here to enter text. | Who benefits?Click here to enter text. |
| **Risks** |
| What is the risk? *(of inaction and action)*Click here to enter text. | Who bears the risk?Click here to enter text. |
| Impact assessments |
| Identify relevant impact assessments e.g. Quality, Equality and Diversity, Environmental, Data Security & GDPR.  |
| **Project objectives (SMART)** |
| *Statements of specific, measurable, achievable, relevant, timely outcomes, baseline, expected improvements and how they will be measured:*Click here to enter text. |
| **Prioritisation** |
| Legal, Governance & Compliance - Choose an item.Clinical Outcomes - Choose an item.Patient Benefits - Choose an item.Efficiency / Cost saving - Choose an item.Enabling Homecare Growth - Choose an item. |

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| **Target completion dates** |
| Project Proposal approval date:Click here to enter text. | Options appraisal approval date:Click here to enter text. | Project Brief target approval date:Click here to enter text. | Design and plan milestone:Click here to enter text. | Pilot and implement milestone:Click here to enter text. | Sustain and share milestone:Click here to enter text. |
| **Stakeholders** |
| NCHA stakeholders: e.g. *PMSG, ABPI, NHMC*Click here to enter text. | External stakeholders:Click here to enter text. |
| Project team:Click here to enter text. | Project role:Click here to enter text. | Time commitment:Click here to enter text. |
| **Additional resource requirements** |
| *Staff time, specialist/expert input, equipment and materials travel expense, training etc:*Click here to enter text. |
| **Additional information** |
| Additional information:Click here to enter text. |

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| **NCHA Board Decision – to be completed by NCHA Board** |
| Priority Score:Enter the priority score (0 – 25) | Date of decision:Click here to enter text. |
| NCHA Board decision:Choose an item. |
| Conditions and comments:*(e.g. ‘Approved subject to …’)*Click here to enter text. |